

By Robert W. Murray & Jean-Sébastien Rioux

broadband pandemic universe,

p. 16

By Nancy Peckford

Heard or the Hill **p.2**







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CANADA'S POLITICS AND GOVERNMENT NEWSPAPER

News Foreign policy

Multilateralism suffering 'collective breakdown,' say **Parliamentarians** calling for increased global cooperation

BY NEIL MOSS

s countries around the world Ashift their attention inward, Canadian Parliamentarians say they are worried about the state of pivotal international humanitarian partnerships, and are

Continued on page 6

News COVID-19 & Senate

Some Senators play community fixers with country in lockdown

BY PETER MAZEREEUW

Stuck in their homes like most of us, some of Canada's Senators are using their time away from Ottawa amid the COVID-19 global pandemic to form virtual policy "working groups," help researchers collect data on the crisis, or go to bat for businesses and non-profits in danger of

Continued on page 7

News COVID-19 & U.S.

Keep border closed until U.S. 'breeding ground' for virus under control, say public health experts

'If I were Trudeau I would probably be careful about opening the border with the U.S.' says Melissa Marx of Johns Hopkins University. 'The U.S. doesn't know who is infected and who is not.' Two Canadian experts agree, but Steven Hoffman, who advises governments on health threats, says partially opening the border could be one of the first steps Canada takes to ease the COVID-19 lockdown.





anada should not reopen ✓its borders until new cases of the novel coronavirus are on



the decline, and each one can be traced and contained-both at home, and in the United States, say three experts in public health from both sides of the border.

"I think the United States has to get their epidemic under control," said Mark Walker, a physician and

Continued on page 31

Prime Minister Justin Trudeau

Donald Trump.

said on April 18 that his move to

close Canada's border with the

United States is paying off: 'It has

contributed to

why we are now in many parts of

about seeing a

flattening of the curve, which

is good news. The Hill Times

photograph by

Andrew Meade

House Flickr

and courtesy White

the country talking

Mr. Trudeau

and U.S. President

News COVID-19 & MPs

Government collaboration with MPs 'off the charts' amid COVID-19, says Green Party's May

BY ABBAS RANA

ll MPs and Senators are All MPs and Schmols

Areceiving a daily technical briefing from top government officials on the COVID-19 global pandemic seven days a week, and Green Party Parliamentary Leader Elizabeth May says the level of the government's cooperation with Parliamentarians has been "unprecedented."

Ms. May (Saanich-Gulf Islands, B.C.) said that cooperation makes her feel she can influence

Continued on page 32

News Climate change

Pandemic forces feds to hit pause on climate legislation; environmentalists sanguine about net-zero pledge

BY BEATRICE PAEZ & PALAK MANGAT

Environmental groups say they expect green programs to form the backbone of the government's recovery effort when the COVID-19 crisis abates.

Continued on page 33



'It's just been one wave of shock and grief after the other': Grit MP Zann calls Nova Scotia rampage a 'living nightmare'



Liberal MP Lenore Zann, who represents the riding where much of the violence occurred, says Nova Scotians are finding ways to grieve together despite the pandemic forcing physical distance. Photograph courtesy of Lenore Zann's office

In the days after a gunman killed 22 Nova Scotians along a trail of 16 crime scenes last weekend, Liberal MP Lenore Zann, who represents the Cumberland-Colchester riding where the deadly rampage took place, said her province was still going through a "living nightmare."

"It's just been one wave of shock and grief after the other," she said, since residents awoke April 19 morning to learn a gunman had been on the loose since the night before.

The death toll rose in the hours and days after, meaning people have remained "in a state of shock" in Cumberland-Colchester, a largely rural riding where most of the carnage occurred, she said.

Among the victims of Canada's worst mast killing are RCMP Const. Heidi Stevenson, a teacher, a couple who were correctional officers, and a family of three. The RCMP has not released information about the shooter's motives. The 51-year old man seriously assaulted his girlfriend before beginning the killing spree that ended when he was shot and killed by a police officer. "We are far from the edge of those

"We are far from the edge of those ripples, we're still in it," said Ms. Zann in a phone interview April 23, the day before the Nova Scotia Remembers vigil, a broadcast she pointed to as one way the province

is trying to mourn together even as strict distancing rules amid the COVID-19 outbreak keep many apart, and limit funerals to five people.

"Everybody is coming together to grieve in spite of this," said Ms. Zann, who put out two Nova Scotian flags at her Truro home, joining others who have put up make-shift memorials in their neighbourhoods or tartans in their windows.

The messages to her have been nonstop, and intense, said Ms. Zann, and before the victims' names were known, people were frantically reaching out to her because they hadn't heard from loved ones.

The Liberal MP is among those who are raising questions about why an emergency alert wasn't issued over the 12 hour span in which the gunman evaded police. RCMP has said they were in the process of preparing a message not long before police killed the man believed responsible.

Twitter, the only place RCMP had been posting information, is not widely used in her region, she said.

After she got a call from the Prime Minister's Office on April 19 warning of the active danger, she quickly posted it to Facebook, because that's where she said most in her riding would see the news.

"I would imagine the premier and RCMP will both look at what happened and whether it could have been handled differently," said Ms. Zann, who said she thought an alert should have been sent across the province. Still, the former longtime MLA noted nothing had happened like this in Nova Scotia before, and details were still coming in.

There's been an outpouring of support for Nova Scotians, who she said have been finding ways to connect and support each other, actions that show they do not want to be remembered for this awful event.

"We are a beautiful, loving, kind community here in northern Nova Scotia," she said. "Everyone realizes sadly this kind of thing can happen anywhere. We do not want to be defined by one angry man's violent act." — Samantha Wright Allen

More than 500 days of detainment have passed since arrests of Michael Kovrig and Michael Spavor; Chinese embassy lashes out at MLI

Last week the 500th day passed since Michael Kovrig and Michael Spavor have been detained in apparent retaliation for Canada's arrest of Huawei executive Meng Wanzhou at the behest the United States.

The two detained Canadians haven't had consular visits from Canadian officials since January due to the Chinese government's closure of detention centres to visitors.

The lack of visits may constitute a breach of the Canada-China consular agreement, which mandates that visits to Canadian citizens detained in China "may be made on a recurring basis" and that "no longer than one month shall be allowed to pass between visits requested by a consular officer," as reported by *The Hill Times* on April 15.

Conservative Deputy Leader Leona Alleslev, her party's foreign affairs critic, called the lack of access"a clear violation" of the agreement in an April 23 tweet.

Macdonald-Laurier Institute senior fellow Charles Burton told *The Hill Times* earlier this month that "it's incumbent on the Chinese regime to make the appropriate arrangements that would satisfy their own health regulations to ensure that the Canadian government officials are able to have the consular access to which they're entitled under the international treaty."

"If this is not being extended, this is in fact a very serious diplomatic matter that the government of Canada should not allow to go unresponded to," he added.

MLI itself came under fire from the Chinese embassy last week for an open letter hosted on its website likening the Chinese government's response to COVID-19 to Soviet Union's response to the Chernobyl nuclear disaster.

"The roots of the pandemic are in a cover-up by CCP [Communist Party of China] authorities in Wuhan, Hubei province," the letter reads.

The letter is signed by more than 100 politicians and academics from around the world, including former Liberal justice minister Irwin Cotler, Conservative Leader Andrew Scheer, and Conservative MPs Dean Allison, Michael Barrett, James Bezan, Ed Fast, Garnett Genuis, Peter Kent, Pierre Paul-Hus, and John Williamson, as well as Conservative Senator Michael L. MacDonald and Conservative leadership candidates Peter MacKay, Erin O'Toole, and Derek Sloan.

In a statement, the Chinese embassy said the MLI "grossly interfered in China's internal affairs" by publishing the letter.

"We urge the MLI to abide by the professional ethics, focus on the work a think tank is supposed to do, refrain from politicizing the research work, and give up anti-China nonsense," the statement read.

Former Canadian ambassador to China **David Mulroney** tweeted that the rebuke was "another example of serious overreach by an embassy that needs to be reined in."

Mr. Kent added that it was a "preposterous statement."

"I would like to congratulate the PRC [People's Republic of China] Embassy-Ottawa for helping draw more scrutiny to the Communist Party's intimidation of its own people, and its continued abuse abroad," tweeted MLI senior fellow **Shuvaloy Majumdar**, a former policy director to multiple foreign affairs ministers in the Harper government.

MPs change mailing rules to contact constituents on COVID-19

MPs have temporarily changed parliamentary mailing rules so they can send constituents information about COVID-19, including about health measures and federal financial support

eral financial support.

As with other Hill services, the centralized mailing from Ottawa had been shut down since mid-March, which some MPs worried was closing down a key communication line to inform Canadians about the novel coronavirus.

As of April 17, MPs were given permission to use outside printing services for up to two mailings to every household in their riding, House Speaker Anthony Rota told them in an email that day.

At a Board of Internal Economy meeting earlier, Mr. Rota said the group changed its policies so MPs wouldn't be required to go through Ottawa, though they were also told they could contact the print shop for help. If going outside, the parliamentary printing and mailing staff will still be involved by preparing the proof and print-ready file.

It means the limit for advertising expenses has been increased by 20 per cent for this fiscal year. That will pay for the up to two constituency mail products to each home in each MP's riding, of which one can be a "householder," which typically discusses an MP's parliamentary activities.

Parliamentary mailing privileges grant MPs the ability to print and send up to four householders to every home in their riding each year, and these will be included in that allotment and charged back to the House Administration central budget.

The rule change only allows for content related to the response to the outbreak, but MPs are now allowed to solicit donations for Canadian charities responding to pandemic.

The board also made some other changes to its policies, including allowing MPs to pay for their staff's internet expenses. With so many working from home, the board said "reasonable" residential high-speed service should be covered from March to June.

The changes are in effect until June 30.

— Samantha Wright Allen
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The Hill Times





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Once again, the country is teardrenched by a single shooter

There is a special lexicon for abominable acts. Sadly, most of us know it by heart these days.



Michael Harris

Harris

HALIFAX—Once again, the country is tear-drenched—22 murdered in rural Nova Scotia by a single shooter.

There is a special lexicon for abomi-

Sadly, most of us know it by heart these

Surreal, senseless, horrifying, unthinkable, unspeakable, confounding, and cowardly.



Nova Scotia Premier Stephen MacNeil, pictured on Dec. 9, 2016, at a first ministers' meeting in Ottawa. Mr. MacNeil has refused to judge what the RCMP did, in what the premier called an 'active environment.' There is wisdom in the suspension of judgment until the facts are in, writes Michael Harris. The Hill Times photograph by Sam Garcia

Those words have been used to describe atrocities from Columbine and Sandy Hook to the École Polytechnique. When faced with horror, the first instinct is the hyperbole of disbelief. Then comes desperate denunciation. Words, it seems, ease the sense of helplessness.

There is an equal and opposite outpouring of love for the innocent victims of those homicidal maniacs, who occasionally overrun the calm surfaces of normal life, sowing bedlam.

We put the pictures of their victims on TV to reinforce the value of what has been lost, to momentarily bring them back. We send love and a promise of unity, so that survivors who remain behind, forever damaged, will not feel alone. We lionize any hero who might have tried to stop the atrocity, or who gave succour to the

After the initial shock of mass murder subsides a little, when the pile of teddy bears and flowers is overflowing, the inevitable questions come: could it have been

Is there something in society, lax gun control laws perhaps, or missed danger signals in the perpetrator, that contributed to the tragedy?

And then the big one.

Why would one human being bring so much death and destruction down on others—people the shooter often doesn't even

This dread pattern is slowly working its way through the mind-numbing carnage wrought by Gabriel Wortman over a terrifying orgy of shooting and burning in rural Nova Scotia.

Should the RCMP, who lost one of its own in the 51-year-old denturist's killing spree, have put out an emergency alert long before they shot Wortman dead at a gas station in Enfield—12 hours after the slaughter had begun 100 kilometres away? Opinion is divided on that issue.

Some citizens felt that if they could get an emergency alert about COVID-19, which they did, they should have gotten one about an active shooter on the loose. After all, American citizens in Nova Scotia got an email from the U.S. Consulate in Halifax. The consulate got the information

from the RCMP's Twitter and Facebook postings.

Other people, including Nova Scotia Premier Stephen MacNeil, have refused to judge what the RCMP did in what the premier called an "active environment." There

is wisdom in the suspension of judgment until the facts are in.

But the premier did tell reporters that the Mounties never asked to put out an emergency alert. In fact, provincial emergency managers offered to send an alert to every cell phone in Nova Scotia, just an hour before police shot Wortman dead. That hour passed without word back from the RCMP.

And where did Wortman get the guns he used in his rampage?

There have been reports that the weapons were not legal, and that some came from the United States. If true, then this would seem to be a fitting time for the Trudeau government to bear down on its long-promised gun control policy.

Part of that new policy should include a national protocol for active shootings, including emergency alerts. People planning to go out for a walk ought to know if there's an active shooter on the loose.

The big question, though, is like the dark side of the moon. Why did Wortman do it? There is a saying in the courts that has a bearing on that query: you can't try

That's another way of saying something no one really wants to hear. Short of a video or letter turning up from the shooter, we will never know why this man's heart and mind darkened in such a deadly fashion. But what we do know is Gabriel Wort-

man was no madman in thrall to voices only he could hear. His was a crime of infinite deliberation and planning, and devilish execution.

The impersonation of an RCMP officer was especially diabolical.

Small aside

The other night, an RCMP cruiser pulled into my driveway and an officer rang the doorbell. I automatically opened the door and greeted him. He had noticed that I had left my garage door open the night before and wanted to know if anything was missing. We shared a joke about memory loss.

In Canada's smaller provinces, the ones without provincial police forces, the RCMP is a symbol of trust. By donning an RCMP uniform, and driving a decommissioned police car tricked out as an RCMP cruiser, the killer could approach his victims without arousing suspicion. The last thing any of them would have expected from a Mountie would be harm.

It took time for Wortman to prepare his disguise and paint the car he used in his crime spree. The element of deliberation is beyond dispute.

I have said that people don't like to hear that we will never know why Gabriel Wortman, a man with no criminal record, got angry and aggrieved enough to wipe out so many people.

There is another thing no one wants to hear; no matter what the laws say, no matter how many police you put on the street, no matter how deeply you monitor social media, no matter how brilliant the forensic psychiatry and psychology, the Gabriel Wortmans of this world don't just explode in big cities in other countries. They even come calling in sleepy backwaters like Portapique disguised as Mounties.

That is the innocence that Nova Scotia

Michael Harris is an award-winning author and journalist.

The Hill Times

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Multilateralism suffering 'collective breakdown,' say Parliamentarians calling for increased global cooperation

'As flawed as these institutions are, I think they have to be supported by Canada and uniquely by Canada, because Canada gets its influence through multilateral organizations,' says Liberal MP John McKay.

Continued from page 1

calling for an increased focus on multilateral organizations.

With criticism mounting towards the World Health Organization (WHO) and little global cooperation by G7 and G20 nations to tackle the coronavirus pandemic, MPs and Senators are urging that work be done to protect multilateralism.

"We are suffering from a collective breakdown of multilateralism, which was under stress before COVID-19 ... but COVID-19 is displaying the magnitude of the consequences to global wellbeing," said non-affiliated Senator Peter Harder (Ontario), a former foreign affairs deputy minister.

The government's former representative in the Senate said on April 11 in the Chamber that he is "increasingly worried personally about the mechanisms of international cooperation—G7, G20, the UNHCR [United Nations High Commissioner for Refugees], the UN organizations—because it is not their deficiency I lament, it's their member states not giving them the tools with which to do the job that needs to be done."

Sen. Harder said the world is lacking multilateral leadership in the midst of the pandemic, which he called a "human tragedy of biblical proportions."

When a viral illness such as COVID-19 is spreading, Canada

won't be safe until everybody around the world is safe, he said.

"If there ever was a G20 moment, this is it," said Sen. Harder, adding that the G20 was "crucial" in coming together to address the last recession.

The world is suffering from a lack of leadership in the G20, particularly from the United States, he said.

U.S. President Donald Trump announced on April 14 that he would be suspending funding to the WHO while a review is conducted on its handling of the coronavirus pandemic.

Sen. Harder said U.S. multilateral leadership cannot just be replaced by leadership

from the other member states of the G7 and G20.

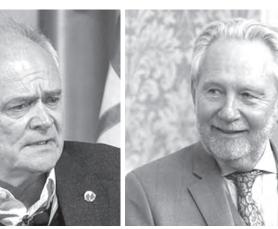
Foreign Affairs Minister
François-Philippe Champagne
(Saint-Maurice-Champlain, Que.)
and International Development
Minister Karina Gould (Burlington, Ont.) have publicly evoked
Canada's commitment to multilateralism.

Mr. Champagne and 24 other foreign ministers from the Alliance for Multilateralism signed a joint statement on April 16 calling COVID-19 a "wake-up call for multilateralism."

"Faced with the unprecedented challenge posed by the COVID-19 pandemic, we must all join forces to contain, counter and prevent its spread. The Alliance for Multilateralism is committed to support the UN, WHO, and other international organizations in their efforts toward this end" read the statement, which was signed by seven of the G20 members, but not the United States, United

Kingdom, China, Russia, Saudi Arabia, or India, among others.

Independent Senator Peter Boehm (Ontario), a former international development deputy minister, said now isn't the time to stop supporting international commitments, saying that all members of the Organisation for Economic Co-operation and Development (OECD) need to



Senator Peter Harder, right, says the G20 is suffering from a lack of global leadership, particularly from the U.S., while Senator Peter Boehm, left, says Canada can use its G7 connections to convince the Trump administration of the benefits of multilateralism. *The Hill Times photographs by Andrew Meade*

ensure they are continuing to make contributions in spite of the economic difficulties associated with the pandemic.

There will be time to examine the state of multilateral institutions once the crisis dissipates, he said.

"Once this wave of the pandemic fades, it will be incumbent on countries that care about multilateral institutions to have a good look at how they can be improved," he said. "It will take a lot of political will and convincing populations that might be increasingly skeptical as they listen to voices that push a more nativist, us-first agenda."

Sen. Boehm said working through the G7 could be a way to convince the Trump administration of the benefits of multilateralism, away from the strategic power conflicts with China.

"I'm sure ... there's a lot of going on behind the scenes, based on my experience this is what happens," said Sen. Boehm, who was the sherpa to the G8 and later the G7 summits from 2013 to 2017. "Not just at the top of government leader-to-leader level, but including between the representatives of countries in these various organizations."

Former Canadian ambassador Gilles Rivard, who is the president of the Retired Heads of Mission Association, said it has been very difficult to make changes to the UN.

Mr. Rivard, a former deputy permanent representative to the United Nations and ambassador to Haiti, said while major changes at the UN are needed, the same member countries that criticize the functioning of the United Nations are split on the way it can be reformed.

Echoing Sen. Boehm, Mr. Rivard said now is not the time to seek to reform institutions that are doing much needed work to attempt to curb the spread of COVID-19, comparing it to an ambulance carrying a patient to the hospital stopping at a garage to change its oil.

"It's the worst time to do that kind of thing," he said, adding that if the U.S. doesn't like how the WHO is functioning it should allow the pandemic to be resolved and then pressure it to improve.

"By weakening the participation of the U.S. in the United Nations, you help China and Russia play a bigger role," Mr. Rivard said.

Kinsman, a former Canadian ambassadorto the United Kingdom, Russia, and others, said the "toxic rivalry' between the U.S. and China, and their attempt to view the work of UN agencies in terms of political advantage, has paralyzed UN agencies.

G7 and G20 "are in a state of abject failure," he said, placing blame on the current chairs who aren't committed to multilateralism-the United States for the G7, and Saudi Arabia for the G20.

Liberal MP John McKay (Scarborough-Guildwood, Ont.), who has said that the WHO may have inadvertently contributed to misinformation in the reporting of virus numbers out of China, told *The Hill Times* that the multilateral organizations are flawed but necessary.

"The UN is a very flawed organization, but if it didn't exist you would have to invent it. NATO is under some pressure. But again, if it didn't exist there would have to be some other alliance arrangement among the various folks in Europe and North America. The WHO, maybe, some flaws have been exposed. But again, if it didn't exist, you'd have to invent it," he said.

Mr. McKay said that establishing replacement organizations could not happen at a time with the U.S. and Chinese rivalry at a flashpoint.

"As flawed as these institutions are, I think they have to be supported by Canada, and uniquely by Canada because Canada gets its influence through multilateral organizations," he said.

NDP MP Heather McPherson (Edmonton Strathcona, Alta.), her party's international development critic, said the Canadian government has an "opportunity to show some strong leadership."

She said that leadership means supplying enough funding, and speaking out when things are not being done.

"In terms of our commitments internationally, in terms of our place on the world stage, the words have always been there, it's the actions and backing it with financial support that has not always been there and that continues to be the case," Ms. McPherson said.

Ms. Gould announced \$159.5-million of funding in early April for UN organizations as well as the WHO.

Jocelyn Coulon, a former policy adviser to then-foreign affairs minister Stéphane Dion and author of Canada is Not Back: How Justin Trudeau is in Over His Head on Foreign Policy, said Canada should do more on the diplomatic side to play a leadership role in addressing the virus through international bodies.

Despite the Canadian rhetoric backing multilateralism, Mr. Coulon said the actions haven't matched the words.

"It seems we have taken a backseat," he said, adding that could be noticed by other countries at the UN when Canada is trying to enlist their support for its Security Council bid.

UN Secretary-General António Guterres called for a \$2-billion plan to aid the most vulnerable countries as COVID-19 spreads across the world.

Mr. Rivard said if we don't help countries in Africa and other more vulnerable countries that it will undermine Canada's ability to recover from COVID-19.

The Associated Press reported last week that there has been a 43 per cent increase in coronavirus cases in Africa and it has less than 2,000 ventilators across 41 countries, including 10 countries that do not have a single ventilator.

Mr. Kinsman said Africa will need "enormous amounts of help."

"That's where the question of funding, tools, and political will kick in," he said.

It will be hard to convince people to be concerned about the more vulnerable nations after their country has recovered from COVID-19 and undergone a "national salvation," he said.

Mr. Coulon said he hopes with progress being made to stop the spread of COVID-19, countries will return to working more multilaterally and address Africa's vulnerabilities to the virus.

"We will need a big program for Africa and perhaps for other continents," he said. "The crisis in Africa is just starting."

nmoss@hilltimes.com The Hill Times

Some Senators play community fixers with country in lockdown

Several Senators with a background in politics told *The Hill Times* that they have been doing the sort of constituency work most often taken on by MPs. 'Because I was a former MPP, a lot of people in and around the area know that they can call for help on stuff,' says Frances Lankin.

Continued from page 1

slipping through cracks of the government's response.

The Senate and the House both adjourned on March 13, a day after the WHO declared the COVID-19 outbreak a pandemic and heeding warnings from public health officials to avoid large public gatherings and unnecessary travel. Some Senators have returned for two single-day sittings since then to pass government bills to provide financial relief amid the crisis; most Senators, however, have been isolated in their homes for most of the past month.

Unlike MPs, Senators do not typically have constituency offices. There are no formal duties that they must fulfill when they aren't in the Senate Chamber. How they spend their time away from Ottawa is largely up to them, and often shaped by the work that won them a Senate nomination to begin with.

That's no different in a crisis. Several Senators with a background in politics told *The Hill Times* that they have been doing the sort of constituency work most often taken on by MPs.

Canadian Senators Group Sen. Larry Campbell (British Columbia), a former Vancouver mayor and the province's former chief coroner, said he and his staff typically field calls and emails from people looking for help dealing with the government. During the crisis, people have asked for help dealing with immigration issues, including a shortage of farm workers, or for help applying for crisis benefits.

Others have called to ask how long the crisis and lockdown would continue, he said, or because their business doesn't qualify for the government's emergency relief programs.

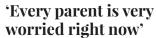
"There's sort of this idea that Senators just go home and put their feet up. That's really not true," he said. "My phone is always on."

Sen. Campbell spent much of the past month living in his RV. He drove across Canada to participate in the Senate's one-day sitting on March 25, so he could avoid getting on a crowded airplane, then drove home, and stayed in the trailer for a 14-day self-isolation before moving back into his house with his family, he said.

"It was pretty amazing, the difference between going out and coming back, just within those two weeks. The difference in public be-

haviour was incredible," he said.

"Going out, people were gathering in parking lots and talking, and there were Ski-dooers everywhere, a fair amount of traffic on the road. Coming back there was none of that, and there was no traffic," Sen. Campbell said.



Independent Senator Chantal Petitclerc (Grandville, Que.) and her family have been cooped up in their Montreal condo. Sen. Petitclerc is a member of the Senate Social Affairs Committee, which has been assigned to study the health side of the government's response to the COVID-19 crisis. The committee is still preparing to start holding virtual meetings while the Senate is adjourned.

Sen. Petitclerc has also been preparing to sponsor the government's bill to reform the medically assisted dying law, C-7, when it arrives in the Senate after Parliament returns. She said she has also been meeting virtually with other Senators who have joined "working groups" to study some of ways in which the crisis is affecting Canadian society.

Sen. Petitclerc and her husband have a six-year-old son, Flliot

"We are very busy, and I think like many, many families, we are struggling with homeschooling, screen time, and trying to keep a life that is normal for this little one," she said. "I think every parent is very worried right now because we want to make sure that they are safe, but we don't want this to leave scars I suppose," Sen. Petitclerc said.

"I see little things, like, he

doesn't sleep as well,"she said.

"My son is really into superheroes, so I really make the case that this virus is like an invisible bad guy, and he just wants to jump from one person to the other. So we need to stay apart, because if he's got no one to jump on, he's gonna die, and we win," she said.

Following the money

Conservative Senator Elizabeth Marshall (N.L.) said Senate







Conservative Senator Elizabeth Marshall, non-affiliated Senator Jane Cordy, and Canadian Senators Group Senator Larry Campbell. Senators say their work doesn't end when the Senate adjourns, and the COVID-19 crisis has kept them glued to their phones and keyboards. *The Hill Times photographs by Andrew Meade*

work has kept her glued to her computer, even though the Senate isn't sitting. A former provincial auditor general and health minister, Sen. Marshall is now a member of the Senate Finance Committee, which has been assigned to meet virtually, like the Senate's Social Affairs Committee, and monitor the financial aspect of the government's CO-

VID-19 response.

Sen. Marshall said she's been following the virtual meetings of the House Finance Committee, which has been given a similar task, and keeping track of the government's often-changing spending programs to prepare for the job. The Senate Finance Committee has not yet begun meeting. She said she has also been keeping an eye on the Bank of Canada, and the Canada Mortgage and Housing Corporation, which has pledged to spend \$150-billion buying mortgage pools to keep the mortgage market afloat.

"All of this money is coming out the door. I think the impression people have is that it's all going to come back," she said.

Sen. Marshall was the Conservative Senate caucus's critic for the government's budget last year. It's not clear when, or if the government will release a budget this year, but Sen. Marshall said she has been trying to prepare for that too.

'Without data, we cannot make decisions'

Independent Senator Yuen Pau Woo (B.C.), the leader of the ISG, said he has been working to help businesses, non-profits, and cultural organizations that have reached out looking for help accessing government relief programs. Those include the Vancouver Aquarium, which lost its income after Canadians were told to stay away from public gatherings, but has still had to bear the costs of caring for its animals.

He has also been working on a project with researchers in B.C. and elsewhere who want to create a central repository for data collected about the health, economic, and behaviour aspects of the COVID-19 crisis.

repository could be made available to researchers Canada, he said, so they can better project things like the impacts of reopening parts of the country currently under lockdown.

"Without data, we cannot make decisions. It's

really as simple as that. We're so caught up now in responding to the crisis, that I'm afraid that we may have neglected this very important aspect of giving ourselves the tools in order to make decisions about the near and medium term future," he said.

Policy go-between, community fixer, and 'designated grocery getter'

Independent Senator Frances
Lankin (Ontario), a former provincial health minister and NGO executive, said she has also been fielding calls from small businesses worried about being missed by government relief programs, farmers worried about labour shortages, and local tourism businesses facing the possibility of a lost summer season.

"Because I was a former MPP, a lot of people in and around the area know that they can call for help on stuff. I've always been getting calls," she said.

Sen. Lankin is the "designated grocery-getter" for her family, since her husband has a compromised immune system, and makes the trek out of her home near North Bay every two weeks. She been working the phones with contacts in the nonprofit sector, passing on some of their concerns to government ministers and policy officers, she said.

Sen. Lankin and ISG Senator Kim Pate (Ontario) worked to pull together 50 Senators to sign an open letter sent to Prime Minister Justin Trudeau (Papineau, Que.) on April 21 calling for the government to re-work the Canada Emergency Response Benefit into a "crisis minimum income" delivered through the CRA's tax rolls.

Sen. Lankin said she has also been participating in another virtual "working group" organzied by ISG Senator Colin Deacon (Ontario) that is focused on the challenges faced by small business in the crisis.

Unlike official Senate committee meetings, the virtual working group meetings don't rely on support from Senate staff, including technical support staff, interpreters, clerks, and stenographers. Sen. Lankin said the meetings have been conducted mostly in

English, with French-speaking Senators accommodating their English-speaking peers.

Study on children's mental health in the works: Cordy

Non-affiliated Senator Jane Cordy (Nova Scotia), a former teacher, is part of another Senate working group started by Independent Senators Stan Kutcher (Nova Scotia) and Mohamed-Iqbal Ravalia (N.L.) focused on how the crisis will affect the mental health of children and youth.

Sen. Kutcher is a psychiatrist who has specialized in adolescent mental health, while Sen. Ravalia is a physician.

The group is still getting organized, but Sen. Cordy said it may carry on working after the Senate returns to normal sittings. The impact the crisis will have on mental health could be felt for some time.

"The fallout is probably yet to come," she said.

Sen. Cordy is also the leader of the Progressive Senate Group, a six-member collection of Senators that is not large enough to be officially recognized in the Senate. Senate leaders have held "a huge number of conference calls," often lasting for hours, she said, to plan the two one-day sittings since the Senate adjourned, and how to deal with emergency government legislation amid the crisis.

She also said she has been called by Nova Scotians asking for Canadian flags to fly, in the wake of the murder of at least 22 people in the province by a gunman on April 18 and 19. She said she has Canadian flags stored in her Ottawa office, but doesn't have any to give away in her home.

"It's been heartbreaking," she said.

Rule changes on the table when Senate returns

Canadian Senators Group interim Leader Scott Tannas (Alberta) said he has also been spending more time helping people from his region to access government services during the crisis, and using some of his time to start preparing for debates around Senate reform that will likely be on the agenda once the Senate returns full time-including separate proposals to change the Senate rules by Sen. Woo and by Independent Senators Murray Sinclair (Manitoba) and Pierre Dalphond (De Lorimier, Que.).

"I think there will be if anything a heightened will among Senators to really look at the rules, and make changes that are more efficient, that recognize that the Senate is a different place than it was before 2015, and that some rules have to change," he said.

Sen. Tannas said he was still doing research on the proposal by Senators Dalphond and Sinclair to change the rules for dealing with private members' bills in the Senate.

"The idea that we would revamp the Senate's ability to not deal with private member's bills, while intellectually that makes sense, there may be a caution there. And I want to understand that," he said.

peter@hilltimes.com The Hill Times

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Editorial

Sloan's clumsy attack obscures real questions about WHO and China

66 X 7 e've got serious concerns about the accuracy of the information coming out of the WHO, and it's incumbent upon this government to explain why they have based so many of their decisions on the WHO."

Outgoing Conservative Leader Andrew Scheer said that on April 15. He had a point.

The World Health Organization made mistakes in the early days of what became the COVID-19 pandemic, and Canada was affected by those mistakes

On April 23, David Naylor, a member of the government's COVID-19 Immunity Task Force, told the CBC that he thought the WHO had been "too deferential" to information from China's government, and that deference had probably caused Canada to respond slower to the disease than it should have.

Back on Feb. 3, Health Minister Patty Hajdu told reporters the WHO had been "very helpful in providing advice to countries in terms of how to best help China contain the

She would later accuse a reporter who questioned the Chinese data of fuelling conspiracy theories.

Canada has fared better than many countries so far in the COVID-19 pandemic. After initially downplaying the threat of the virus to Canadians, the Liberal government has, broadly speaking, done a good job of tackling

Still, nearly 2,000 Canadians have now died from the virus. The Liberal government has made mistakes during and before the crisis, including mismanaging its stockpiles of medical gear, failing to properly explain the rationale behind some of its decisions, and, possibly, relying too heavily on information from the WHO.

It's the job of the official opposition to criticize and question the government's response. In a time of crisis, most Canadians expect that criticism to be honest, fair, and straightforward. Andrew Scheer mostly managed that on April 15.

Conservative MP Derek Sloan's attack on Canada's chief public health officer, Theresa Tam, was none of those things. He called for her to be fired, and suggested that Dr. Tam, who is ethnically Chinese, was loyal to China's government.

Mr. Sloan is a fringe candidate to replace Mr. Scheer as the party's leader, and has managed to raise a great deal of money very quickly in support of his bid to do so. His shots at Dr. Tam may indeed help him to consolidate support among some of the most cynical members of the party's base. It won't help the Conservatives to win the next election, or Canadians to honestly evaluate the government's performance during the crisis.

Mr. Sloan's remarks clearly have a constituency; it's one that is beginning to make the Conservative Party's "big tent" philosophy feel unsustainable.

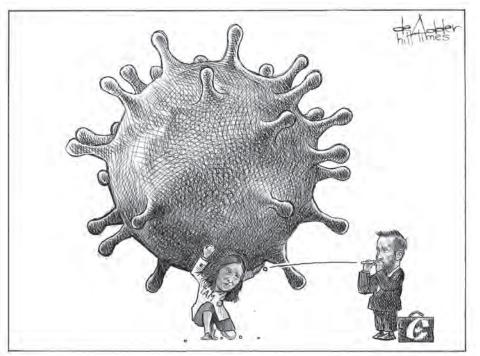
Months or years of work by Conservative MPs and staffers can be destroyed in a moment by an MP who can't resist the urge to cater to a sub-group of conservatives, often to the detriment of the party.

"Trudeau slams 'racism' of Conservative MP's call for Tam to be fired,"blared a headline in The Globe and Mail April 23.

Derek Sloan helped Prime Minister Justin Trudeau criticize the Conservatives in a national newspaper. That may not hinder his bid to take over as the Conservative leader, but it's the kind of thing that makes it difficult for the party to win over the voters it will need to break through in a general election.

Leadership contest or not, all Canadians will be better served if every member of the Conservative caucus can keep the bigger picture in mind.

The Hill Times



Letters to the Editor

No one gets left behind and most vulnerable must have access to life-saving health-care services, says Calgary reader

Recently the Canadian government, with International Development Minister Karina Gould, announced \$160-million to combat COVID-19 internationally and to support essential organizations that provide resources to the most vulnerable. These agencies will be critical in the months and years ahead because they

will be doing the heavy lifting as vaccines and effective treatments are rolled out. It is so important that the world comes together to respond, to ensure no one gets left behind, and the most vulnerable have access to life-saving health-care services.

Randy Rudolph

Gurski exposes his security establishment's pro-fossil fuels bias

Re: "What now for the environmental movement in Canada?" (The Hill Times, April 13, by Phil Gurski). Earlier this month, Alberta's government announced it would invest \$1.1-billion in the Keystone XL tarsands pipeline and provide an additional \$4.2-billion in loan guarantees to help the pipeline's developer start construction immediately.

Alberta Premier Jason Kenney's decision to commit billions to this economically dubious project comes as the Alberta government's budget has been devastated by the mass closure of businesses and a historic decline in the price of oil—a decline so severe that it raises serious questions about the nearterm viability of the tarsands industry.

Against this backdrop, Mr. Gurski, a former CSIS analyst, has raised the spectre of criminal acts by environmental 'extremists'. In his column in the Hill Times, Mr. Gurski suggests that, frustrated by their inability to mount mass demonstrations against Keystone XL during the COVID-19 pandemic, environmentalists might resort to violence.

In so doing, Mr. Gurski has exposed, yet again, the security establishment's pro-fossil

In 2018, Carleton University researchers who had examined internal RCMP documents revealed the RCMP's unequivocal antagonism toward Indigenous groups opposed to fossil fuels infrastructure.

In the extraordinarily difficult circumstances confronting Canadians, there may well be an increased threat of violence, but that threat will not come from the environmental movement, which has proven itself time and again to be overwhelmingly peaceful. That threat, rather, may well come from white supremacists seeking to exploit increased levels of poverty and insecurity to scapegoat and provoke hostility toward racialized groups

Moreover, it is high time that Canada's security establishment asked: who are the real"extremists" in our society? Are the "extremists" conscientious citizens who, actuated by a respect for science and a well-founded concern for the future of our planet, passionately oppose more fossil fuels infrastructure? Or are the true extremists the politicians who disregard the science and expend vast sums of public money to prop up a planet-wrecking and dying industry?

Dimitri Lascaris Montreal, Que.

(The letter-writer is a Green Party leadership candidate).

Why technology and education can help fight COVID-19

s an Afghan-Canadian, I would like Ato provide my perspective on how Afghanistan can strengthen its health systems during the COVID-19 global pandemic. As of April 20, there were 1,026 confirmed cases of COVID-19 in Afghanistan and 33 deaths. One of the main reasons that Afghanistan is lacking medical supplies and medical professionals is due to the long war that has been waging until this day. Afghanistan was not ready for this virus; just like the many other countries, but it has been greatly impacted. Afghanistan not only needs money, but also supplies and professional help from the World Health Organization (WHO). I have been working for more than 10 years in the global health field. My expertise is to

bring the health-care field and technology together to provide much more efficient, urgent, and exceptional care to affected people, not only in Afghanistan, but also across the globe.

A solution to this pandemic, especially for the people of Afghanistan, is a program called tele-health, which consists of a device that allows you to chat with a real doctor to get urgent help without being exposed to COVID-19. As a citizen living in Canada, I have experienced the educational system here and it is one of the best in the world. We have the power to be able to help others by using our knowledge and robust technology.

Meladul Haq Ahmadzai

Ottawa, Ont.

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Death of separatism unintended outcome of COVID-19 pandemic

Instead of trying to go it alone, provinces are stronger when they work together.



Sheila Copps Copps' Corner

OTTAWA—The death of separatism is an unintended outcome of the COVID-19 pandemic.

For the first time in my memory, provincial governments are looking to the federal government as more than just a cash machine.

They are actually working together, pooling resources and information in an effort to fight the spread of a pandemic that knows no borders.

Alberta Premier Jason Kenney has been positively glowing in his exhortations for partners across the country to work together.

While announcing the redistribution of excess Alberta personal protective equipment, the premier was effusively collegial.

It was a far cry from only a few short months ago, when Kenney was lauding the Wexit movement for shining a light on Alberta's oil troubles.

Premiers across the country have been working together with the prime minister to solve the common problem of access to COVID-fighting information, protective equipment and health care human resource shortages.

Without a scintilla of criticism, the Quebec government called in the Canadian military to supplement the shortage of personnel in the province's long-term care facilities.

Pre-pandemic, a similar move would have prompted a howl from those separatists who think Quebec's strength lies in going it alone.

The pandemic also gives us a better picture of the shared benefits of acting as a strong team. Compare the infection and death rates in our country to those in

the United States, and it is abundantly clear that a national, public health-care system is a better weapon against an anonymous virus than the hodgepodge of medical supports available south of the border.

At press time the American death rate was 40 times higher than Canada's, with only ten times the population.

So, one lesson has been learned from our time together in collective self-isolation. Canada works better as a country when we all work together.

On the domestic level, we have an oversight of just what is working and what is not.

The death rate in Quebec is almost double that of Ontario and the gold standard bearer for CO-VID containment is the province of British Columbia.

With a population of more than five million people, the province has suffered fewer than 100 COVID-related deaths. Quebec's population is almost 8.5 million, but their death rate is 11 times greater than that of B.C.

Pandemic post-mortems will undoubtedly delve deeply into the reasons for the mortality discrepancies among different provinces. Some of the provincial differences are self-evident.

The first, and probably most significant, was the difference in the date of spring break between Quebec and British Columbia.

Quebec's break was in early March, at a time when the ferocity of the virus was not yet fully understood by politicians.

Self-distancing had not yet started, and Quebecers brought the virus back home with a vengeance.

In the case of British Columbia, it was the latest school recess in the country, and by the time break-week arrived, the province had already clamped down on travel, effectively limiting the viral path.

Provinces also have different regimes managing their longterm care facilities.

British Columbia did not allow personal service workers to operate in more than one nursing home.

That regulation is cited as one of the reasons that the rapid spread of COVID-19 in Ontario and Quebec homes was not replicated in British Columbia.

During the pandemic, Ontario and Quebec have modified their regulations, but the issue of health workers' pay has not been addressed in kind.

Most health care aides would love to work in one facility only. But the companies that manage many of these facilities for government focus on hiring part-time workers to keep their costs down.

Discussion is ensuing about topping up the pay in these low-wage high-risk health environments, but that is only part of the problem.

The other part is the lack of government oversight into what is actually happening in nursing homes.

Quebec Premier François Legault is promising a fulsome investigation into the deplorable situation in some of the homes in his province. His effective communication skills managed to build public confidence early in the crisis, but the widespread number of deaths in long-term care homes has been eroding his credibility.

Ontario cut the number of inspections in its homes to only nine of 626 homes last year, with the lack of oversight partly responsible for inspection spread. Three years ago, all facilities were inspected annually.

The post-mortem will spawn serious changes to disparate long-term care regimes.

Instead of trying to go it alone, provinces are stronger when they work together.

Sheila Copps is a former Jean Chrétien-era cabinet minister and a former deputy prime minister. The Hill Times

Will Trump lose the battle but win the war?

If you thought populism was bad before the virus pandemic, you better hang onto your hat, because you haven't seen anything yet.



Gerry Nicholls

Post-Partisan Pundit

OAKVILLE, ONT.—Conventional punditry wisdom seems to be that U.S. President Donald Trump can't possibly get re-elected in 2020.

Globe and Mail columnist Lawrence Martin, for instance, likely spoke for many when he recently noted that, "Trump is running with a collapsed economy.... In addition, with the United States having suffered more losses in the battle against the COVID-19 pandemic than any other country, he now has a war record to run on, a record of unpreparedness which has cost his country gravely."

Says Martin, "No president can realistically expect to win under such conditions."

And although it's always risky to bet against Trump's political survivability (just consider all he's survived through so far) it's undoubtedly true that running a re-election campaign during an economic recession is a massive challenge for any politician to overcome. The same challenge, by the way, awaits Prime Minister Justin Trudeau.

Yet before Trump haters revel too much as they await his electoral demise, they should first consider how the same recession, which might doom the president's candidacy, might also boost his populist ideology.

In other words, even though Trump might lose the election, his ideas on protectionism, antielitism and xenophobia might eventually win the day.

I know that sounds counterintuitive, but it could happen.

After all, a collapsed economy—and experts are already anticipating Depression-like



unemployment numbers in the months ahead—is the perfect breeding ground for an aggressive brand of populism.

Keep in mind, populism is fuelled by anger, fear, and resentment, all emotions which will surely be in great supply if the world's economy goes down the tubes.

Indeed, one of the most interesting aspects, at least to my mind, of Trump's victory four years ago, is that his populist message resonated with so many Americans, even at a time of relative peace and prosperity.

So how much more will his message of "Putting America First" and sticking it to the elites and building walls, reverberate when the country has an unemployment rate of 30 per cent or more?

Conventional punditry wisdom seems to be that U.S. President Donald Trump can't possibly get re-elected in 2020 and even though Mr. Trump might lose the election, his ideas on protectionism, anti-elitism and xenophobia might eventually win the day, writes Gerry Nicholls. Photograph courtesy of Gage Skidmore

For instance, I suspect there'll soon be widespread support for restricting immigration.

Yes, economists might argue that higher immigration levels are needed to help grow the economy, but many voters, fearful for their own future, will be swayed by the argument that we need to stop "foreigners from stealing our jobs."

In fact, a recent poll indicated that about eight in 10 Americans now support temporarily stopping immigration from all other countries

Meanwhile, here in Canada, Quebec's government is already pondering plans to limit immigration.

As the economic situation gets worse, this isolationist impulse will only grow.

And speaking of isolationism, another area that's likely to be

impacted by bad economic times is international trade.

Consider that, even at the best of times, people are suspicious of free trade agreements, since it's feared they send jobs overseas, so during an economic recession, expect any call to "keep jobs in Canada" by adopting strong protectionist measures, to be very well received.

So basically, the idea of "globalism" could go by the wayside.

Finally, as our standard of living drastically declines, it seems likely resentment will grow exponentially.

I can easily imagine, for example, how Canadians will bristle when they compare their dreary economic situation to the economic situation of the affluent "one per cent."

This, of course, is where a left-wing brand of "tax-the-rich" populism will probably soar in popularity, with old-fashioned class warfare rhetoric making a big comeback.

At any rate, my point is, if you thought populism was bad before the virus pandemic, you better hang onto your hat, because you haven't seen anything

Gerry Nicholls is a communications consultant.

Global



Planning for Canadian foreign and trade policy in post-COVID world

Canada has an important role to play in global affairs, but only with a fulsome and substantive review of our foreign policy can we hope to be ready for what is to come.



Robert W. Murray & Jean-Sébastien Rioux

Opinion

CALGARY—The actors and processes in the international system have undergone significant change over the last five years, including Brexit, the election of U.S. President Donald Trump, the rise of populism in Western democracies, the relative decline of the United States and rise of powers like China and

Russia. In fact, there is an overall realignment of the post-World War II international society where western values were at the forefront of global decision-making, towards a more anarchic environment where powerful states do as they please.

These global disruptions are having profound impacts on Canada. The volatility and protectionist policies of the Trump administration have meant that we can no longer count on our largest and most important ally. Developing a Canadian foreign policy for a multipolar world has been tumultuous thus far, especially in our experience with China, evidenced by disputes over trade, canola, and the unlawful detainment of two Canadians. Multilateralism has been the cornerstone of Canada's foreign policy since World War II, and the key relationships that Canada counts on for its security and trade, such as the United NATO and the Bretton Woods architecture have been weakened. These disruptions are significant enough that a recent headline in The Economist likened it to Canada being "alone in the jungle."

The global COVID-19 pandemic has further exacerbated some of these challenges and highlighted where the cracks in a globalized system lay. Recent weeks have seen global supply chains for personal protec-

tive medical equipment and pharmaceuticals disrupted by protectionist measures that have threatened Canada's ability to properly plan and respond to the pandemic. The global multilateral health regime has been cast into doubt given the World Health Organization's slow and unclear response, and in the midst of a once-in-a-century global pandemic, which poses an immediate threat to global peace and security, the United Nations Security Council has been absent.

The economic and political fallout from this global pandemic will undoubtedly last for years, though for the time being, resources must be focused on coping with and addressing COVID-19. When the immediate crisis subsides, it will be important for Canada to take stock of how the COVID-19 crisis further demonstrated Canada's lack of preparedness for the emerging world order and the need to re-think Canada's position in the world through a complete review of Canada's foreign and trade policies.

This comprehensive review must see Canada strike a royal commission, something that has not been done since 1982, to review and define our national interests, and long-term trade and economic objectives. It is obvious that Canada must become more independent in the world, must

define a foreign policy that is less dependant on the United States and more reflective of the emerging international order, must review the value of its multilateral commitments, and become more confident in its relationships. This can be realized once a royal commission undertakes a wideranging consultative process that the majority of Canadians can embrace.

A significant focus must be on advancing Canada's interests with the United States, while diversifying our economic and security interests with other likeminded countries. The Trudeau government has had success in its dealings with the Trump administration, but events during the COVID crisis continue to demonstrate that Canada cannot rely on its relationship with the United States alone to navigate global affairs.

The commission would also have to look at Canadian trade policy and objectives, and recently ratified trade agreements, to assess whether there is a close enough alignment in regulations between how we regulate in Canada and help our producers align them with how our trade partners want things done.

There must also be a substantive conversation about an industrial policy framework within Canada's trade policy that is geared to avoiding the greatest

vulnerabilities that COVID-19 has highlighted.

Finally, a royal commission must consult widely on issues related to our energy, natural resources and agricultural export capabilities and export-enabling infrastructure. If Canada is to survive and hope to prosper in a global economic contraction, we must have a national conversation on how our exports fit into our longer-term objectives and how to invest in infrastructure that will ensure Canadians agree on how to grow which exports over the next decades.

The COVID-19 pandemic, combined with the ongoing shift toward a multipolar international system and global economic crisis, have demonstrated beyond any doubt the need for a strong and sustainable Canadian foreign policy and trade strategy to help navigate complex issues in the new world order. Canada has an important role to play in global affairs, but only with a fulsome and substantive review of our foreign policy can we hope to be ready for what is to come.

Dr. Robert W. Murray is the president and CEO of Grande Prairie Regional College. Dr. Jean-Sébastien Rioux is an associate professor and director of the International Policy and Trade Program at the University Calgary's School of Public Policy.

Global

Climate, not COVID-19, is the real crisis of our time

This collapse of production and investment in the industry is hard on the millions of people who make their livings from it, including some entire countries, but the writing has been on the wall for some time now. The sensible and humane course is to support them as they seek different ways of making a living.



Gwynne Dyer

Global Affairs

London, U.K.—For the global oil industry, it has been a double whammy. First a foolish price war between two of the world's three biggest producers, Russia and Saudi Arabia, drove the price per barrel down from almost \$70 in early January to under \$50 in early March. They were fighting each other for market share, and they were also hoping that lower prices would kill off U.S. shale oil, whose production costs are higher.

Then the second whammy: the COVID-19 lockdowns that started spreading across the world in early March cut total demand for oil by 30 per cent in the next six weeks. By last weekend a barrel of 'Brent crude' was selling for only around \$20. (There are two oil prices: 'West Texas Intermediate' mainly for U.S. oil and 'Brent,' always a few dollars higher, for the rest of the world.)

Actually, on April 20, the U.S. oil price briefly dropped another \$60, to -\$40, because demand has dropped so far below supply

that the world is running out of places to store the excess oil. The producers can't just pour it on the ground and it's very expensive to shut wells down, so they'll pay somebody who still has storage

capacity to take it away.

This is currently a problem mainly for inland producers in the U.S., Canada and Russia, because they are far from the ports where you can still hire supertankers (for up to \$350,000 a day) to store the oil offshore. But that cannot be a long-term solution anywhere, so we are starting to see productive wells being 'shut in' (closed down) because that's cheaper than paying for long-term storage of unwanted oil.

This solution has two drawbacks. One is even if the smaller oil producers don't go bankrupt (they generally carry high loads of debt), their leases will cancel quickly if they stop producing oil. The other is that it will be too expensive to reopen many of the shut-in wells unless much higher prices return—and if they stay inactive for years, the production flow may be permanently impaired.

Last week's agreement between all the major oil producers to cut oil production by 20 per cent by the end of June does not begin to address the glut of oil. Global production, at 100 million barrels per day (bpd) last month, will fall to 80 million bpd in the next two months, but global demand is already down around 70 million bpd.

Nor is there much hope in sight. Oil demand may drop further, and even in the long run it may never return to pre-January levels. "This is very reminiscent of a time in the mid-1980s when exactly the same situation happened—too much supply, too little demand, and prices of oil stayed low for 17 years," said John Browne, the former head of British Petroleum.

Peak oil ceased to be a subject for debate some time ago. More and more countries are committing to net zero emissions by 2040 or 2050, and everybody knows that quite a lot of oil (and coal and gas) will be left in the ground forever. So the topic of concern for the industry is now 'peak demand'—and some industry analysts think that it is already past.

"The virus will bring forward peak demand for fossil fuels," Kingsmill Bond of Carbon Tracker told *The Guardian* three weeks ago. "Peak emissions was almost certainly 2019, and perhaps peak fossil fuels as well. It will be touch and go if there can be another mini-peak in 2022, before the inexorable decline begins."

So the stock market valuations of most oil majors have halved since January, and the "golden dividends" of 20 per cent or more are gone forever. The rate of return on new oil and gas projects is now about the same as on wind or solar power projects, so where is the smart money going to go? Oil is "low return, high risk, high carbon," so don't touch it.

This collapse of production and investment in the industry

is hard on the millions of people who make their livings from it (including some entire countries), but the writing has been on the wall for some time now. The sensible and humane course is to support them as they seek different ways of making a living, but climate, not COVID-19, is the real crisis of our time. The jobs cannot and should not be saved.

As for the investors, they deserve little sympathy. They are paying the price of not reading the writing on the wall. The real trick in all forms of gambling is knowing when to pick up your winnings and walk away from the table.

And the real question is: what does the decline of oil mean for our civilization's prospects for dealing with climate change without a global calamity? That, however, is a subject for another article.

Gwynne Dyer's new book is 'Growing Pains: The Future of Democracy (and Work)'. This column was released on April 22.



Opinion

Lessons about climate change for government from COVID-19

Given three decades of failure—the equivalent of the precious weeks wasted before governments reacted seriously to COVID-19—the emergency treatment now required must be a regulated and managed decline of fossil fuel production.



Bill Henderson

Opinion

GIBSONS, B.C.—First of all, I'd like to thank Deputy Prime Minister Chrystia Freeland and her government's leadership and competence in its medical and economic response to the pandemic.

The foremost lesson from the COVID-19 crisis is that governments must act in emergency situations to protect their citizens—even if this means taking measures that cause temporary pain, measures that seriously affect the economy, measures that had been previously heretical.

Another lesson is that, for economic and ideological reasons, some countries acted more quickly and more effectively-or, rather, that most countries did not initially act quickly enough to prevent COVID-19 from becoming more of a threat to both individual health and the functioning of medical delivery and eventually the economy. If precautions had been taken, if there had been a plan and action upon first evidence of the pandemic, we could have been much more successful in controlling infection—flattening the curve. Less people would have infected, treatment would

have been more effective in a much shorter time and therefore less threatening to the economy.

Given three decades of failure—the equivalent of the precious weeks wasted before governments reacted seriously to COVID-19—the emergency treatment now required must be a regulated and managed decline of fossil fuel production that has begun in other countries and that can and will hopefully extend globally as quickly as possible.

Right now, realistically, everybody is preoccupied with surviving this pandemic, with attention gradually shifting to protecting economies that are threatened by collapse and with bridging support from governments. But the time for needed action on climate mitigation has to be now: government action is finally possible, the climate dangers make COVID look like a day off work with a cold.

I have written about managed decline as the essential emission reduction treatment, but also as a strategy that helps fossil industries and regions transition. Regulating decreasing production could raise prices and introduce

certainty. Done properly, it could both save capital and prevent stranded assets. Companies could make money while creative destruction within fully functioning markets allows for the growth of not only new sources of energy, but of a truly post-carbon economy. Government innovation on fossil tenures and financing could protect industry opportunity for when still-valuable fossil fuels can be used without GHGs. Fossil-producing regions could have a few more years of fossil production that do make money while a Green New Dealstyle plan builds out renewable potential that will, in time, create a much more stable and resilient, less fossil-flammable economy.

There are already proposals for economic planning for the end of the "dance phase" of the COVID-19 treatment. Jim Stanford's new Marshall Plan idea is a good example. As we get closer to the end of this suppression stage, the federal government will be increasingly confronted with its ongoing failure to properly mitigate climate. It will sooner or later have to act. Sooner has way better results for everybody.

The federal government should be at least considering these lessons from its COVID-19 experience. It should be considering regulating a managed decline and how the country can take advantage of the present creative destruction. I expect that the federal government is under tremendous pressure to throw a lifeline to slumping fossil fuel industries and regions, but policies to bridge a return to the past economy are problematic because of the amount of damage donedirectly and indirectly—and the innovation that is already occurring. The federal government should support the workers and their communities like it's doing throughout Canada and it should explain why a rapid transition is now the only realistic policy path forward

The COVID-19 crisis really is an opportunity for our federal government to finally do the right thing for Canadians, for our kids, and for those most at risk globally. Exporting fossil fuels is now unconscionable. It has to stop. It is morally untenable. And presently we are throwing good money after bad instead of making the climate transition in the timeframe needed—as quickly as possible and not stupid "herd immunity" excuses for waiting in Brazil's Jair Bolsonaro-style plan to fail.

Bill Henderson is a longtime climate activist based in Gibsons, B.C.

The Hill Times

Firearms remain a serious public health concern, even during a pandemic

We implore the federal government to take one decisive, achievable action right now: ban the new sale of militarystyle assault weapons.

BY NAJMA AHMED, HEIDI RATHJEN, WENDY CUKIER, KEN PRICE & CLAIRE SMITH

On behalf of Canadian Doctors for Protection from Guns (CDPG), PolySeSouvient, the Coalition for Gun Control, and Danforth Families for Safe Communities, we are writing in deep sorrow. Like all Canadians, we grieve with the families and communities affected by the mass shooting in Nova Scotia last weekend.

With health workers, policy makers, and all Canadians focused on the COVID-19 crisis and efforts to keep patients, communities, and families safe, it is indeed tragically unfortunate that attention must be briefly directed to another issue, but the consequences of gun violence are not



constrained by a virus: firearms remain a serious public health

concern, even during a pandemic.

This devastating tragedy has supplanted the original intent of our writing, which was to express our alarm over continuing media reports of an "explosion" in sales of ammunition and guns—including military style assault weapons.

As Public Safety Minister Bill Blair and the federal government are aware, measures to contain the virus—necessary as they are—they are also increasing the vulnerability of women and children in abusive environments. As has been noted by mental health experts, there is also a heightened risk of anxiety and depression during this time of health and economic uncertainty and physical distancing. The scientific evidence demonstrates very clearly the links between access to firearms and the risk of femicide, suicide, and accidental shootings.

Further, the pandemic and associated misinformation campaigns have led police and anti-hate experts to warn of a risk of violence from far-right groups. The propensity for such groups and individuals to stockpile guns, particularly military-style assault weapons, has been noted in Canada.

On both sides of the border, gun lobbies and their supporters have for years deployed a rhetoric of fear and isolationism that equates guns with freedom and personal protection. This creates a potentially dangerous environment during a pandemic. As medical experts can attest, a gun cannot protect you from a virus.

Our organizations' shared position on gun control is well known. We understand that prior to the pandemic the government had been preparing to act on election promises to restrict access to firearms. While we appreciate the capacity for substantive policy change is difficult at this momentand acknowledge the government's efforts to respond to the gravity of the COVID-19 crisis and resulting consequences—we implore the federal government to take one decisive, achievable action right now: ban the new sale of military-style assault weapons. As has been well documented, these guns pose an excessive risk to public safety and serve no reasonable purpose.

As this pandemic has taught us, preventative measures to protect public health and safety work, and Canadians have coalesced around the importance of scientific evidence. Blair has the power take an evidence-based measure right now that will save lives. Sadly, we cannot reverse past tragedies, nor prevent all future tragedies, but we can do much more to reduce the risk.

Dr. Najma Ahmed is with Canadian Doctors for Protection from Guns, Heidi Rathjen is with PolySeSouvient, Wendy Cukier is with the Coalition for Gun Control, and Ken Price and Claire Smith are with Danforth Families for Safe Communities.

Comment

Halting disinformation in a time of pandemic: the need to tread very carefully



One man's terrorist is another's freedom fighter, so they say: so what about 'disinformation'?



Phil Gurski
National Security

OTTAWA—A newish term we have all begun to see much more often these days is that of "disinformation" (a.k.a. "misinformation"). We all read about attempts by the Russians and other nefarious actors to influence the democratic process in the U.S. and France by flooding the internet with made-up stuff. At one point, this was headline news and even raised in conjunction with a possible impeachment of a U.S. president.

It is probable that the word means different things to dif-

ferent people, but, in essence, it is the attempt to gain influence through the creation, distribution and promotion of lies. Sometimes these falsehoods are the work of states and at others that of individuals (or groups). They become dangerous, and hence of interest to governments, when they begin to have an impact on issues relating to public safety and/or national security.

One such instance of disinformation that has reached this level of effect is unfolding as I write. I am referring, of course, to the current COVID-19/novel coronavirus which is sweeping the world. The health consequences are dire enough—acute illness and death—as are those on our economy and national well-being.

As a result, states have a vested interest in trying to ensure that their citizens have the best (real or true) information at their disposal to make the best possible decisions, all aimed at lessening the damage wrought by the disease, which will lead to a return to normalcy, or the best proximity to "life before COVID-19."

The types of lies that are rampant on social media and other platforms include things such as the contention that there is no health crisis requiring social/physical isolation; quack medical remedies; claims that the virus is

a bioweapon designed by any or all of the CIA, China or Bill Gates; or the belief that this was all a plan by the "deep state" to take away our freedoms, and so on.

In this light, the state has both the duty and the right to take action to minimize, or better yet eliminate, these lies. It cannot allow coronavirus deniers to propagate their views as this will undermine the steps taken to 'flatten the curve'. It has an obligation to shut down fake cures that could cause unnecessary death or injury. It has a need to tell citizens that there is no 'grand plan' (i.e., a conspiracy theory) to take over the world. All these are indeed both public safety and national security issues.

So, how far should or can a government go to achieve all these goals? Can it mandate the destruction of disinformation? Can it force social media outlets to monitor, identify and erase misinformation placed on their platforms? Can it ask citizens to snitch on those behind the flummery?

These are all very good questions that we need to ask if we want to maintain our liberal democratic societies. What, then, about legislation to give these measures the power of the law? That is what the Trudeau government appears to be considering.

According to Privy Council President Dominic LeBlanc, the federal government is considering introducing legislation to make it an offence to knowingly spread misinformation that could harm people. And it is eliciting opposing views from MPs.

"This is not a question of freedom of speech. This is a question of people who are actually actively working to spread disinformation, whether it's through troll bot farms, whether [it's] state operators or whether it's really conspiracy theorist cranks who seem to get their kicks out of creating havoc." NDP MP Charlie

Expressing a different view, Conservative Leader Andrew Scheer stated that, "We're concerned when this government starts talking about free-speech issues. They've got a terrible history over the past few years of proposing ideas that would infringe upon free speech. Any time this government starts talking about regulating what people can say and not say, we start off the conversation with a great deal of healthy skepticism."

What then to do?

This is indeed a tricky issue. What constitutes "disinformation" when it comes to COVID-19? Who decides? Who implements the removal of information? Does

the law apply only to coronavirus fakery? What are the penalties for companies that do not act fast enough or at all? Social media platforms have taken unprecedented steps to fight misinformation online but some critics in Canada say they could still do more

Perhaps the most fundamental question is whether Canadians want their government to act as a nanny state or a gate-keeper who decides what we can and cannot consume in terms of information. Are any of us okay with that?

Would a better solution not be to counter disinformation with better information? I see these efforts as a colossal game of whack-a-mole whereby the government and private sector are continuously taking down sites and posts only to see more proliferate. Hercules had an easier time with the Hydra!

I think we all agree that the crap out there on coronaviruses is not helpful. Less garbage is clearly better than more. But what is the best way to get to that goal?

Phil Gurski is the director of the security, economics, and technology program at the University of Ottawa and a former strategic analyst at CSIS.

We'll need the capability to restart the economy once pandemic fades

This means ensuring that we have the companies ready to drive future growth—ensuring they survive the pandemic world to help lead growth and job creation in the post-pandemic world.



David Crane

Canada & the 21st Century

TORONTO—The first priority is to do everything we can to protect the health of Canadians. The second is to ensure Canadians have enough income to meet basic needs so long as the pandemic prevents them from working.

But there is a critical third priority, which is to make sure that we have the capability to restart the economy as the pandemic fades.

This means ensuring that we have the companies ready to drive future growth—ensuring they survive the pandemic world to help lead growth and job creation in the post-pandemic world. It is through companies that we innovate, produce tradeable goods and services for sales at home and for export, and create jobs as well as the tax revenues governments need to provide the public goods we value.

This is why there is so much concern over the precarious state of many of our most promising tech companies that were on the scale-up path before the pandemic hit. They now find themselves with slumping revenues and a lack of capital to continue innovative investments and are at risk of losing their teams of talent, one of their most important investments. Without talent, there is no innovation.

The innovative tech world is not just the world of information and communication technologies. It includes, for example, clean technologies, new forms of energy, safe and sustainable water systems, new housing technologies, genomics to improve agricultural yields and sustainability, medical technologies, pharmaceuticals, new materials, production processes and technologies, and



pandemic world will be difficult and there will be no overnight recovery—it won't be V-shaped. But one thing we can do now is to make sure that our future drivers for growth-our innovative tech companies—are well-positioned to play their key role in our post-pandemic world, writes David Crane. The Hill Times photograph by Andrew Meade

the circular economy of waste elimination.

It has taken time for governments to pay attention. The unique position of innovative tech companies meant they did not benefit from many of the early federal initiatives to help businesses. For example, many tech companies found they did not qualify for the Canadian Emergency Wage Subsidy, which was decigned to

designed to help companies keep employees on the payroll or rehire them.

To some extent, government has responded. But more remains to be done. For tech companies that could not retain employees under the emergency wage subsidy, a new initiative under the Industrial Research Program, or IRAP, has been \$250-million to provide a similar benefit. As

National Research Council president Iain Stewart told the Council of Canadian Innovators (CCI), the goal is to help tech companies that are R&D-intensive, technology-focused and innovative, or part of supply chains, to retain highly qualified personnel.

This should help technology entrepreneurs "stay afloat," says

Ben Bergen, executive director of the CCI. But more is needed. Moreover, it remains to be seen how well the government's Business Credit Availability Program meets the needs of tech companies

Likewise, it remains to be seen how well the promised \$962-million in funding through regional development agencies will help the tech world.



The government has responded to concerns that some Canadian companies might be subject to foreign takeovers because of their weakened position. The government says that "certain foreign investments" will be subject to "enhanced scrutiny" by Investment Canada. "Direct investments of any value, controlling or non-

controlling, in Canadian businesses that are related to public health or involved in the critical supply of goods and services to Canadians or to the government, will be subject to review," with even greater scrutiny where the foreign investor may be a stateowned enterprise.

But it is not clear what the government means by "critical goods and services." In particular,

will this apply Minister of to the large Finance Bill number of tech Morneau, companies pictured that are at risk on April because of 11, 2020, the economic speaking lockdown? with reporters That is essenat a media tial. Moreover, availability in simply blocking West Block foreign taketo update overs, while Canadians important, is about the not enough. ongoing

Our promising growth companies also need capital as they scale up. One reason that so many Canadian tech companies have been sold off in the past is that this was the

only way to obtain the equity or patient capital needed to take the next step for growth.

Some of this need can be supplied through improved access to capital. The Canadian Advanced Technology Alliance has called for a \$3.6-billion fund to provide zero-interest loans, with a forgivable portion, for tech firms with

a proven track record. This could help.

But scaling up tech firms need equity as well as loans. One way to provide equity, if financial markets are on hold, would be to set up an arm of an existing federal corporation, the Canada Development Investment Corp., to make investments in tech companies with growth potential, selling these shares into the market or back to the invested company at a future date.

Another way to get more money into the hands of small and midsize innovative companies is to accelerate the payment of refundable tax credits under the federal R&D tax incentive. At the end of March, there were 1,755 companies across Canada that had applied for \$231.6-million in refundable credits. This is money that in effect belongs to the companies themselves and. says CATA, payouts could be accelerated because the Canada Revenue Agency already has records of most companies that use the program. That should make it easier to fasttrack payments now.

What else? We have to keep thinking. For example, how well can the federal and provincial governments use procurement to help tech companies prove up technologies and create markets by being an early customer?

The post-pandemic world will be difficult and there will be no overnight recovery—it won't be V-shaped. But one thing we can do now is to make sure that our future drivers for growth—our innovative tech companies—are well-positioned to play their key role in our post-pandemic world.

David Crane can be reached at crane@interlog.com.

Gotlieb revolutionized Canadian diplomacy with our primordial partner

Allan Gotlieb died last week at the age of 92, but his insights into the U.S. and the value of public diplomacy continue to have application and relevance today.



Colin Robertson

Opinion

The best of mandarins, as our ambassador to the United States, Allan Gotlieb revolutionized Canadian diplomacy with our primordial partner. His insights into the U.S. and the value of public diplomacy continue to have application and relevance.

His schooling set him up as a comer: as an undergraduate at Berkeley, a Rhodes Scholar at Oxford, and then Harvard where he edited the *Law Review*. In 1957, Gotlieb joined what one of his Oxford tutors told him was the best foreign service in the world.

He developed a life-long appreciation of the importance of the rule of law in international relations, starting with his work on the Law of the Sea under the mentorship of our most accomplished lawyer-diplomats, Marcel Cadieux, who also served as our ambassador to the U.S.

International law, Gotlieb tutored me and fellow foreign service officers, is how middle and small powers level the field against the big powers. It didn't always work—there is a trap door for the great powers—but for a country like Canada it should be the instinctual approach. It works best when we act in association with like-minded countries and Gotlieb told us never to discount our power as a convenor of nations. But if multilateralism bilateralism. He thought this especially important when dealing with the United States because while deepening integration made us more dependent, it also gave us certain advantages, if we were smart enough to use them.

As a young foreign service officer, Gotlieb impressed then federal justice minister Pierre Trudeau. They shared sophistication, brilliance, and supreme self-confidence. Neither suffered



then applying them to practical purpose, writes Colin Robertson. The Hill Times photograph by Jake While the Diaries record the detail, the Allan Gotlieb method is best described in a slim volume entitled I'll Be With You In A Minute, Mr. Ambassador: The Education of a Canadian Diplomat in Washington. The Hill Times photograph by Jake Wright



Allan Gotlieb's eight-year tenure as Canada's ambassador in Washington, D.C., between 1981 and 1989 was marked by two main trademarks: an ambitious and activist public diplomacy and an activist strategic outreach to Congress. The Hill Times photograph by Jake Wright

Allan Gotlieb, pictured at

for an interview about his

Wilfrid's at the Château

Laurier Hotel in 2006

book, The Washington

Diaries: 1981-1989,

a national bestseller.

He saw government

as a powerful force for

the good: generating

and testing ideas and

fools. They could be abrasive. Empathy was not a strong suit. After Trudeau became prime minister, Gotlieb was promoted into the new generation of deputy ministers, serving in the freshly-minted Department of Communications (1968) and then at Manpower and Immigration (1973).

As a favour to professor Peyton Lyon, a fellow Winnipeger and former foreign service officer, Gotlieb spoke to my class at Carleton University's Norman Paterson School of International Affairs. I can still see his cigarautre temps, autre moeurs-punctuating his points about our open attracting those with the talents we needed served Canadian interests. If geography was destiny so was demography and we could shape it through public policy. He saw government as a powerful force for the good: generating and testing ideas and then applying them to practical purpose.

For Gotlieb, policy coherence was vital. So was policy coordination. Returning in 1976 to the Department of External Affairs as its undersecretary, Gotlieb determined to give it a central role in developing Canadian policy. This meant making External Affairs a central agency, the equal of the Department of Finance, Treasury Board Secretariat and Privy Council Office. Rather than run programs—it had very little discretionary funds—External Affairs would coordinate Canada's international policies using its brain-power and the intelligence of its missions abroad. We were encouraged to offer dissenting perspectives, often published publicly in International Perspectives. Gotlieb led by example and I still the Third Option that he penned with Jeremy Kinsman (whose own tribute to Gotlieb should be

Gotlieb set about consolidating the foreign service. Lacking authority and budget, the department could not control, but it could better coordinate activities abroad if Canada was to punch its weight internationally. First, under its orbit came the trade commissioners followed by the

immigration officers. It would take another 20-plus years before development and its big budget would join what is now Global Affairs Canada.

Raising the foreign ministry to central agency status was the right one. Yet it failed to take. There was bureaucratic resistance to ceding turf and his successor as deputy minister did not share the Gotlieb vision.

More successful and more enduring was Gotlieb's reform to how we do business in Washington. His eight-year tenure as ambassador between 1981 and 1989 was marked by two main trademarks: an ambitious and activist public diplomacy and an activist strategic outreach to Congress. Both were vital to achieving the 1989 Free Trade Agreement and then, after he left, the 1991 Acid Rain Accord. Carried forward by his successors, this blueprint continues to deliver results for Canada.

Gotlieb and his wife Sondra figured out how Washington worked. An invitation to their Rock Creek residence was a guarantee of powerful people and consequential conversations. His Washington Diaries published in 2006 describes, for example, visits by secretary of state George Shultz and his wife who would come and relax while watching Fred Astaire and Ginger Rogers movies. Gotlieb also secured the prized location that our embassy enjoys on Pennsylvania Avenue and beat back the bean-counters and worry-warts who thought the Arthur Erickson-designed embassy was too grand. Cultural diplomacy was a major piece of his public diplomacy and the embassy was outfitted with both a gallery and a theatre that we used with effect.

While the *Diaries* record the detail, the Gotlieb method is best described in a slim volume entitled I'll Be With You In A Minute, Mr. Ambassador: The Education of a Canadian Diplomat in Washington. It contains the Gotlieb "decalogue" for the conduct of the "new diplomacy" in Washington. It continues to be relevant, if not prescient:

- 1. The particular process by which a decision is reached in Washington is often so complex and mysterious that it defies comprehension.
- 2. The most important requirement for effective diplomacy in Washington is the ability to gain access to the participants in the decision-making process.
- 3. Given the vast numbers of players in the field of decision-making, and the great difficulty of predicting their likely behavior, the highest possible premium must be placed on political intelligence.
- 4. Since there are so many participants in decision-making, so many special-interest and pressure groups and so many shifting alliances, a diplomat cannot design any grand or overarching strategy to further his nation's interests. Every issue involves its own micro-strategy and every micro-strategy is unique.
- 5. In Washington, a foreign power is itself just another

- special interest and not a very special one at that.
- A foreign power, as a general rule, has no permanent friends or adversaries on Capitol Hill.
- 7. A foreign power, as a general rule, has no permanent friends or adversaries within the Administration.
- 8. No permanent solutions are within reach of the ambassador or his government, only temporary ones. Instability is the norm, alliances and coalitions are always being forged, forces and counterforces are always mounting.
- Effective diplomacy means public diplomacy. The line between public diplomacy and interference in local affairs is a thin one and thus it must be practiced with considerable finesse.
- The best and often the only way to gain access to all the key players is through the social route. In Washington, parties are a continuation of work by other means.

Allan Gotlieb taught me many things: about policy and personalities, about public and cultural diplomacy. I benefited from his generous introductions to those in his remarkable network. He taught me about the United States and our conversations would inevitably come back to his belief that our success internationally would always hinge on our understanding of the Great Republic. "The U.S.A.," he would remind me, "is more than a country, it's a civilization." Americans were always interested in our insights about the rest of the world and this gave us leverage and the potential to influence, both in Washington and foreign capitals. Foreign countries were just as interested in our interpretation of the U.S. assuming that, because we were like them, we had special

One lesson that served me especially well came when I travelled to St. John's with him and Sondra shortly after his appointment to Washington. It was a conventional program, including a meeting with the premier that revolved around a day-long conference at Memorial University.

But after we'd met the notables, Gotlieb informed me that "conferences were like smorgasbord—you sample a bit here and there." One could always later read the prepared remarks, most of which were inevitably badly read. The real value of conferences, he told me, is the networking "so be there for the breaks." Diplomacy was about getting to know people and place. To get a "feel of a place," continued Gotlieb, you had to get out and see it for yourself.

So we played hooky and toured St. John's—the galleries, the port, Signal Hill, the cathedral and the basilica. There were impromptu meetings with the justice minister, the Fish Food and Allied Workers Union and the editor of *The Telegram*. The day rounded off with an evening that included John and Jane Crosbie. That was the Gotlieb way. It served Canada well

Colin Robertson is vice-president and fellow at the Canadian Global Affairs Institute.

Opinion

Rural broadband in a post-pandemic universe

We must take an ambitious and bold approach in the months and years ahead that is fully inclusive of the broadband infrastructure on which Canadians everywhere increasingly rely.



Nancy Peckford

Opinion

KEMPTVILLE, ONT.—As much of North America has ground to a halt to slow the spread of COVID-19, our reliance on virtual networks has only intensified. All of a sudden, what was the exception has become the rule—whether it's employees working from home, clients using online platforms for shopping, taxes, doctors' appointments, and classes or families streaming a live concert in lieu of the real thing.

To state the obvious, and as parents, professionals, and business leaders will attest, without good broadband internet, none of this would be possible. And what was once considered a perk of a well-networked neighbour has now become a lifeline for ourselves and the economy.

Our collective grasp on what makes this largely invisible infrastructure tick is remarkably weak, however. If you have good internet, it's nearly unfathomable to imagine life without it. Yet, only a quarter of Canadians living in rural households have access to the new CRTC minimum standard for broadband, 50/10. In layman's terms, this amounts to 50 Megabits per second (Mbps) download speeds and 10 Mbps upload speeds, a standard inconceivable for those with two or three Mbps on a good day.

Many assume those under-served are in the Far North or highly remote locations. But this isn't the case. Right here in eastern Ontario, excluding the urban portions of places including Ottawa, Kingston, and Belleville, only 45 per cent of households and businesses have 50/10. Go a few kilometres outside urban boundaries, and access diminishes dramatically.

Of the estimated 750,000 non-city dwellers who live, work, or farm anywhere between Northumberland County to the west to the Quebec border (excluding Ottawa), good broadband is a matter of good luck. How close are you to the nearest tower? Are there hills? Who are the heavy data users like teenagers, home entrepreneurs, or commercial operators?

That's why EORN, the not-for-profit Eastern Ontario Regional Network, has—as its mission—to bring improved



Federal Rural Economic Development Minister Maryam Monsef's government has committed up to \$6-billion to close the digital divide, a widely lauded investment. But the reality is we must be willing to spend far more to future proof our economy, and ensure rural Canada is fully equipped to not only survive, but to thrive in a post-pandemic universe, writes Nancy Peckford. The Hill Times photograph by Andrew Meade

broadband to the 1.1 million folks who live across this 50,000 square-kilometre region (the same size as of Nova Scotia).

For a decade now, EORN has developed and delivered region-wide connectivity projects for businesses and homeowners through strategic public private partnerships. Governments and internet providers have already spent nearly 175 million to ensure basic internet for everyone. Another \$200 million will help close the cell gap.

Recently, EORN took on the challenge of mapping every property location from residential, farm, commercial, and institutional to determine demand areas for internet in eastern Ontario. Purchasing MPAC data and engaging seasoned engineers, EORN knows not just how to meet the CRTC standard, but to go well beyond it with a gigabyte to every property.

Why invest in a gigabyte now, when many urbanites don't even have it? As we all know, speed and capacity are the essential ingredients for high speed and a gig of bandwidth

provides both. As opposed to incremental investments, a gigabyte is a game changer.

It enables more businesses to invest in rural Canada by maximizing their online presence. Governments can deliver virtual health care and other services more efficiently, and educators can provide content-rich teaching without a physical classroom. The agriculture and manufacturing sectors, increasingly reliant on GPS, IT and automation, can leverage cutting edge technology outside of the big cities.

The cost to bring a gigabyte to the one million plus folks in eastern Ontario is estimated at between \$1.2-billion and \$1.6-billion. To achieve the CRTC's much lower 50-10 minimum standard is approximately \$750-million.

EORN would expect that even at a gigabyte, based on past success, a tri-partite cost sharing arrangement with the federal/ province governments and private sector would be the most likely.

Of course, these are still big numbers. Federal Rural Economic Development Minister Maryam Monsef, who is also the Member of Parliament for Peterborough-Kawartha, Ont., understands the urgency of the need. Already, her government has committed up to \$6-billion to close the digital divide, a widely lauded investment.

But the reality is we must be willing to spend far more to future proof our economy, and ensure rural Canada is fully equipped to not only survive, but to thrive in a post-pandemic universe.

It's not lost on anyone that high-speed broadband internet is crucial to a strong and diverse economy that connects Canada as much to itself as the world. With that in mind, we must take an ambitious and bold approach in the months and years ahead that is fully inclusive of the broadband infrastructure on which Canadians everywhere increasingly rely.

Nancy Peckford is the mayor of North Grenville, Ont.



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McKinnon in talks with WHO's Alyward to appear before House Health Committee p. 18

Why has Canada's data collection during the pandemic been so bad? p. 27

Fight against COVID-19 hasn't been easy, and it's not over yet p. 22

COVID catastrophe in Canada's long-term care system must end p. 24

Why does it take a crisis to understand health workers are our health system? p. 30

A view from EU: our COVID-19 response at home, abroad p. 28

Medicine shortages a wake-up call for drug security p. 23

Finding safety during COVID-19 pandemic p. 29

What I learned about COVID-19 response in Sweden p. 28

Charitable sector essential during COVID-19 crisis, but needs support p. 27

Health Policy Briefing

McKinnon in talks with WHO's Aylward to



MPs on the House Health Committee are hoping to have Dr. Bruce Aylward, pictured in 2015 and head of the WHO-China joint mission on COVID-19, testify remotely before committee by Wednesday, April 29. Photograph courtesy of Flickr/UNMEER

Dr. Bruce Aylward was supposed to testify remotely before the House Health Committee on April 14. The committee is hoping to have him appear on Wednesday, April 29.

BY AIDAN CHAMANDY

MPs on the House Health Committee are hoping to have Dr. Bruce Aylward, head of the WHO-China joint mission on COVID-19, testify before committee by Wednesday, April 29.

NDP MP Don Davies (Vancouver-Kingsway, B.C.), his party's health critic and a member of the agenda and procedure subcommittee, said members received an update at the subcommittee meeting on Thursday, April 23, that Dr. Aylward was in Geneva and that the WHO is trying to arrange a way to have him appear before the committee by videoconference, but that nothing has been confirmed.

A spokesperson for Conservative MP and health critic Matt Jeneroux (Edmonton Riverbend, Alta.) said if Dr. Aylward does not appear, the committee will discuss their available options.

Liberal MP Ron McKinnon (Coquitlam-Port Coquitlam, B.C.), chair of the House Health Committee and member of the procedure subcommittee, told fellow Health committee members at the close of the April 21 meeting that he had been in contact with Dr. Aylward after the WHO official cancelled testimony previously scheduled for April 14, citing an urgent COVID-19 matter.

Mr. McKinnon said he would be reaching out to Dr. Aylward later in the day on April 21, or early on April 22. Mr. McKinnon did not respond to multiple requests for comment by filing deadline. The WHO said they "have received a request for technical information and is giving it due consideration," spokesperson Tarik Jasarevic wrote in an email on Thursday.

Dr. Aylward, a Canadian epidemiologist and longtime WHO senior official, was originally set to testify before the committee at 2 p.m. on April 14 but cancelled at the last minute, saying he had to deal with a pressing COVID-19 issue

At the April 15 committee meeting, Mr. Jeneroux moved to request that Dr. Alyward appear before MPs on April 29. All 11 members voted in favour of the

Mr. Jeneroux and other members of the Conservative caucus, including Conservative leader Andrew Scheer, have been highlycritical of the WHO's response to COVID-19, arguing the UN agency is unduly influenced by China and lacking in credibility.



Conservative Leader Andrew Scheer, pictured here April 20, has been highly critical of the Chinese government's COVID response. The Hill Times photograph by

Andrew Meade

explanation to his fellow citizens.

I look forward to the opportunity

Commons Health Committee,"Mr.

to question him at the House of

Jeneroux said in a statement.

"We are now in the middle of a health pandemic where information, being provided to the [WHO], is not reliable, not accountable and therefore it's having an effect on decisions here," Mr. Scheer said in a Sunday interview on CTV's Question Period.

"Canadians have many questions about the handling of the virus. As a Canadian representative for the WHO, Dr. Aylward owes an

Mr. Jeneroux has focused on the WHO's dealings with Taiwan during the crisis, arguing that Taiwan's success in combating COVID-19 has been intentionally ignored by the WHO because the UN agency fears angering China. Mr. Jeneroux also said the WHO has been slow in its response, originally arguing against travel bans and the possibility of human-to-human transmission, advice that has informed Canada's response.

Dr. Alyward was born in St. John's, Newfoundland and Labrador. In 1985, he received his MD from Memorial University. He started with the WHO in 1992, specializing in immunization. He has since been appointed head of various WHO missions against diseases such as Ebola and Zika, and now COVID-19.

After the committee finished hearing testimony on April 21, Mr. McKinnon moved to committee business and mentioned that Dr. Alyward had sent a letter to the committee outlining why he did not attend.

Mr. McKinnon read a portion of the letter to the committee, which The Hill Times transcribed from an audio file available on the House of Commons website. Reading from Dr. Alyward's letter, Mr. McKinnon said: "May I express again my regrets to the honourable chair and members of the committee that I was unable to accept their original invitation without this having gone through appropriate WHO channels. I particularly regret any inconvenience or frustration this may have caused. I trust that a way forward can be sorted as soon as possible so that WHO might help the committee in its important

Mr. McKinnon then said he thinks "a conversation is in order" and that he intends to "make sure he [Dr. Alyward] understands

Continued on page 19

Health Policy Briefing

appear before health committee Countries where

Continued from page 18

what it is we're [the House Health Committee] asking of him and that he doesn't have to be here to do that."

The efforts to have Dr. Alyward appear again sparked debate over the powers of committee during the COVID-19

The unanimous consent motion introduced by Government House Leader Pablo Rodriguez (Honoré-Mercier, Que.) and passed April 11, which lays out ground rules for how the House and certain committees operate while the House is officially adjourned, appears to place some restrictions on the normal powers of House

Paragraph N of the motion reads"in addition to receiving evidence, the committees enumerated in paragraphs (l) and (m) of this order, while meeting by videoconference or teleconference, may also consider motions requesting or scheduling specific witnesses and these motions shall be decided by way of a recorded vote."

Since the unanimous consent motion was passed April 11, members of the Health Committee have gone back-andforth over how it affects the operations of committee work, and specifically whether the committee has the power to summon, or merely request, a witness to testify.

According to the House of Commons Procedure and Practice, a committee has the power to summon a witness by "adopting a motion to summon one or more individuals to appear before it at a set date, time and location."

That power, however, is limited.

"The Standing Orders place no explicit limitation on this power. In theory, it applies to any person on Canadian soil...In practice, certain limitations are recognized on the power to order individuals to appear. Because committee powers do not



chair of the House Health Committee Ron McKinnon, pictured in Centre Block in 2017, told committee members last week that he has been in touch with the WHO's Bruce Avlward about testifying before the committee. The Hill Times file photograph

Liberal MP and

extend outside Canadian territory, a committee cannot summon a person who is in another country."

The committee also does not have the power to punish a witness for not appear-

"Standing committees do not have the power to punish a failure to comply with their orders in this regard. Only the House of Commons has the disciplinary powers needed to deal with this type of offence. If a witness refuses to appear, or does not appear, as ordered, the committee's recourse is to report the matter to the House. Once seized with the matter, the House takes the measures that it considers appropriate."

In order to make the summons enforceable, the House of Commons must then adopt a motion to hold the individual in contempt. The last time this happened was in 1913, when R.C. Miller, a witness before the Public Accounts Committee, refused to answer questions. A motion was adopted and Mr. Miller was imprisoned for some four months, according to Procedure and

The House Health committee is, however, currently operating under restrictions imposed by the unanimous consent motion.

Mr. Jeneroux raised the question of summons at the beginning of the April 15 meeting. Mr. McKinnon originally said that he does not believe the power to summon is granted by the motion, but later walked that position back.

Both Mr. Jeneroux and NDP MP Don Davies (Vancouver-Kingsway, B.C.), his party's health critic, voiced their opposition to that position at committee.

achamandy@hilltimes.com The Hill Times

COVID-19 has spread

Some 210 countries around the world have reported 2,607,083 confirmed cases of the coronavirus COVID-19 that originated from Wuhan, China, and a death toll of 188,846 deaths as of April 23, 2020.

866,148 48,868 North America

United States	866,148	48,868	North America
Spain	213,024	22,157	Europe
taly	189,973	25,549	Europe
rance	161,530	21,856	Europe
Germany	151,285	5,367	Europe
Jnited Kingdom	138,078	18,738	Europe
Turkey	101,790	2,491	Asia
ran	87,026	5,481	Asia
China	82,798	4,632	Asia
Russia	62,773	555	Europe
Brazil	46,701	2,940	South America
Belgium	42,797	6,490	Europe
Canada	41,791	2,141	North America
Netherlands	35,729	4,177	Europe
Switzerland	28,496	1,549	Europe
Portugal	22,353	820	Europe
ndia	21,797	686	Asia
Peru	20,914	572	South America
Sweden	16,755	2,021	Europe
reland	16,671	794	Europe
Austria	15,002	522	Europe
srael	14,592	191	Asia
Saudi Arabia	13,930	121	Asia
apan (+Dia- mond Princess)	12,662	312	Asia
Chile	11,812	168	South America
Ecuador	11,183	560	South America
Singapore	11,178	12	Asia
Pakistan	10,880	228	Asia
South Korea	10,702	240	Asia
Mexico	10,544	970	North America
Poland	10,511	454	Europe
Romania	10,096	545	Europe
Jnited Arab Emirates	8,756	56	Asia
Denmark	8,073	394	Europe
Belarus	8,022	60	Europe
ndonesia	7,775	647	Asia
Qatar	7,764	10	Asia
Norway	7,361	193	Europe
Serbia	7,276	139	Europe
Jkraine	7,170	187	Europe
Czech Republic Czechia)	7,138	210	Europe
Philippines	6,981	462	Asia
Australia	6,661	75	Australia/Oceania
Vlalaysia	5,603	95	Asia
Dominican Republic	5,543	265	North America
Panama	4,992	144	North America
Colombia	4,356	206	South America
inland	4,284	172	Europe
Bangladesh	4,186	127	Asia
South Africa	3,953	75	Africa
Luxembourg	3,665	83	Europe
Egypt	3,659	276	Africa
Vlorocco	3,537	151	Africa
\rantina	3 288	150	South America

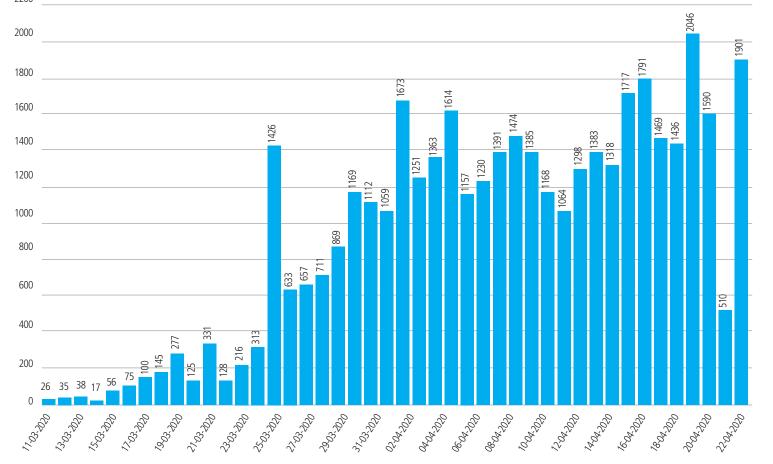
Source: Worldometer, last updated April 23, 2020

159 South America

Argentina

New COVID cases in Canada

Source: Public Health Agency of Canada



MONDAY, APRIL 27, 2020 | THE HILL TIMES THE HILL TIMES | MONDAY, APRIL 27, 2020

Health Policy Briefing

Policy Briefing Health

Front-line care aides are the real heroes

If we do not intervene immediately to better support the front line in nursing homes, the outcomes will be far worse than they need to be—among both residents and this essential workforce.



CAROLE A. ESTABROOKS & JANICE KEEFE

 $T^{\text{here will be many heroes in}}_{\text{the coming days, some already}}$ rising to the challenge of CO-VID-19, including nurses, doctors

as well as delivery drivers, grocery store workers, and warehouse staff.

But there's one critical occupation that is routinely forgotten when we champion the heroes: nursing home care aides who stayed when even their own lives and the lives of their families were put in danger.

When they are remembered at all, they are mentioned in passing, as a homogenous block, without giving much thought to the real people they are, the work they do and the challenges and dangers they face—both before the crisis and now, during the pandemic.

Care aides suffer along with families and residents when these older adults die, separated from family under difficult and sometimes unpleasant circumstances. Who are care aides and what

do they do? Care aides, also known as nurses' aides, personal support workers or continuing care assistants, are the largest workforce in long-term care homes in Canada, providing upwards of 90 per cent of direct care. Their role is central to the quality of

living in long-term care homes. Now, their work is central to

care and quality of life of individuals

paramedics, and hospital cleaners, population. Over 80 per cent of residents in Canadian nursing homes are now living with some kind of cognitive impairment (dementia).

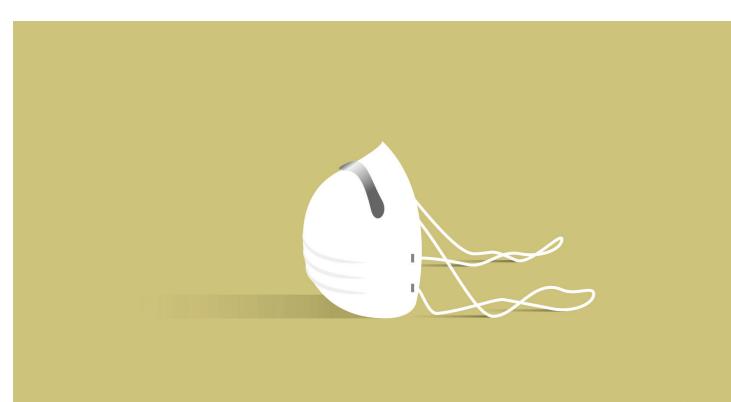
> Many families often take on tasks like feeding, helping with mobility and engaging socially in the care homes, but because they can no longer visit, this puts even more onus on care aides to safeguard them.

By nature, the work of care aides is intimate—it involves bathing, feeding and toileting residents. They can't practice the advised 'social distancing.' And yet, we also aren't consistently giving them the personal protective equipment (PPE) they need to keep themselves safe.

COVID-19 has hit nursing homes across the country hard with more than 600 nursing homes reporting COVID-19 cases and many reported COVID-19 related deaths—and these numbers rising daily.

We've put care aides in a state of triple vulnerability: their work is more important than ever, yet they are working in understaffed conditions, and they are underpaid and under-equipped to do it adequately—while also putting their own safety and that of their families at risk.

Continued on page 21



hit nursing homes across the country hard with more than 600 nursing homes reporting COVID-19 cases and many reported COVID-19 related deaths—and these numbers rising daily. Image courtesy

TREC data collected across

at more than one long-term care home simultaneously, in order to gain full time hours or earn a living wage. Most have worked 10 years on average as a care aide, about half of that time on the same unit.

Continued from page 20

The long-term care system is particularly susceptible to being overwhelmed right now because, as over a decade of Translating Research in Elder Care research has shown us, it was running on zero margins before the COVID-19 crisis.

Who's holding it all together? more than 90 long-term care homes in British, Alberta, Saskatchewan, and Manitoba, some of it collected for more than a decade reveal that he majority of care aides are women (90 per cent), over 40 years of age (67 per cent) and almost two-thirds (61 per cent) speak English as a second language.

Thirty per cent of care aides work

Care aides consistently report higher levels of burnout and lower levels of mental health than the general population. They are regularly—before the pandemicunder work duress

Our recent study documented the frequency with which care

aides in Canada, skipped or rushed essential care tasks on their last shift because they had insufficient time. Essential care tasks include things like taking residents for a walk, talking with residents, performing mouth care, toileting, bathing, feeding, dressing and preparing residents for sleep.

More than 65 per cent of care aides reported rushing at least one essential care task and over 57 per cent of care aides reported missing at least one essential care task altogether on their last shift.

COVID-19 is only revealing fault lines that already existed in longterm care. Now we must do everything we can to make sure we don't put either our vulnerable seniors or our care aides at unnecessary risk

We need to protect our longterm care heroes now. We need to do everything in our

power to immediately raise staffing levels in nursing homes to safe levels, no matter what it takes. We need to prioritize essential

PPE to all care aides. Governments should also consider providing, as Quebec and British Columbia have already done, "top up" or "danger pay" for care aides, recognizing the risks that they are incurring and ensuring they do not need to, as many do currently, work in more than one care home or one job at once.

We need to immediately begin planning for the mental health support that these essential workers will require in the aftermath of the pandemic's first wave.

We need to look at these short-term solutions carefully and ensure we do not have negative unintended long-term consequences for example, from the one workplace policy.

If we do not intervene immediately to better support the front line in nursing homes, the outcomes will be far worse than they need to be-among both residents and this essential workforce

Dr. Carole A. Estabrooks is scientific director of the pan-Canadian Translating Research in Elder Care (TREC) program and professor and Canada Research Chair, Faculty of Nursing at the University of Alberta. Dr. Janice Keefe is professor of Family Studies & Gerontology, the Lena Isabel Jodrey Chair in Gerontology, and director of the NS Centre on Aging at Mount Saint Vincent University. She is also a senior member of the TREC research

The Hill Times



Make mental health your priority



If you're experiencing new challenges due to the spread of COVID-19, it's important that you can turn to accurate, trustworthy and actionable information to take care of your

Dr. Patrick McGrath OC, FRSC, FCAHS, a Clinical Psychologist, and founder of 90Second Health has created a special, COVID-19 health e-letter series, free for all Canadians.

- Take control of your mental health with actionable steps
- Gain access to easy-to-read, research-backed information
- Connect with other Canadians sharing their lived experience
- Receive 2 mental health letters each week by email or text

Sign up today at 90Second.com



Officer, Dr. Theresa Tam, and the guidance

of the Public Health Agency of Canada (PHAC), guiding our actions at this crucial time. From the outset, PHAC has provided

Health Policy Briefing

Fight against COVID-19 hasn't been easy, and it's not over yet

It's going to take all of us to get through this.



Liberal MP Darren Fisher

Opinion

The COVID-19 pandemic has created an unprecedented situation around the world, and it has caused challenges here at home as well. Thousands of Canadians have been infected, and tragically, many Canadians have lost their lives due to the virus. I think of the nurses, doctors, caregivers, first-responders, and other Canadians working in essential services who are at a greater risk every day simply for doing their jobs. They are making sacrifices to keep our hospitals running and our grocery stores stocked, and I want to thank them for their work and for their

We know how much this pandemic has disrupted the daily lives of Canadians. Our familiar routines have been upended, we aren't able to visit our loved ones and working from home can be challenging. I know many Canadians are anxiously wondering when things will return to normal-I am too—but it's going to take all of us following public health advice to get there. We are learning more about COVID-19 every day, and our government's response will continue to be based on the latest science, evidence, and collaboration.

We are immensely grateful to have the leadership of Canada's Chief Public Health

public health advice for Canadians to follow in order to reduce the spread of COVID-19 and flatten the epidemic curve. Staying home, practising physical distancing, washing your hands, and coughing into your sleeve will help save lives and stop more Canadians from becoming infected. The fight against COVID-19 requires a continued and concerted effort from all of us.

In early March, we announced the COVID-19 Response Fund, which helped Canada respond quickly to emerging challenges related to COVID-19 across the country. The Response Fund includes more than \$500-million for the provinces and territories to respond to increased demand on their health-care systems, and is helping support preparation and mitigation efforts in Indigenous and northern communities. The Response Fund will also help Canadian researchers as they learn more about potential vaccines and treatments for COVID-19.

For those who have lost their jobs or who are unable to work due to COVID, we introduced the Canada Emergency Response Benefit to provide Canadians with up to \$2,000 per month. We're also working with the provinces and territories on a proposal to increase salaries of workers deemed essential in the fight against COVID-19, who make less than \$2,500 a month. To help small businesses struggling with a decline in income due to COVID-19, we're ensuring they have access to credit as well as wage subsidies to help them support their employees.

We know how important testing is in flattening the curve and identifying cases across the country. That's why we've expedited the approval of new COVID-19 tests and helped the provinces and territories enhance their testing capabilities. Canada has one of the highest per capita testing rates in the world, and to date, nearly 600,000 people have been tested across the country, with more tests happening every

We are also actively working to ensure that hospitals and front-line workers have the personal protective equipment (PPE) that they need, like masks, gloves, face shields and gowns. We're working with provinces and territories to make sure that health-care facilities have the supplies they need, and many supplies have already been distributed with more on the way every week. There has also been an unprecedented mobilization from industry partners, who are rapidly re-tooling to manufacture essential items like ventilators and hand sanitizer. One great example is in my home province of Nova Scotia, where Stanfield's is altering its manufacturing capabilities to produce medical gowns.

Lastly, we know that many Canadians are struggling with mental wellness while staying isolated, and I encourage all Canadians to use our online mental health support resources. Wellness Together Canada connects Canadians to helpful resources as well as peer support workers, social workers, psychologists and other professionals for confidential chat sessions or phone

The fight against COVID-19 hasn't been easy, and it's not over yet. It's going to take all of us to get through this. The disruptions we're facing in our everyday lives are due to measures that will save lives and stop the spread of this virus. By following the best public health advice, and continuing to focus on science and evidence, we can flatten the curve and save lives.

Liberal MP Darren Fisher, who represents Dartmouth-Cole Harbour, N.S., is the parliamentary secretary to the federal minister of health.

The Hill Times

COVID-19 packs a double whammy for Canadians living with cancer, heart disease, diabetes and other chronic diseases

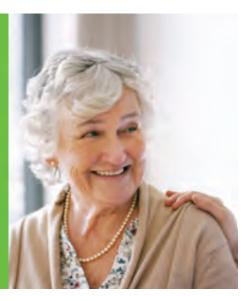
Sponsored by Health Partners

By Eileen Dooley

When we think of vulnerable, we tend to think of Canadians who may be elderly, or poor. We don't often think of the 87% who may have an underlying medical condition or compromised immune system and their increased risk from COVID-19. Nor do we realize the additional threat to their health as the charities they rely on for services, support and life-saving research have also been compromised by COVID-19.

HealthPartners, a collaboration of 16 of Canada's most trusted national health charities, highlights this dual threat in its latest report, The Impact of COVID-19 on Our Most Vulnerable Canadians.

Almost 9 out of 10 Canadians are likely to be touched by one or more chronic diseases or major illnesses over the course of their lifetimes, and this risk is increased during the pandemic. For example, Canadians with underlying respiratory conditions are at risk because COVID-19 attacks the respiratory system. Canadians with diseases such as cancer and diabetes and hemophilia may not be able to get the clinical support that they need to manage their conditions. And their caregivers Urgent and emergent on Our Most Vulnerable Canadians.



are unable to get the respite and support they need.

At a time when they are turning to health charities for information and support, the ability of Canada's health charities to engage in their usual life-saving research and operate their regular on-the-ground programs and services is compounding the risk. Why? Because donations are dropping at such an alarming rate that many charities cannot afford to keep staff to provide support and assistance to our most vulnerable – and at the most vulnerable moment in their lives. Our

charities are seeing a ten-fold increase in requests for assistance, information and support while having their revenues reduced by 50%

We are doing our best to support our charities, and they are doing their best to support Canadians. But we need your help. For more information or to make a donation to Help Our Helpers, please visit healthpartners.ca.

Eileen Dooley is CEO of HealthPartners Canada, a Canadian registered charity and collaboration of 16 of Canada's most trusted national health charities

iii HealthPartners PartenaireSanté Charities At Work
La philanthropie au travail

Charities At Work

Policy Briefing Health

Medicine shortages in light of COVID-19: a wake-up call for drug security



JACALYN M. DUFFIN AND JON PIPITONE

Opinion

KINGSTON, ONT.—Recently, the global number of shortages, pending and actual, is increasing—especially in the United States—and coronavirus is to blame. In Canada, we are seeing concerning trends for COVID-19-related medications. With the pandemic, shortages arise at both ends of the supply chain.

On the manufacturing end, failure to produce or ship; on the market end, increased demand. Factory closures in China and India during the early pandemic threatened supply of ingredients and finished drugs, which make up an unknown, but probably significant portion of Canadian pharmaceuticals. (In the U.S., about 18 per cent come from India; 13 per cent from China—not 80 per cent as is often claimed). Embargoes on export of essential medicines out of the U.K. and India also menace supplies, provoking shortages in Africa.

On the demand side, panic buying of drugs for fever and cough has shrunk supply of antipyretics and inhalers, while the huge unanticipated number of serious cases needing ventilation drained stocks of sedatives, painkillers, and anesthetics. Once President Trump began trumpeting hydroxychloroquine as a possible treatment, a rush on this old and essential remedy deprived Americans who need it for ailments, such as lupus, rheumatoid arthritis, and malaria. Unscrupulous purchasers, including doctors and dentists, intend to self-medicate with the unproven drug, caring little about others who are already ill.

Canada has yet to officially report coronavirus-related drug shortages, but our medication supply is brittle and prone to shortages. Currently, nearly 2,000 drugs are in short supply, just as there were prior to the pandemic, and for a decade before.

We have been analyzing the shortage reports to understand the issue; although we would prefer that the government do this work. At the time of writing, manufacturing disruptions account for 66 per cent of the shortages, demand increase for 17 per cent, shipping delays for 11 per cent, and ingredient shortages for two per cent. Compared to a similar period last year, we see a rise in manufacturing disruptions and demand increases. Whether these are normal fluctuations or because of COVID-19 it is too early to say.

Still, something seems to be brewing. Apotex reported a Canadian shortage of its hydroxychloroquine on March 20, the very day U.S. President Donald Trump's began touting its virtues. Three of four companies marketing propofol (an ICU drug) declared shortages by early April owing to "increased demand." Shortage of salbutamol (Ventolin®) was discussed in the media this week, but only three of six marketing companies have declared shortages, and all have had shortages in the past. Since early March, four of 15 marketing companies have announced shortages of acetaminophen,

although another six cite actual shortages that began well before COVID-19.

We have also heard anecdotal reports of

We have also heard anecdotal reports of shortage-related problems: lupus patients unable to find hydroxychloroquine or cutting their doses to conserve supply; hospital pharmacies required to purchase limited amounts of critical care drugs (so-called "protective allocation"); and Canadian manufacturers worried that ingredient sources *might* dry up owing to political tensions, if Chinese factories send Canada to the bottom of the wait-list when shipments are restored.

There is an emergency effort to prevent shortages. In early April, Health Canada's Tier Assessment Committee quietly created a list of 19 threatened "Tier 3" drugs as part of the interim order to protect medical supplies. But this measure is temporary, and hundreds more drugs not featured are essential to the health of Canadians.

Even if Canada does not have official coronavirus shortages today, we are vulnerable to them. Let us use this pandemic as a wake-up call to *finally* pay attention to the problem of drug shortages plaguing healthcare delivery for years and now threatening to jeopardize our response to COVID-19. Many of our drug shortages are preventable. Let us build a more resilient supply of medications through more transparency, better measurement and monitoring of shortages,

by adopting a real Essential Medicines List to guarantee supply, and by re-thinking where our drugs and ingredients are sourced and manufactured. Let us act now.

For more information on our efforts to study drug shortages in Canada, please read our 2018 peer-reviewed paper Assessing Canada's Drug Shortage Problem, or visit https://www.canadadrugshortage.com.

Jacalyn M. Duffin is Hannah Professor Emerita of the History of Medicine at Queen's University. Her work on Canadian health policy can be found at www.jacalynduffin. ca. Jon Pipitone is an MD candidate at the Queen's University School of Medicine.

The Hill Times

Sponsored by Canada Health Infoway

Preparing Canada's Virtual Health System for Scale-up

By: Michael Green, President and CEO, Canada Health Infoway

There has been a surge in the use of virtual care in recent weeks in Canada and across the globe as health care providers, health organizations, agencies and governments put measures in place to contain the spread of COVID-19 and flatten the curve. This is a big change for patients, but one that has the potential to help us in the current battle against COVID-19 as well as prepare us for the future of health care in Canada.

The rise of virtual health during this pandemic will likely shift the way health services are delivered in Canada going forward. Where some physicians and patients were previously hesitant to connect virtually, the forced reality has shown that there are significant benefits to adopting virtual health in everyday care for at least a certain portion of clinical visits. The question however is whether the Canadian health care system is appropriately setup for large-scale use of these services.

Electronic medical records (EMRs) store a digital record of patient histories which are critical for providing sound and safe patient care. Health care practitioners are already connected to key sources of patient data through jurisdiction drug information systems and lab reporting systems that provide an additional measure to enhance patient safety. Through Canada Health Infoway's PrescribelT®, we are well on our way to enabling electronic prescribing, a paperless and fax-less option to prescribe medications. We are now ready to go to the next step: the integration of technologies to augment a provider's ability to deliver services virtually and remotely.

When in-person appointments cannot occur, virtual solutions are a great option to maintain patient-provider relationships and the delivery of safe and effective health care. EMRs that are integrated



with virtual care capabilities can allow providers to monitor their patient's health remotely, and videoconferencing enables real-time communication from any location. These technologies can streamline workflows and create efficiencies, reduce wait-times, increase connectedness between patients and providers, and lower overall health care costs as well as out-of-pocket expenses for patients.

Integrated virtual solutions also have the potential to increase access to services, particularly in underserved communities. There is no question that rural communities and vulnerable populations such as the elderly would benefit greatly from virtual health services because it can increase access to specialty care that is typically available in urban areas as well as reduce the length and frequency of travel for those with complex needs.

We've already started to accelerate the integration of virtual care with some of Canada's EMR providers including those partnered with PrescribelT® through . our EMR Virtual Care Investment program. But as a national service, the potential to do more is limitless. For example, what if we enabled PrescribelT® to monitor drug availability, flag drug shortages or recalls, or even potentially generate near maps to quickly identify outbreak hotspots? What if we had fully integrated end-to-end solutions with full collaboration capabilities to realize the amazing benefits of true patient-centric care? There are so many possibilities for the Canadian health system and as a nation we should start the groundwork now to prepare us for not only the next pandemic, but the new age of health care.

Health Policy Briefing

COVID-19 catastrophe in Canada's long-term care system must spur lasting change

As soon as the COVID-19 pandemic abates, the federal government should launch negotiations with the provinces and territories to establish a dedicated federal transfer payment to bring long-term care under the umbrella of our public health-care system. By leveraging its spending power, the federal government can forge an agreement to expand access, improve employment conditions, and enforce binding national standards for long-term care.



NDP MP Don Davies

Opinion

One of the most upsetting casualties of the COVID-19 pandemic has been the ravaging toll it has taken on Canada's long-term care facilities. In recent weeks, horror stories have emerged from across the country that shock our conscience and challenge our self-image as a compassionate and humane society. Residents have been found underfed, abandoned, and afraid. In some cases, seniors have been left to die alone in bed, covered in their own urine and feces.



Canada's Chief Public Health Officer Dr. Theresa Tam has called this a "chink in our armour," but that is a gross understatement. Instead, this crisis more closely resembles a gaping wound at the heart of our nation.

Across Canada, nearly half of all CO-VID-19 deaths are linked to outbreaks in long-term care homes. Prime Minister Justin Trudeau has noted that Canada's CO-VID-19 death toll is now more than double his government's initial projections due to "unexpected outbreaks" in these facilities.

However, this crisis was eminently foreseeable. The early experiences of jurisdictions like Italy and Spain provided ample evidence of the risks posed to long-term care facilities by COVID-19. And it indeed *was* foreseen: experts and frontline workers have been issuing dire warnings about the state of Canada's long-term care system for many years. Tragically, their messages have fallen on deaf ears of successive governments.

In fact, long-term care has been treated as the poor cousin of Canada's health-care system for decades. Unlike physician and hospital services, long-term care falls outside the scope of our public system and therefore relies heavily on private delivery. As a result, Canadians pay substantial out-of-pocket costs, which can vary significantly depending on the region and whether it's a public or private facility, and service quality varies widely depending on the ability to pay.

Long-term care homes are also chronically understaffed. Nurses and personal support workers at these facilities are often paid low wages, saddled with overwhelming workloads, and subjected to high levels of stress, burnout, and even violence. Precarious and part-time employment often forces these health-care workers to move between facilities to earn a living.

Furthermore, wait-lists for long-term care have lengthy backlogs because the construction of new facilities isn't keeping pace with Canada's aging population. This shortage leads to overcrowding at long-term care facilities and overuse of the hospital system by those without access to appropriate care.

Finally, there is a profound lack of accountability for long-term care facility operators due to lax enforcement of standards and regulations. For example, a recent investigation found that only nine out of Ontario's 626 long-term care facilities received a resident quality inspection in 2019.

So how do we begin to fix a system that was in crisis before the pandemic hit?

To succeed, we must employ a twopronged approach to address the current crisis immediately and prepare for the implementation of a national long-term care strategy once COVID-19 subsides.

In the short term, the federal government must lead a rapid expansion of testing for long-term care residents and staff, back-fill human resource shortages, provide access to a sufficient supply of personal protective equipment, and deliver the resources necessary to prevent transmission from overcrowding.

The federal government must also ensure that front-line workers are compensated



Canada's Chief Medical Officer of Health Theresa Tam, pictured in the West Block in Ottawa on April 11, 2020, speaking at that day's media briefing. The Hill Times photograph by Andrew Meade

in line with the risk they face. Although Prime Minister Justin Trudeau has pledged to top-up salaries for long-term care workers earning less than \$30,000 per year, this is a meagre commitment when weighed against the sacrifice we're asking of these workers.

Ultimately, the federal government must set a deadline for all provinces and territories to come into compliance with national standards for responding to COVID-19 in long-term care facilities. Although the federal government did release a set of guidelines on COVID-19 over the Easter weekend, they cannot be enforced because they are non-binding. If necessary, the federal government should use its emergency authorities to bring jurisdictions into compliance if they are unwilling or unable to do so themselves.

In the long-term, we need to implement a national strategy for long-term care in Canada, and do so quickly. The Conference Board of Canada estimates that we will need to double the number of long-term care beds in Canada to 450,000 by 2035 to keep pace with our aging population.

As soon as the COVID-19 pandemic abates, the federal government should launch negotiations with the provinces and territories to establish a dedicated federal transfer payment to bring long-term care under the umbrella of our public health-care system. By leveraging its spending power, the federal government can forge an agreement to expand access, improve employment conditions, and enforce binding national standards for long-term care.

Our parents and grandparents built this country. They sheltered and nurtured us when we were young and vulnerable. In turn, we have a duty to take care of them as they age.

But COVID-19 has revealed a bitter

But COVID-19 has revealed a bitter truth: we have abandoned this responsibility as a country.

Let no one ever claim that we don't understand the consequences of this collective neglect.

There are no more excuses. It's time to make this right.

NDP MP Don Davies, his party's health critic, represents Vancouver Kingsway, B.C. The Hill Times



Ultimately, the federal government must set a deadline for all provinces and territo- ries to come into compliance with national standards for responding in long-term care facilities, writes NDP MP Don Davies. Photograph courtesy of Pexels

Understanding 'cultural traits' key to effective COVID response, says professor

Understanding Canada's cultural characteristics, according to professor Umar Ruhi, is essential for developing an effective COVID-19 response.

CHERLENE ELORIA

Flattening the COVID-19 curve requires widespread citizen participation in public health measures such as physical distancing and self-isolation. But to ensure society is on board with such measures, countries need to adopt policies that are in line with its "cultural traits" as a nation, according to an associate professor of e-business and information systems at the University of Ottawa.

In an article, 'A Socio-Psychological Perspective on Flattening the COVID-19 Curve,' published on April 20 in the Canadian Health Policy Journal, Umar Ruhi argued that the underlying sociological characteristics of a country can determine whether its national pandemic response will succeed or fail. As a result, he warned, Canadian policy-makers and public health agencies should be cautious when trying to learn lessons from other countries impacted by the novel coronavirus.

"We need to consider the sociological and psychological dimensions of different cultures because these reflect the way we think, we see and we act," Prof. Ruhi said in a phone interview with *The Hill Times*. "We can only devise effective public health policies and protocols when you look at those things."

Using Dutch social psychologist Geert Hofstede's well-known cultural dimensions framework, he compared Canada's "national culture" with that of China, South Korea, and Italy to shed light on the stark differences in COVID-19 responses. Indeed, Hofstede's scores must always be examined in a relative context, he wrote.

Prof. Ruhi then recommended non-pharmaceutical measures that could prove effective in Canada's effort to slow the spread of the virus.

For instance, he argued that, unlike China and South Korea who value perseverance, Canada is a "short-term orientation culture," meaning its citizens are more prone to feeling uneasy and impatient with public health measures that appear to last for prolonged periods of time.

Therefore, public health messaging must work towards creating a "mind shift towards delayed gratification" to promote staying the course and remaining physically distant, especially with recent calls to reopen the economy, he said.

"We are a highly indulgent society," Prof. Ruhi added.



Umar Ruhi, associate professor of e-business and information systems at the University of Ottawa, has a socio-psychological pespective on flattening the COVID-19 curve. He also says Canadian policy-makers and public health agencies should be cautious when trying to learn lessons from other countries impacted by the novel coronavirus. *Photograph courtesy of Umar Ruhi*

Because Canadians will want to return to enjoyment and fun quickly, he urged authorities to hold off on lifting controls over "recreational and entertainment venues" for fear that reopening such places too soon will contribute to a second wave of the COVID-19 outbreak.

In his article, Prof. Ruhi ultimately advocated for a more dynamic and nuanced approach towards public health measures to accommodate for Canada's "individualist culture," which is similar to Italy's, according to Hofstede's framework.

Scoring high on individualism means people in that society tend to act in their own self-interest rather than that of the community. In this case, he argued "checks and controls" must be enforced in Canada to deter against the avoidance of public health advisories.

For example, health screenings should be performed at airports because self-declaration of illness or symptoms is insufficient and anonymous, aggregated location data from cellphones could potentially be used to disperse restricted group gatherings.

Along with such controls, Prof. Ruhi also recommended Canada's public health agencies employ "persona-based" messages that appeal to different segments of society rather than the current one-size-fits-all approach.

Personalized messages could, for instance, address "problem areas"—or, places where current data reveals people are not following physical distancing or self-isolation measures. The approach could also involve using social media platforms and celebrity influencers to act as role models for targeted public awareness campaigns, he said.

It's important, however, that personalized messages remain uniform because confusion can cause anxiety among society, Prof. Ruhi added. For example, early on in Canada's pandemic response there were discrepancies across jurisdictions about how much distance should be maintained between individuals and how many people constitute a group.

Notably, the unification of messaging has improved since

writing the paper, he said.
Another positive note, Prof.
Ruhi remarked, is the federal
government's ability to change
positions and policies based on
new evidence—such as its opinion on closing borders to international travel and the effectiveness
of masks.

"I actually think that this shows one of the strengths for Canada that we are more agile and more adaptive to change," he said.



Canada's Chief Medical Officer Dr. Theresa Tam and Health Minister Patty Hajdu, pictured on March 18, 2020, speaking at that day's media briefing on the Hill. Dr. Tam's briefings have been effective because they incorporate experts from across sectors, argues Prof. Umar Ruh. The Hill Times photograph by Andrew Meade



Deputy Prime Minister Chrystia Freeland and Canada's Deputy Public Health Officer Howard Njoo hold a press conference to speak about the government's measures to help Canadians with the effects of COVID-19 pandemic from West Block in Ottawa on Mar. 27, 2020. The Hill Times photograph by Andrew Meade

But backlash is expected, according to Prof. Ruhi, because Hofstede's framework shows Canadians expect swift and decisive action which can pose conflict amid an evolving crisis.

In addition, he said the federal government is doing a "good job" on providing citizens with the knowledge required for understanding the health risks of the COVID-19 virus—such as releasing statistics and holding conferences regularly. In fact, sharing such information is a key factor in ensuring community engagement with public health measures, he added.

Prof. Ruhi also noted that the briefings led by Deputy Prime Minister Chrystia Freeland (University-Rosedale, Ont.) and Chief Public Health Officer Dr. Theresa Tam are aligned with Canada's low "power distance" score. In other words, such briefings are effective because Canadians are more likely to respond to leadership that collaborates and consults across sectors. In contrast, China is an example of a "high power-distance" society because it readily accepts hierarchical structures.

While there's encouraging work being done, Prof. Ruhi argued more effort is needed to equip Canadians with the tools to reduce uncertainty during isolation.

"Where I think there needs to be more is confidence in your own ability to do what you're being asked to do," he said.

In his paper, he suggested public health agencies provide innovative self-assessment tools for individuals who may have come into contact with the virus. For example, the United States' Centers for Disease Control and Prevention has an interactive "chatbot" that allows citizens to input their symptoms, answer corresponding questions and ultimately receive a quick diagnosis on whether a hospital visit is required.

Prof. Ruhi said a similar artificial intelligence tool could be helpful in Canada to supplement the basic self-assessment checklists currently in use.

Also, self-monitoring tools could prove beneficial for those isolating in 14-day quarantine. For instance, he recommended creating an app in which individuals can provide daily status updates on how they're feeling and can be monitored by a health agency.

Such tools "will basically provide more confidence in you being able to manage yourself" which contributes to greater community participation in public health measures, he said.

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Health Policy Briefing

Public health, the public good, and where collective responsibility lies

While it is true that the declaration of a state of emergency grants a government a great deal of latitude, it remains true that simply because a government can exact such measures does not mean that it is necessarily justified in doing so.



James Sikkema

Opinion

HAMILTON—Question: is public health the same as public good? I respond: No.

I assert: all public good involves public health measures, but not all public health measures involve the public good.

Essentially: public good is greater than public health.

The upshot: the collective responsibility of individuals is to the public good of which public health forms a part. What does this mean? Let's first define some terms to see if we can tease out the distinction between public health and public good.

By public health I mean the physical and psychological health of people taken collectively, where health is understood in both species-functional and conventional-value terms, and collectivity is understood in terms of interdependence. The purpose of public health measures should, then, be to secure and promote the physical and psychological health of the public to the extent possible. That is, to the extent that such security and promotion does not exceed the public good of which it forms a part.

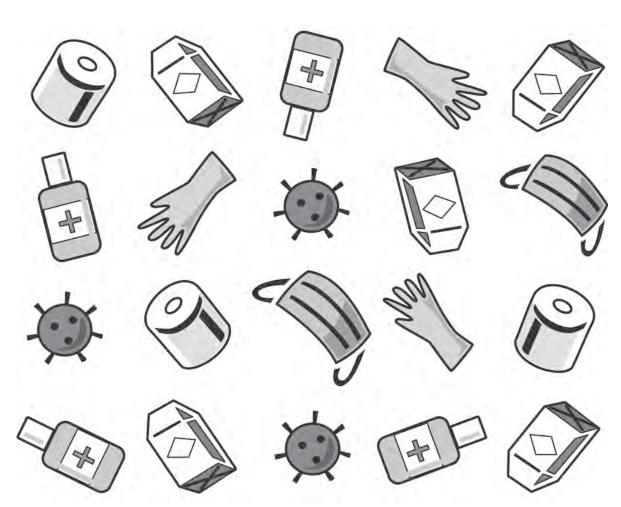
By public good I mean the equitable entitlement each individual has to certain rights, the securing and promotion of which guarantees a minimum set of maximum benefits to the whole of society of which each individual forms a part. The minimum set of maximum goods afforded by the protection and promotion of basic rights and freedoms certainly include

those public goods that no one has exclusive ownership of or privileged access to (e.g. health care, education, infrastructure, etc.), but also those responsibilities we must, both morally and legally, fulfill for the sake of each other (e.g. protecting negative rights and promoting positive rights).

Let's put these definitions into focus

Health is not of intrinsic value to anyone. Rather, of intrinsic value are those things we would not, ceteris paribus, trade off for anything else. I am thinking of: the right to not be interfered with if you don't want to be, and the power to annul that right under certain circumstances by means of informed consent. The right to exercise certain privileges that do not infringe on other's non-interference rights, and the immunity to other's attempts at annulling that right without your informed consent. The promotion of equal rights like access to education, health care, and employment. I am thinking of friendship. Of work. Of love. Of dignity. Of virtue, principle, obligation. Now, imagine that health were of intrinsic value and these others of only instrumental value. If any one of them entered into tension with health, health would be granted overriding consideration. But this entails that if it were between, say, my right to not be interfered with and my health, someone could interfere with me for the sake of my health without my express consent. Beneficial? For my health, possibly. Harmful? For me as a person, definitely. Indeed, if health were pre-eminent, we should disallow most activities that fall within the range of those things we can properly consent to—any activities that could, in any way risk health ought to be prohibited on health-interested, paternalistic grounds.

There is a reason physicians are not also our legislators, our moralists, our clerics: health is only of instrumental value for the realization of what we take to be intrinsically valuable. We desire health to the extent that we can do those things we pre-eminently desire, enact those plans that provide us with a sense of purpose, fulfill obligations informing our sense of integrity, defend those things we understand to be worth dying for. It warrants stating that such desires, purposes, obligations, and ideals stretch across a host of irreducible modalities within which humans operate: physical, logical, aesthetic, social, political, economic, legal, historical, religious, etc. A reasonable decision, then, would incorporate all of these considerations into a coherent whole; the very same coherent whole that grants us our integrative autonomy. If we are



The government is being transparent that it is basing its current policies on predictive modelling. It is not, however, being transparent about how it has arrived at the data it is enlisting, the quality of that data enlisted, the methodology of arriving at its forecasting or dynamic models, nor the degree of their epistemic strength. Here's what that means, writes James Sikkema. *Image courtesy of Pixabay*

fond of consulting experts at the moment, let's consult the full set.

As with the individual, so too with the collective. If health has merely instrumental value at the level of the individual, it does not accede to the level of intrinsic value by aggregation. Public health has the same instrumental value that private health does. There is, however, one difference: some public health policies coincide with the public good so understood. That is, public health measures can induce the promotion of positive rights. But, public health measures can only make such inducements to the extent that they coincide with that minimum set of maximum benefits that individual rights and freedoms secure.

The upshot: each individual is obligated to promote the benefit of every other only to the point where doing so does not cause that individual harm.

Another question: do the measures enlisted to combat CO-VID-19 have warrant?

Given the nature of the virus, it is both evidently sensible and in keeping with the public good to enforce some form of physical distancing, quarantine, self-isolation, hand-washing, and other hygienic measures. Why? Because if no one has the right to wantonly endanger another, then it is permissible to enforce hygienic measures proven to minimize such harm. Failure to confer this benefit on another would be tantamount to causing harm. Given its negative health effects, physical distancing should, however, minimize social distancing as much as possible.

What about shelter-in-place directives, the enforcement of non-essential business, school, and public space closures? What about

the policing of social distancing? What about the steroidal growth of panopticism advancements in surveillance techniques, corporate, and governmental data collection and sharing? Aside from their negative consequences, many of which themselves intersect with public health issues (e.g. mental health), I do not believe that these measures are warranted. Why? Because they undermine negative rights of noninterference and force individuals to encounter undue burdens for the sake of a purported benefit of lesser value. How? Assuming individuals to be incapable of adhering to the warranted hygienic measures, these immoderate policies ensure their fulfillment by making their failure impossible. In the process, however, they also make a host of other intrinsically valuable things difficult or impossible to meaningfully protect or pursue: to work, to move freely, to maintain meaningful relationships, or to retain a modicum of privacy.

Since these are all Charterprotected rights and freedoms, it is a considerable oversight to give the quelling of the coronavirus sole priority in public policy.

It is one thing to seek to minimize disease and death, and another to make it the conditio sine qua non of policy. One thing to encounter societal disruption, and another to undermine the public good making it the society it is—that is not merely disruptive, it is societal annihilation. So, it is not simply that these measures are one-sided, and predicated on insufficient evidence, but that there would never be enough evidence on behalf of public health to support policies that undermine the rights and freedoms constitutive of the public good. We ought, therefore, to only enact those public

health policies that are consistent with Charter rights, freedoms, and values. Shield the most vulnerable, educate the public on the nature of the virus based on the best available evidence, inform them of their public health obligations in maintaining essential hygienic measures, allow each individual to calibrate their actions according to their own risk/reward ratios, increasing testing to increase proportionate measures, but leave it at that. Anything further cannot be made the public's responsibility and cannot possibly be in the public's interest.

To be clear: I am not saying that COVID-19 does not constitute a public health crisis, because it clearly does. I am not saying that it is the same as the common flu, or that we ought to continue with the status quo, because I believe that would be imprudent, if not negligent. I am, however, saying that the present response is disproportionate, perhaps even recklessly so.

We should only be placed in the duty of care of public health to the extent that our failure to confer the benefits of care would cause equal or greater harm to the public good. We must not, then, be made to fulfill an obligation that removes our ability to fulfill other responsibilities of equal or greater value.4 No one can be made responsible to secure lesser goods at the expense of the greater. This is, in my estimation, what we are in danger of doing with the present strict measures that mistakenly place the physical health of the public above its holistic well-being.

James Sikkema is a philosophy professor at McMaster University in Hamilton, Ont.

Policy Briefing **Health**

Why has Canada's data collection during the pandemic been so bad?

It's time the federal government used its authority to create critical data infrastructure.



Michael Wolfson

Opinion

Canadians are finally beginning to see projections of CO-VID-19 cases, deaths, and needs for intensive-care units from various provinces and the federal government. We are also start-

ing to see simulations that look beyond the next month or two when, hopefully, epidemic curves are clearly flattening.

are clearly flattening.
Canada's national data-collection capacity will be critical for the next stage of the pandemic, when relaxing of the stringent physical-distancing measures can begin. Yet our data-collection infrastructure is proving woefully inadequate.

To be effective, an extraordinary and co-ordinated national effort is required, with much more extensive testing and realtime standardized reporting of results, from local, to provincial, to federal agencies. These data on the tests will be much more powerful for managing the pandemic if they also include pre-existing diseases and risk factors such as smoking

These kinds of data flows are obviously feasible with current computing and communication technologies. Indeed, they were feasible 20 years ago when the federal government created the Canada Health Infoway corporation and provided it with billions of dollars. One of its missions was to work with the provinces to develop interoperable real-time "outbreak detection" systems.

Had these systems been in place even as late as last year, Canada would not have wasted critical weeks and months in reacting to COVID-19. And if these systems were in place now, we could manage relaxing the current lockdown phase with "smart quarantine" and reap the major benefits of returning the economy to normalcy at a faster rate.

So why do we still not have this real-time standardized datareporting capacity?

One blockage is the constitutional conflict over jurisdiction; the provinces claim almost exclusive jurisdiction over health care. The federal government also plays a substantial role, spending billions on health research and fiscal transfers to the provinces and regulating drugs and devices—on top of the billions given

to Infoway—but it has been too timid to use all its powers much beyond ineffectual cajoling.

Another blockage is fear of transparency. It has taken strong public pressure for governments to begin providing even limited epidemic-curve projections on which their policies are based.

Of course, we need to ensure patients' sensitive health data remain confidential except as needed in their circle of care. However, as the Council of Canadian Academies noted in its 2015 report, data custodians too often use privacy concerns to block access, stymieing major benefits of health research and, in the current emergency, support for both smart quarantine and much better modelling and projections.

What can we do about these completely unacceptable blockages? There are several places to start.

The Canadian Medical Association can offer strong leadership by supporting realtime interoperable data not only for their own interests and individual patient care, but also for broader health-system uses, not least for epidemic detection and management.

The private-sector vendors of electronic medical-record systems can immediately cease their profit-capturing data blockages and allow their software to interoperate in real-time with those of other vendors and government systems.

Provincial governments can agree quickly on more in-depth and uniform data standards for

hospitals, labs and physicians so that, along with the federal government, they can quickly and unambiguously assemble these data, especially virus-testing results.

Privacy commissioners need to alleviate the excessive concerns over privacy around health data, to rise above responding only to complaints, and to make it clear that—especially in this emergency situation—they support essential data flows, provided that basic privacy protections are in place.

The Public Health Agency of Canada and the provinces can open up their data beyond a few pages to the energy and creativity of Canada's excellent university-based health researchers and modellers and support the CIHRfunded pan-Canadian network.

In turn, Statistics Canada can expedite a virtual form of its Research Data Centres so that bona fide health researchers can access much higher-quality data with appropriate privacy protections.

The federal government must assert its leadership and authority, using its constitutional powers, to set critical national standards and enforce the collection, sharing and use of public-health data—and finally bring Canada into the 21st century of critical data infrastructure.

Michael Wolfson, PhD, is a former assistant chief statistician at Statistics Canada and a member of the Centre for Health Law, Policy and Ethics at the University of Ottawa.

The Hill Times

Charitable sector essential during COVID-19 crisis, and beyond, but needs support

We call on governments to include Canada's charitable sector in their plans to stabilize and protect what is most important—the health and well-being of Canadians.



Doug Roth
Opinion

In the avalanche of news related to the unprecedented pandemic of COVID-19 and the resulting response from governments at all levels, we are facing a devastating consequence that many people might not be aware of—the decimation of the charitable health sector in Canada. A broad chorus of voices has appealed to the prime minister for urgent support.

On March 29, the prime minister acknowledged the plight of the charitable sector, stating "Not only are organizations in the charitable sector and the non-profit sector doing incredibly important work during difficult times, they're also in many cases seeing their donations dry up and are very worried about their capacity to continue to do the work they're doing." Prime Minister Justin Trudeau went on to announce support for some charities and indicated that assistance for the broader charity sector was forthcoming. The following day the prime minister clarified that charities will be included in a wage subsidy program.

This is a good start, but much more needs to be done to help charities help people in Canada at a particularly vulnerable time. In particular, charities feel their programs and research initiatives are also in need of support.

The reality is that the charitable sector, already under stress, is being hit by two destructive consequences of COVID-19: a tremendous blow to the ability of the health-care sector to respond to people in need, and the economic disruption causing job losses in all areas of the economy. With the necessary restrictions of social distancing and protect-

ing health, fundraising events are cancelled, and donations, which charities rely on for their operating budgets, have collapsed for many organizations.

It is now when the work of charities in the community is most important that it is also most at risk.

At Heart & Stroke, one of these areas is critical health research; we are the largest nongovernmental funder of heart and brain health research in Canada. Every year, people in Canada invest \$33-million in Heart & Stroke which goes to the pursuit of answers about how to prevent, diagnose, treat and recover from the devastating impacts of heart disease, stroke and vascular cognitive impairment.

We partner with Canada's leading universities, research institutions, hospitals and community researchers to make those discoveries that lead to new knowledge of the fundamental biomedical science, new treatments, tests or interventions in clinical care and practice and solutions that improve health at the population level.

Because the risk for developing complications are higher for people with heart disease and stroke if infected with COVID-19, the time is ever more urgent to quickly enable research.

Our health system also needs capacity to respond.

Heart & Stroke is a leader in life support and CPR training, poised to assist retired doctors and nurses as they return to practice. Heart & Stroke is taking an active role by refreshing their resuscitation skills through our life support training programs. We are working closely with institutions to help create flexible learning approaches that ensure high-quality CPR can be delivered safely to patients in all settings.

Heart & Stroke also supports people living with heart disease and stroke and their caregivers by providing accurate, timely information across all our channels and building peer supports through our facilitated online communities. And as evidence emerges that smoking and vaping may worsen the effects of COV-ID-19, our decades of experience in smoking (and more recently vaping) prevention and cessation is even more necessary.

We are only one charity among many that are offering critical services at this important

The important role of all chari-

ties in healthy communities—during and after the pandemic—must not be forgotten.

Ontario Minister of Finance Rod Phillips recently noted that in the response to COVID-19, "every dollar spent to save a job or save a life is a dollar well invested." Investing in the charitable health sector would save both.

The charitable sector is calling on the federal government for a stabilization fund of \$8 to \$10 billion, composed primarily of grants to non-profit organizations, to allow charities to continue our critical work in the face of an anticipated 30 per cent loss of income as a result of the current crisis.

The not-for-profit sector contributes over eight per cent of GDP and employs 2.4 million people in Canada. Charities are a vital part of the Canadian economy and part of the COVID-19 community solution to keeping everyone safe and healthy.

We call on governments to include Canada's charitable sector in their plans to stabilize and protect what is most important—the health and well-being of Canadians.

Doug Roth is the chief executive officer, Heart & Stroke.

Health Policy Briefing

A view from the EU: our COVID-19 response at home and abroad

Together with Canada, the EU is fully committed to supporting the global response to a pandemic that has irrevocably changed our lives—and will mark generations to come.



Brice de Schietere

Opinion

The COVID-19 pandemic has thrust the world into a public health crisis unlike anything we have seen in recent history, unprecedented in scale and speed. The rapidity and ferocity of the outbreak caught many, including in the European Union, off guard at first. We must thank and show our appreciation to the numerous doctors and nurses worldwide, who have answered the call of duty under extraordinary circumstances and risked their lives.

The European Union and its member states have taken action on several fronts at the same time, in a stepped-up effort to contain the spread of the virus, fight disinformation, maintain the flow of goods across borders, and ensure the provision of medical equipment—notably of personal protective equipment (PPE).

We have also reoriented im-

portant resources to invest more in research and help companies and citizens in the face of a crisis simultaneously affecting the demand and the supply sides of the economy.

In this regard, the measures taken by the EU member states and the EU itself to tackle the socio-economic consequences at home already amount to 3.6 per cent of EU GDP, in addition to liquidity-support measures accounting for some 17 per cent of EU GDP.

In order to achieve this, the EU has taken bold measures to make the state aid rules for our member states more flexible and, as a result, allowing businesses big and small to get the support they need. We have also eased our budgetary rules to allow national and EU spending to get quickly to those who need it. Through a new scheme called SURE, which provides financial assistance of up to 100 billion to member states, we are helping to make sure people can keep their jobs and their incomes.

However, this pandemic is a global challenge that needs swift and coordinated actions worldwide to address the threat to public heath and to tackle the economic fallout. We need to act together with our most important economic partners to manage the exit plan and we need to act in full solidarity with our most vulnerable partners. The response requires international solidarity and compassion regardless of where we are in the world.

As the world's biggest donor, the EU is doing its part both at home and beyond our borders to mitigate the health crisis and its severe consequences. The EU already pledged 15.6 billion in support to partner countries to help alleviate the immediate health crisis and resulting humanitarian needs across the globe.

Ultimately, and as highlighted by Prime Minister Justin Trudeau and European leaders, the solution to this crisis lies in the development of effective vaccines, therapies and diagnostics.

This too can only be achieved through international collaboration and coordination.

Our common endeavour with Canada, including in the G7 and G20, is for trusted partners to join forces and boost research and innovation funding for vaccines, treatments and medical protocols, leverage digital technologies, and strengthen scientific international cooperation.

Early this month, Canada and the EU committed to supporting efforts to develop vaccines under the leadership of the Global Research Collaboration for Infectious Disease Preparedness network and the Coalition for Epidemic Preparedness Innovations (CEPI). We also back initiatives on data sharing for all COVID-19-related funded research at the global level, such as the UNESCO plea on data sharing and open science.

While Canada recently committed a further contribution of \$40-million to CEPI, on the EU

side, we launched several emergency initiatives, including two emergency calls for research and innovation projects: 48 million in funding for the launch of 18 new research and innovation projects under the EU Horizon 2020 program, and a 45-million call of the Innovative Medicines Initiative.

Together, we must strengthen the global response to the pandemic. To this end, European Commission's President Ursula von der Leyen will host an online pledging conference on May 4, in close coordination with the World Health Organization (WHO)—which leads the global response to the pandemic—and renowned health organizations, including the Global Preparedness Monitoring Board, CEPI, GAVI—the Vaccine Alliance, the Wellcome Trust of Britain and the Gates Foundation. The goal of the virtual conference is to help address the immediate funding gaps and come up with innovative and equitable solutions in the fight against COVID-19.

It is precisely in time of crisis—such as the one we are living today—that the role of the WHO is more critical than ever.

Together with Canada, the EU is fully committed to supporting the global response to a pandemic that has irrevocably changed our lives—and will mark generations to come.

Brice de Schietere is chargé d'affaires at the Delegation of the European Union to Canada.

The Hill Times

What I learned from the COVID-19 response in Sweden



Mohammad-Reza Ghovanloo

Opinion

Earlier this year, I left my home in Vancouver to start working as a visiting researcher in Stockholm, Sweden. The world has changed significantly since that time. Being away from home while the COVID-19 crisis grew from purported "media-borne hype" to the extraordinary pandemic it is today, has highlighted how cultural differences have led to differences in public health management.

Sweden and Canada have taken two different paths.

According to the WHO director general, in many wealthy countries hospitals are designed to operate in a "lean and mean" and efficient manner. This is true for both Sweden and Canada where

hospital capacity has diminished over the last several years. This is the key reason for the need to "flatten the curve" (reduce infections) so as not to overwhelm an underprepared health care system and reduce mortality.

During the earlier stages of the epidemic, almost every country encouraged social distancing as an effective way for COVID-19 containment, Sweden and Canada included. Since that time, behavioral modifications have become particularly important to "flatten the curve."

Many countries have adopted stringent lockdown approaches. In most European countries with larger outbreaks, such as Italy, Spain and France, all non-essential public places have been shut down. In many cases, special permits are required to leave home, even to walk the dog.

One notable exception to this approach is Sweden.

Unlike most countries that are relying on obedience to contain COVID-19, Sweden has decided to use the conformity principle. The Swedish government is banking that a culture of trust among citizens, and between citizens and the government, will be enough to contain the virus.

This means that despite the pandemic, borders along Sweden are only partially closed, there are no shutdowns of restaurants or public spaces; public health officials are mostly compelling, not demanding, that work places and schools switch to online methods.

This bold approach is undoubtedly risky, as Sweden is far from being unaffected by COV-ID-19. On March 10, rapid spikes in the number of cases culminated in Sweden's public health agency raising the risk level of community spread of the virus to 'very high' in Stockholm, which is the highest grade on the scale.

Unsurprisingly, this 'trust' approach has raised criticism.

Responding to critics, Sweden's chief epidemiologist, Dr. Anders Tegnell, has suggested that there is no consensus that closing borders is going to work to reduce the spread of the virus. In fact, that's still the advice of the World Health Organization to date.

Canadian officials echoed similar tones early on. However, unlike Sweden, Canada has rapidly changed tone and moved towards more enforced measures, both federally and within specific provinces. Having personally experienced the outbreak in both Sweden and Canada, I can understand the Swedish government's confidence in a system based on trust. When the risk level was raised, despite a lack of law enforcement, fewer people could be seen in public spaces. Academic and research institutions were strongly urging working from home, and within a short time, meetings were being held online.

The Swedes are betting everything on their rule-abiding citizens.

Canada has also tried to use somewhat of a trust-based approach during the COVID-19 crisis. For instance, international travellers were initially merely asked whether they had symptoms, or to self-isolate upon returning home. However, the introduction of the Quarantine Act now imposes serious fines and penalties. This is a responsible measure given the abundance of people not abiding the original 14-day self-isolation rule.

Canada is showing that it is willing to give trust a chance, but if that fails, it will resort to force.

Which approach is better? So far, neither approach seems to be

working particularly well.

Since April 20, there have been more than 36,670 COVID-19 cases reported in Canada (~38 million population), and over 14,777 cases in Sweden (~10 million population). Real numbers in the community are hard to know because testing levels in both countries have been varied and inadequate and results delayed.

There are pros and cons to both approaches. A trust-based approach imposes a smaller burden on the economy and on the psychological welfare of citizens. However, the cost is dear. It may prove ineffective against virus spread and endanger more lives.

An enforcement-based measure, like Canada's, is all about timing. If done too soon and for too long, it could cripple the economy and the mental health of its citizens. If done too little, too late, it may not 'flatten the curve' as hoped.

Time will be the ultimate judge. However, the numbers so far indicate that Canada's approach has been vastly more effective than Sweden's in keeping down the relative number of cases and deaths. Indeed, most countries share Canada's, not Sweden's, approach in dealing with the COVID-19 crisis. And now, in Sweden, there is growing pressure to adapt more enforced measures too.

Mohammad-Reza Ghovanloo was a visiting researcher at Science for Life Laboratory in Stockholm, Sweden, and is a biomedical researcher at Simon Fraser University in Burnaby, Canada.

Policy Briefing **Health**

Change accelerator: COVID-19

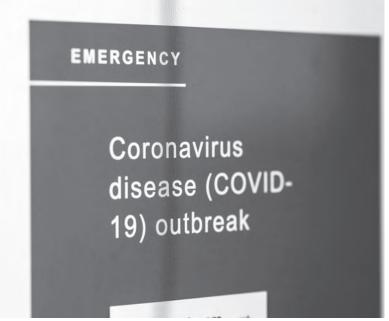
Don Drummond, Chris Simpson, Duncan Sinclair, and David Walker

Our business is at an inflection point. We can continue down the path we've been on ... or we can make the significant and difficult changes necessary, "said Gavin Hattersley, Molson Coors CEO to The Globe and Mail recently, and so it may be with health care after COVID-19. Many crises have been predicted to produce lasting changes to society's *status* quo ante, changes subsequently proven minimal to ephemeral, as Andrew Coyne recently noted his column in The Globe. It is just possible, however, likely even, that some long-advocated changes to health care's organizational structure and ways of working will have been shown to be so effective that they will remain imbedded in the "new normal" when the crisis is over. Normally a slow evolutionary process, often in the face of determined resistance, the pace of change in health care may prove to have been accelerated by tiny RNA virus particles infecting their new human hosts.

A telling example is the use of information and communications technologies to supplement, if not

replace face-to-face with virtual contacts between people and their care givers. Increasingly enabled and enriched by technology's development over many years, the necessity of social distancing, combined with decisions by governments to remunerate physicians for providing services virtually by telephone, e-mail, visual "apps" and the like, has almost instantly overcome previous objections and warnings raised against its use. There may well be some modifications subsequently; one related to the privacy and security of the digital transmission of health information, but it is hard to see the practice of virtual health services being "dialled back" when the COVID-19 crisis

Witness also the once intractable alternate level of care (ALC) issue; necessity has proved again to be the mother of invention. Collectively, health care's providers, working together region by region, have shifted ALCs out of acute care hospitals to create there the capacity to accommodate anticipated surges of patients suffering COVID-19's worst life-threatening symptoms. It's a good move for hospitals and for those acutely ill with the new virus. Once we know its effect on the health and quality of life of those ALCs in their new



There is no doubt that the COVID-19 crisis has demonstrated that problems previously thought intractable can be resolved, and quickly, by local/regional care providers working together as integrated systems, using their own resources and ingenuity. *Image courtesy of Pexels*

out-of-hospital environments, this too may well become standard practice among the providers of health-care services, region by region

Also, a newly calm and controlled environment in ERs has replaced that of crowded waiting rooms, "hallway medicine," and ambulances lined up in the parking areas short months ago. Has this new normal been the result of family physicians now caring around the clock, on weekends, and as well for those absent patients? Or are they ill at home avoiding care they would have sought previously out of fear of contracting COVID-19 in an ER or clinic? Only time and analysis of the relevant data will tell.

Such questions remain to be answered before these and comparable changes will be made permanent. But there is no doubt that the COVID-19 crisis has demonstrated that problems previously thought intractable can be resolved, and quickly, by local/ regional care providers working together as integrated systems, using their own resources and ingenuity. Will such bottom-up, collaborative planning and execution continue to prevail when the COVID-19 crisis is over? There have been many as yet unsuccessful to failed attempts to transform Canada's infamous "field of silos' into systems of health and healthcare services. Will the stimulus of this crisis provide successful examples of how to build real systems successfully where top down direction by government ministries and their proxies has

We will await answers when the crisis has ended.

Don Drummond, Chris Simpson, Duncan Sinclair, and David Walker and are all members of the health policy council at Queen's University. Don Drummond is also a Senior Fellow at the C.D. Howe Institute and a member of their COVID-19 crisis working group.

The Hill Times

Finding safety during the COVID-19 pandemic: increased risk of domestic and interpersonal violence



Stephanie Montesanti

Opinion

EDMONTON—As the Coronademic (COVID-19) global pandemic continues, more and more countries, cities, and communities are tightening or extending public health measures to flatten the COVID-19 curve. While actions such as encouraging individuals to adopt physical distancing, mandating school and business closures, and imposing travel

restrictions may reduce the transmission of the infectious disease, unfortunately not all are finding safety in the resulting isolation.

Across the globe, the COVID-19 pandemic has been linked to spikes in domestic violence reports, crisis calls and shelter intakes. Domestic violence experts in Canada predicted that domestic and interpersonal violence would increase, as observed in countries that were hit by the virus months ahead of Canada's COVID-19 outbreak, including France and China.

COVID-19 appears to be deepening the consequences of social and health inequality. Previous research from my team has shown that past public health emergencies such as wildfires and floods, exacerbate existing inequalities for populations most at-risk. When a society is hit with a health crisis it can set off a cycle in which job

losses, unemployment and declining economic status exacerbate existing inequalities such as food insecurity and mental health issues—all pointing to crisis-related stressors that can lead to increased violence.

Economies prone to boom and bust, like the province of Alberta, have periods of high unemployment and instability. In a televised address to Albertans, Premier Jason Kenney pointed to three crises effecting the province: the economic downturn, the staggering fall in global energy prices, and the COVID-19 pandemic. He predicted a 25 per cent unemployment rate resulting from COVID-19 alone.

This isn't the first time Alberta has seen an increase in domestic violence rates associated with financial hardship. In 2016, the province reported an increase in domestic violence when thousands of jobs were lost in the oil and mining industries during an economic recession.

economic recession. In Alberta, the pandemic has resulted in the use of virtual care codes such as telehealth billing. However, these codes are problematic because they do not adequately account for complex patient care needs that require longer visits. My colleague, a family physician and strong advocate for ending domestic violence, shared her concerns regarding virtual care for her domestic violence patients. She asks, "how do we implement virtual domestic violence care when individuals at risk are not able to separate from their perpetrators?"

In what ways do public health measures such as quarantine and

physical distancing put individuals experiencing domestic or interpersonal violence at greater harm? Quarantine and physical isolation increase face-to-face exposure to perpetrators of violence and can reinforce abuse. Women already face complex decisions and wide ranges of barriers preventing their ability to leave an abusive relationship. In times of pandemic, when mobility is constrained, physical distancing measures are imposed, economic vulnerability increases, and legal and social services are scaled back, challenges in escaping abusive partners are exacerbated.

Health authorities have stated that we are realistically a year away from a vaccine and with limited supplies of ventilators and personal protective equipment faced by many provinces, public health interventions such as physical distancing and quarantine will be effective to at least some degree. The hope is that such public health interventions, while incapable of completely stopping the transmission of the virus, will be able to slow the pandemic. During the COVID pandemic we see decisionmakers confronted with ethical dilemmas arising from their public health decisions. The tension between society's commitments to freedom and social justice and "containment strategies" imposed by provincial governments have been the topic of much debate in the media and the public sphere. Our government recognized the implications of physical distancing measures for Canadians and

responded by enacting laws to protect the jobs and income of people who stay at home or lost their jobs. However, for individuals experiencing domestic violence or partner abuse the threat looms largest where they should be the safest.

An immediate response by the Canadian government in the short-term to address domestic violence increases during pandemics has been to increase funding for agencies providing emergency shelter. The federal government announced a \$82-billion COVID-19 aid package on March 18, 2020, which included earmarked increases in \$50-million funding for gender-based violence shelters and sexual assault centers across the country. But this policy response is problematic. We typically see an increase in resources or short-term funding for social and health services during a public health crisis or emergency, and when the crisis is no longer a threat, the services that many individuals and communities have benefited from disappear. We need to ensure that olicy decisions are base equity, meaningful public engagement and sustainable long-term solutions. Policy and decisionmakers need to understand the consequences that result from short-term funding for services intended to address long-standing problems that are often exacerbated by a public health crisis. Stephanie Montesanti is a

professor of public health at the University of Alberta.

Health Policy Briefing

Why does it take a crisis to understand that health workers are our health system?

Now more than ever we need to show our valuable health workers our support by explicitly including them in the capacity planning equation, and implementing protective policies and practices. Otherwise, we're left with one hand clapping.

BY IVY BOURGEAULT, SARAH SIMKIN, & CAROLINE CHAMBERLAND-ROWE

OTTAWA—In country after country, members of the public are clapping from their doorways and balconies to show their appreciation of health workers. It is becoming clearer than ever that our health system is largely our

health workers.

Ventilators do not work without health workers; testing does not happen without health workers. All forms of care required to respond to this crisis will require health workers.

Health system capacity—of which health workers are a key component—is often represented as a flat line on epidemic curves. The main aim of flattening the curve is to keep demand below the upper limit of health system capacity. This flat line gives the impression that health system capacity is static. It is not.

Social distancing is a way for us to help moderate the *demand* side of the equation, but how are we to bolster the *capacity* side of the equation to keep ahead of that curve?

Ongoing analyses of health system capacity are modelling increased capacity of physical resources. What is unclear is whether these analyses are modelling health workforce capacity, and if so, how.

Health workforce capacity is not simply the number of doctors, nurses, respiratory therapists, or other essential health workers that are actively registered. What health workers are allowed to do (their scopes of practice) and how they do it (their practice patterns) can vary substantially, depending on the populations they care for, the settings in which they work and the regulations by which they are governed.

But health workforce modelling should not only model how work is typically done. In times of crisis, when systems are called upon to demonstrate resilience, responsiveness, and surge capacity, models need to take into consideration how work could be done and demonstrate what capacity could be mobilized through more optimal use of available resources.

That is, how could we better utilize the whole of the health workforce to turn the capacity line upwards?

Responding to this crisis will require shifting tasks and leveraging the full scope of skills available within the health workforce. These innovations are often employed in low resource settings, out of necessity, but even high-income countries are quickly shifting tasks and redeploying available human resources.

In the U.K., for example, anyone with skills in sedation, includ-

ing dental nurses who are part of the National Health Service are being recalled to help respond to the COVID crisis. In Australia, physiotherapists are similarly being redeployed to work in acute respiratory teams. Additional pools of health workers, such as trainees and retirees, are being mobilized.

To best accomplish this, we need to know who is in the health workforce, where they are, and what skills they have. Sounds straightforward—and yet, in Canada, these basic data are often fragmented, out of date or hard to access.

With better data infrastructure and coordinated health workforce planning, we could proactively address inadequacies in the system and develop the flexibility necessary for the workforce to respond effectively to pandemic situations.

We need to be building this infrastructure now.

It is time for custodians of health workforce data—regulatory authorities, insurers, employers, health professional associations, educational institutions and all levels of government—to cooperate in the collection and sharing of information about the health workforce.

Processes and pathways that emerge out of necessity should be maintained and developed after the crisis has passed in order to leverage this crisis as an opportunity for system strengthening. The performance of our health system—during this pandemic and beyond—depends upon high quality and timely data to support decision-making.

By prioritizing health workforce data and infrastructure, we will be able to better maintain the well-being and productivity of our health workers. We will be able to protect their physical safety by predicting who is going to need personal protective equipment and ensuring that this critically important equipment gets to workers when and where they need it. We will also be able to promote their psychological health and safety by planning for sustainable workloads and appropriate supports.

Now more than ever we need to show our valuable health workers our support by explicitly including them in the capacity planning equation, and implementing protective policies and practices. Otherwise, we're left with one hand clapping.

Ivy Bourgeault, PhD; Sarah Simkin, MD; and Caroline Chamberland-Rowe, MSc, are investigators with the Canadian Health Workforce Network and the University of Ottawa.

The Hill Times

Who gets left behind when we are forced to triage scarce health resources?

It always requires some effort to safeguard human rights. But it can take a pandemic to force our hand and lay bare the depth of our commitment.



Roxanne Mykitiuk & Trudo Lemmens

Opinion

With rapidly rising infection rates due to COVID19, provincial and territorial health care officials are bracing themselves for situations of extreme shortage of critical care beds,

medical equipment and personnel necessary to treat the sickest of the sick in hospital settings. In a pandemic setting, triage is the allocation of treatment and scarce resources to patients according to a pre-determined set of criteria or priorities in order to achieve a specific goal.

This goal is most often maximizing the number of survivors, but can also, in times of extreme health-care crisis, include the survival of essential health-care personnel. But who gets left behind?

Persons with disabilities fear and distrust priority setting in medicine—and you can understand why. They worry that priorities, or the way access criteria are interpreted and applied, will put people with disabilities at or near the bottom of the priority list. History and the personal healthcare experiences of people with disabilities fuel these fears.

Some provinces have drafted clinical triage guidelines for decision-making in circumstances of extreme shortage, to avoid decisions being made by individual physicians on the fly. The Canadian Medical Association has also recently issued a framework for such decision-making.

Triage guidelines set out selection criteria, and a decision-making procedure by triage committees.

Under these scenarios, patients who otherwise would receive critical care resources will be ineligible according to various scenarios of scarcity, even though they should continue to receive non-critical and palliative care.

It is important that key ethical and human rights obligations towards people with disabilities be affirmed in clinical triage policies. People with disabilities must not be sacrificed based on faulty presumptions and stereotypes about living with disability.

While decisions need to be made to prioritize the allocation of scarce resources to individuals more likely to benefit from treatment, people with disabilities must not encounter discrimination in seeking life-sustaining treatment. Their lives are equally valuable to those living without disabilities.

Any triage decisions reflecting a devaluing of the lives of people with disabilities or based on ableist presumptions about quality of life or on long-term survival are discriminatory.

Priority setting criteria solely based on the presence of a disability violates provincial human rights legislation and the Charter of Rights and Freedoms. Disabilities, unrelated to near-term survival, cannot be criteria for prioritization decisions under COVID-19 triage guidelines.

We recommend the following to ensure the rights of persons with disabilities:

Triage guidelines should explicitly emphasize the need to avoid discrimination on the basis of human rights grounds. The presence of a disability, including a significant disability, is not a permissible basis for giving people lower priority for intensive care.

Criteria unrelated to near-term survival cannot be used as a basis for priority setting or resource allocation decisions.

Survival estimates should be restricted to survival of the event for which the critical care intervention, such as a respirator, is required. Estimates beyond this risk opening the door to evaluative decisions about the value of a life with a disability.

The fact that a person with a disability may require accommodations during treatment, including intensive care, or to perform activities of daily life outside of treatment, are not a permissible basis for giving that person a lower priority for care.

It's critical, of course, that all decisions about priority setting must be informed by evidence-based clinical criteria, and not based on stereotypes or assumptions that people with disabilities experience a lower quality of life or that their lives are not, or no longer, worth living.

Decisions should also not be based on stereotypical assump-

tions about survival chances of people with disabilities.

All guidelines about priority setting must state that persons with disabilities who use ventilators in their daily living and seek medical attention in hospitals with COVID-19 symptoms will be permitted to continue to use their personal ventilators and will receive COVID-19 treatment. The personal ventilators of persons with disabilities who come to hospital with COVID-19 symptoms must not be reallocated.

When guidelines refer to frailty scales that correlate with short-term survival in determining priorities, doctors should not assume that a specific diagnosis or disability is indicative of poor near-term survival.

Provinces and the CMA should be lauded for drafting triage policies to facilitate challenging pandemic decision-making. But they should do so with transparency and invite public input. Above all, they should ensure that guidelines live up to human rights standards. We have concerns that some of the proposed guidelines do not

It always requires some effort to safeguard human rights. But it can take a pandemic to force our hand and lay bare the depth of our commitment.

Roxanne Mykitiuk is a professor at Osgoode Hall Law School and director of the Disability Law Intensive Program at York University, Toronto. Trudo Lemmens is professor at the Faculty of Law and the Dalla Lana School of Public Health of the University of Toronto.

Keep border closed until U.S. 'breeding ground' for virus under control, say public health experts

Continued from page 1

clinical epidemiologist at the University of Ottawa. "They're essentially a breeding ground for this virus."

"Under control" would mean, at minimum, a decrease in the rate of new cases popping up for two to four consecutive weeks in the area a traveller is coming from or visiting, said Dr. Walker.

"That's not going to happen for a long time," he said.

Until it does, Canada should keep the border closed, said Melissa Marx, a professor who researches global disease epidemiology and control at Johns Hopkins University's Bloomberg School of Public Health in Baltimore, Maryland.



Melissa Marx is an assistant professor at the Institute for International Programs, Global Disease Epidemiology and Control Program, Department of International Health at the Johns Hopkins Bloomberg School of Public Health. *Photograph courtesy of the Bloomberg School of Public Health*

"If the United States does not have this under control, I would take care of my citizens. If you have the testing in Canada that you need, you have the contact tracing in Canada that you need, I would stick with what you can control," said Prof. Marx in a phone interview with *The Hill Times*.

"If I were Trudeau I would probably be careful about opening the border with the U.S. before you have confidence that you're not going to get a lot of imported cases, because the U.S. doesn't know who is infected and who is not," she said.

"Border closings and stay at home orders will probably be necessary until testing capability and public health tracking and isolation and quarantine capacities are up to speed," she said.

As of April 23, the U.S. had more than 840,000 confirmed cases of COVID-19, roughly one-third of the global total, and four times as many as the country with the next most, Spain, according to a tracking tool maintained by Johns Hopkins.

Canada's chief public health officer, Dr. Theresa Tam, told



Mark Walker is a physician and the interim director of Internationalization and Global Health at the uOttawa Faculty of Medicine. *Photograph courtesy of the University of Ottawa*

reporters on April 21 that Canada had 38,422 confirmed cases of the disease. Public health officials in Ontario have estimated that the spread of the virus through the province has now peaked, as it has in British Columbia and several other provinces.

Canada and the United States mutually agreed to close their land border to non-essential travel on March 21, and then agreed to extend that closure until at least May 18. Canada closed its airports to non-resident travellers on March 16.

Before Canada opens its borders to travellers, it should ensure the virus is under control at home, said Susan Bondy, the director of the master's of public health epidemiology program at the University of Toronto's Dalla Lana School of Public Health.

That means being able to trace and contain every new case of COVID-19, she said. Cases that can't be traced are a sign that the virus is running through a community undetected, she said, and relaxing social distancing restrictions on those communities would risk a new flare up of the disease.

Travellers need places to stay, want places to visit, or may want to do business face-to-face; there's no sense in allowing them into the country before social distancing protocols have been relaxed, said Prof. Bondy.

Public health authorities should also wait to see proof that new flare-ups, which are inevitable, have occurred and successfully been contained, before they can be confident that social distancing can be relaxed, she said.

Canada shouldn't open its borders until it sees that other countries are hitting those same checkpoints, she said.

However, Steven Hoffman, another expert following the crisis, said that opening the border could be one of the first steps Canada takes as it relaxes public health restrictions, and one that may not be far off.

Canada has ordered all travellers entering the country to go into isolation for 14 days, matching the longest known incubation period for the virus. If travellers are sticking to those orders, they shouldn't pose a major risk, said Prof. Hoffman, the director of the Global Strategy Lab, a collaborative project between the University of Ottawa and York University that aims to advise governments and public health organizations on international health threats.

"With the 14-day quarantine order for people entering Canada and the requirement to have a credible quarantine plan, we already have what we need to reopen our international borders," said Prof. Hoffman.

"If we have confidence in the 14-day quarantine order, then re-opening our border to international traffic could be among the first steps the government takes in a gradual return to normalcy."

Prof. Hoffman said that did not mean opening the border right away to tourists, who probably wouldn't come anyway if it meant enduring a 14-day quarantine upon arrival. Rather, Canada could begin to open its border to some of the people hurt the most by its closure; for example, non-traditional families that have been forced apart by the travel bans, or highly-valued workers from abroad.



Susan Bondy is the director of the masters of public health epidemiology program at the University of Toronto's Dalla Lana School of Public Health. *Photograph* courtesy of Susan Bondy

Warm weather could help

The approaching warm weather could help to slow the virus down, said Dr. Walker.

Like SARS or the common cold, there is evidence that the novel coronavirus thrives in cool conditions, and may wax and wane seasonally, he said.

However, Dr. Walker said he expects it will take 18 months or more to produce a vaccine for the virus.

"Until then, physical distancing, lack of travel, is going to be the new normal for the next year," he said.

Feds had 'contradictory' evidence when they closed border

Closing the border was the right decision for Canada, said Dr. Walker, who likened it to an extension of social distancing—another way of limiting the movement of people within a country to slow the spread of the virus.

It has worked in the United States as well, said Prof. Marx. The U.S. also closed its border with Mexico last month, and has restricted air travel.

"It can, and I think it did in this case, help to keep the number of infections that were travelling on flights [down], it helped to minimize the number of infections travelling via air and seeding outbreaks," said Prof. Marx of the border closures.

"This is a very blunt instrument," said Prof. Marx. "Closing borders is a way to buy time. It's supposed to be used in that way. We epidemiologists don't like it very much because it is so blunt."

That "blunt instrument" was needed once it became clear that the virus could be spread by people who weren't showing any symptoms of illness, and travellers could neither be screened or screen themselves for the virus.

"I don't think we had any idea how contagious this is" until recently, said Dr. Walker.

COVID-19 is a new disease caused by a new strain of virus. As it started to spread in China in the beginning of the year, many public health officials believed it could be contained using contact tracing and isolation—identifying people who had the virus, tracking who they had come into contact with, and telling those people to isolate themselves.

Both Prof. Bondy and Prof. Hoffman said the government didn't have any scientific evidence to tell them that closing the border would be the right decision at the time it was closed in mid-March.

"It is quite clear that what they would have had available to them was contradictory and inconclusive evidence," said Prof. Bondy.

"Certainly we had no information as to whether or not it would be effective or work against this bug for Canada, because we had never seen this bug before, and we had never seen this bug before in Canada," she said.

There was no published research until very recently on how effectively China's attempts to contain the virus—including travel restrictions and other measures—slowed its spread, she said.

"So the science to show anything about whether or not it would be effective is coming out only now, and decisions had to be made before now."



Steven Hoffman is the director of the Global Strategy Lab, a collaborative project between the University of Ottawa and York University focused on threats to international health. Photograph courtesy of the Global Strategy Lab

The downsides of closing the border to international travel—economic harm, restricting people's freedom of movement, and potentially diplomatic trouble—were clear, said Prof. Bondy, but as of mid-March, the benefits were not.

"The benefits—people could identify hypotheses, what's plausible—but I don't think they had strong evidence to say how much the benefit would be, and whether it would be enough to make a difference," she said.

Scientific evidence clearly shows that banning travel from one or a few hotspots won't stop the outbreak of a virus, but there is no precedent of countries shutting their borders entirely that the government could have drawn upon, Prof. Hoffman told *The Hill Times* in another interview earlier this month.

In a follow-up interview last week, he said it's hard to know, based on the evidence, whether the government's decision to close the border was the right one at the right time.

In mid-March, when Prime Minister Justin Trudeau (Papineau, Que.) made that decision, the outbreak was gaining steam, and it was the time for "bold measures," he said.

"In the absence of scientific evidence of effectiveness, governments still have to make a choice," he said.

Mr. Trudeau dodged questions until recently about the rationale behind his decision to close the border when he did, just a week after Health Minister Patty Hajdu (Thunder Bay-Superior North, Ont.) had said travel bans wouldn't help stop the virus.

On April 18, he told reporters that the government closed the border "in order to prevent further spread of COVID-19 from coming in from overseas," and said that decision was part of the reason the growth in infections was starting to slow in Canada.

A spokesperson for Global Affairs told *The Hill Times* earlier this month that the rapid spread of COVID-19 through Europe and the U.S. in early March "due largely to international travellers" was one of the reasons behind the decision to close Canada's borders.

peter@hilltimes.com The Hill Times

Government collaboration with MPs 'off the charts' amid COVID-19, says Green Party's May

While Elizabeth
May finds daily
technical briefings
on the coronavirus
very helpful, other
opposition MPs say
these briefings are for
information gathering
only, and have limited
value.

Continued from page 1

and improve government policies as an MP even though she is part of an opposition party.

"By 1:30 in the afternoon here [British Columbia]—so 4:30 in the afternoon in Ottawa–seven days a week, we have access to ask questions," she said.

"Parliamentarians can phone into a conference call line, and I have a pretty good track record of being able to get my questions asked," she said in a phone interview with *The Hill Times*. "The questions that are put in the briefing and the issues that are raised in the briefing tend to get flagged as issues that need work, so it's not just an exchange of information."

The daily teleconference briefing is coordinated by Health Minister Patty Hajdu's (Thunder Bay-Superior North, Ont.) office and takes place at 4:30 EST. The briefings, which are about 30-45 minutes long, started only a few days after the House adjourned in mid-March because of the spread of the coronavirus.

In the briefing, between 10 and 12 senior public officials from different departments, including Health, Finance, Global Affairs, Canada Revenue Agency, and others, answer questions from Parliamentarians. If they don't have the information to answer a specific question, these officials take note of questions and provide answers the next day.

Ms. May said that she has been impressed by the briefings and the cooperation from the government on COVID-19, because the government pays attention to issues raised even by opposition MPs.

She said in one call she flagged a problem with the government's \$73-billion wage subsidy spending program that left some Canadians unable to access the benefits. She said the Finance Department official on the call took note of the issue, and when the government introduced its next piece of relief legislation, the issue she had identified had been addressed.

"Now, I don't know whether I was the only one who raised it, but it was certainly dealt with in the legislation," she said. Also, Ms. May said, since the onset of the pandemic, she finds cabinet ministers more accessible to MPs via email or on the phone, and she finds them very receptive to concerns of government and opposition MPs.

"So the flow of information and the degree of collaboration is frankly off the charts," she said.

"I've had direct personal contact with most staffers of any minister I've needed information from, or that I've wanted to share information. I get direct personal contact [to cabinet ministers] at a level that's far more than the normal when Parliament is in session."

self-isolation for more than two weeks. Ms. Grégoire Trudeau announced recently that she had recovered fully from COVID-19.

The House partially resumed sittings last week, with a plan for one sitting in the House of Commons each week, and weekly virtual sittings as soon as the House administration can work through the technical barriers to holding them.

For weeks, Mr. Trudeau has been holding a daily press conference to provide updates on the government's actions to help Canadians affected by the pandemic. To mitigate the damage caused, the government has announced measures worth billions of dollars for Canadians of all walks of life.

As a result of the lockdown across the country, more than six

Recent public opinion polls have suggested that a majority of Canadians are satisfied with the federal and provincial governments' handling of the crisis.

According to a Leger poll released on April 20, 77 per cent of Canadians said they were satisfied with the measures put in place by the federal government to fight the outbreak, and 83 per cent said they were satisfied with their respective provincial governments' efforts. The poll also found that 92 per cent of Canadians said they trust their health professionals such as family doctors and nurses; 81 per cent said they trust public health officials; and 72 per cent expressed their trust in Dr. Theresa Tam, the chief public health officer helping to guide Canada's efforts to fight the pandemic.

sitting, they can do that during the daily House proceedings and also during the 45-minute Question Period.

NDP MP Brian Masse (Windsor West, Ont.) told *The Hill Times* that briefings from government officials help MPs to understand the technical aspects of a government policy, program or bill. But, he said, those briefings are only useful for gathering information, and don't give MPs an opportunity to debate with a minister or a parliamentary secretary the merits, demerits or needed improvements to whatever the government is doing.

"Under any circumstances, briefings are always helpful, because they really can provide basic information about legislation and information," said Mr. Masse.

In addition to the daily 4:30 pm briefing, other cabinet ministers, including the Finance Minister Bill Morneau's (Toronto Centre, Ont.) office, also hold teleconference briefings for Parliamentarians to update them about the government initiatives to mitigate the damage caused by COVID-19. Mr. Masse said that these briefings are helpful but are too short, not leaving enough time for all politicians to ask questions.

"Depending upon the group you are with, the session could be dominated either by the parliamentary secretary or a Liberal that seems to be occupying a lot of time on the phone and eliminating Members' time to raise questions," said Mr. Masse. "If it's a bureaucratic meeting, then there's no policy direction really formally passed on to the political direction. So, it's for information gathering, it's not for a two-door process for legislative changes."

Conservative MP Michael
Cooper (St. Albert-Edmonton,
Alta.) said that technical briefings
are better than nothing when the
House is not sitting. He said on one
hand, MPs can at least question senior government officials in those
calls, but based on his experience,
mostly, they don't get any information that's exclusive or unique, and
not available through other means.

"Certainly having the ability to speak with officials is a positive," said Mr. Cooper. "They're helpful in that limited way. There's no loss in having officials on the phone and providing Members of Parliament with an opportunity to ask questions directly."

Liberal MP Han Dong (Don Valley North, Alta.) said that when the House was adjourned in the middle of the pandemic in March, the Liberals were able to reach out to cabinet ministers to provide their feedback in their daily caucus meetings about the government's handling of the pandemic. But, he said, the opposition parties had no platform to raise their constituents' concerns with the government. So, the technical briefing is a good for opposition parties to reach out directly to government officials. Mr. Dong described the government's daily technical briefings as a "good" and "sensible practice."

"The government is trying to do its best to make sure that MPs, doesn't matter which party, have the open channel for dialogue," said Mr. Dong. "This is a sensible practice."

This is a sensible practice." arana@hilltimes.com The Hill Times



In her House speech on April 11, Ms. May applauded the government for extending cooperation to the opposition parties.

"This is what I hear from ministers, to keep sending them the specific concerns that we see and to keep telling them where the gaps are, because the MPs on the ground, right across Canada, are the eyes and ears on the front line who are able to say that nothing that is in place right now, with all due respect, is working for small businesses," said Ms. May.

The House of Commons was adjourned on March 13 following the advice of health officials that people avoid large gatherings, travel, and close interactions amid the COVID-19 outbreak. The adjournment came on the heels of the news the day before that Sophie Grégoire Trudeau had tested positive for coronavirus, after showing flu-like symptoms following an overseas trip to England. Prime Minister Justin Trudeau (Papineau, Que.) had no symptoms but still remained in

million Canadians have applied for employment insurance or emergency financial aid from the government.

In a recent report, the International Monetary Fund has described the pandemic as a "crisis like no other" and predicted that the Canadian economy would shrink by 6.6 per cent this year. The report said that the economy would grow by 4.2 per cent next year assuming that the pandemic will be over in the second half of this year and that normal business activities would resume. The report also said that the economic consequences of the pandemic would "very likely" push the international economy into the worst recession since the Great Depression of 1930s.

As of deadline last week, there were 2,707356 confirmed coronavirus cases around the world resulting in 190,742 deaths. In Canada, there were 42,098 confirmed COVID-19 cases and 2,147 people had died because of the virus.

The poll also suggested that if an election were held now, 42 per cent of decided voters would vote for the Liberal Party, 29 per cent for the Conservatives, 14 per cent for the NDP, and five per cent for the Green Party.

The online poll of 1,504 Canadians was conducted from April 17 to April 19, and had a margin of error of plus or minus 3.1 percentage points, 19 times out of 20.

Since the House suspension in mid-March, all parliamentary caucuses have been holding virtual weekly national caucus meetings. The Liberal caucus holds its teleconference caucus meeting every day, giving MPs an opportunity to question cabinet ministers and sometimes the prime minister about specific government programs and provide them with feedback from their constituents.

During the House suspension, opposition parties have had few opportunities to question cabinet ministers directly on government policies and measures to fight the coronavirus. When the House is

Pandemic forces feds to hit pause on climate legislation; environmentalists sanguine about net-zero pledge

With much of the government's legislative agenda in limbo amid the COVID-19 crisis, environmental advocates say they're hopeful the government will still be able to introduce a legislative framework for Canada to meet its pledge to reach net-zero emissions by 2050.

Continued from page 1

The government has been forced to hit pause on its legislative agenda, with Parliamentary sittings disrupted and its attention diverted toward grappling with the pandemic's ruinous impacts on the economy. That has included delaying some of its promised legislation related to climate change.

In a year in which climate change was expected to take centre stage after most voters backed parties perceived to have a credible plan to rein in emissions, **Environment Minister Jonathan** Wilkinson (North Vancouver, B.C.) has largely receded into the background.

Isabelle Turcotte, director of federal policy at Pembina Institute, said it's "appropriate" that much of the government's communication to the public has been centred on the pandemic. She noted that Mr. Wilkinson and his predecessor, now-Infrastructure Minister Catherine McKenna (Ottawa Centre, Ont.), have been 'quietly" working on developing stimulus programs as part of Canada's economic recovery, as reported by The Canadian Press.

While there hasn't been a "formal outreach," Ms. Turcotte said, her group, along with others, have been offering recommendations on the priorities that should "guide these decisions."

"Given their mandates uniquely positioned to be going out there, collecting input on the kinds of investments that are going to kickstart a resilient economy," Ms. Turcotte said. "They have the ready knowledge on the best channels to deliver the support. We know they're doing this."

That Ottawa has Ms. McKenna and Mr. Wilkinson—and with some help from Heritage Minister Steven Guilbeault (Laurier-Sainte-Marie, Que.)—running



Minister Jonathan Wilkinson. pictured on Feb. 24, has been working behind the scenes with Infrastructure Minister Catherine McKenna on Canada's post-COVID-19 recovery plan. The Hill Times photograph by Andrew Meade

point signals that the government is putting a "green lens" on the recovery efforts, said Catherine Abreu, executive director of Climate Action Network.

"We have to take some opportunity to reflect, to leapfrog some of the policy hurdles, and implement policies and protections that will build resilience into society,' she said.

She cited the need for a "robust retrofit strategy," which "would put thousands of people" from the skilled trades sector to work—workers who may have found themselves out of a job due to COVID-19.

"There's the urgency to respond to the immediate needs of the people being affected at this time, [as well as] to figure out how our economy is going to look when we come out of this," she added.

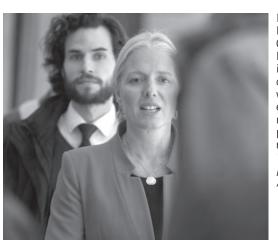
For Dale Marshall, national climate program manager with Environmental Defence, the pandemic's impact on Ottawa's climate agenda "remains

to be seen," since the government continues to roll out relief measures.

"I think there are definitely different directions this could decide that this is not the time for climate action, that economic recovery in the oilpatch is more important than climate action," he

Pointing to the feds' April 17 announcement that it will spend \$1.7-billion to clean up orphan wells in Alberta, British Columbia, and Saskatchewan-\$1billion of which will go to Alberta—Mr. Marshall noted that The Globe and Mail previously reported that the province expected the feds to provide \$15-billion in relief to the industry.

"The package we saw [on April 17] was somewhat of a relief for people who want to see action on climate change, because the demands were much higher; it could'vebeen a \$15-billion package that was focused on increased production, rather than environmental measures," he said. "These are still subsidies that we don't entirely support, but it was much smaller than we thought, and at least the focus is on environmental improvement."



Ms. Turcotte said Ottawa has been under "a lot of pressure" from the sector for relief, whether asking for the relaxing or delaying of environmental regulations to an industry that has seen the value of its commodity plunge. So far, the "broad" strokes of the government's relief have shown that it hasn't abandoned existing environmental programs, he said, pointing as an example to the government's resistance to calls to delay a scheduled increase to the national carbon price on April 1.

At the same time, Mr. Marshall said there were worrying signs, noting that Export Development

Canada and the Business Development Bank will offer companies commercial loans between \$15-million and \$60-million in response to the pandemic. According to an April 17 release, that funding is aimed at supporting "operational cashflow needs for a 12-month period" to help businesses continue their operation.

"What worries me, is that there are still open doors for the government to shovel literally tens of billions of dollars into the oil and gas sector," he said. Mr. Marshall said he would "reserve judgement" on the overall impact

Infrastructure Minister Catherine McKenna is working closely with the environment minister on a post-COVID recovery plan. The Hill Times photograph by Andrew Meade

this will have on Ottawa's climate change agenda, but said he doesn't "trust" the government to ultimately "change course" and withdraw its financial support from the oil and gas industry.

Andrew Gage, a staff lawyer with West Coast Environmental Law, who leads the group's climate change program, said the pandemic is making the need to talk about

climate change "more critical, not

"I think the federal government has an opportunity to engage with Canadians about or they could just go with a, 'Let's play it safe in the short-term' outlook, but in a way that really sacrifices Canada's long-term economic and social health."

He said that so far, Ottawa has generally appeared to "signal that they recognize they need to continue to work on climate change, [that] it is not an either-or approach."

This is far from being a time to go, 'Well, we can put these

things to one side," he said. "This is a time when we are seeing how important it is to keep our communities safe, and doing so requires us to increase our commitment to reducing greenhouse gas emissions and to building more climate resilient communities."

Mr. Gage pointed to the feds' \$750-million emission-reduction fund, which was announced April 17 and will offer repayable loans to companies, instead of a direct bailout, to help reduce their methane emissions, as a hopeful sign. He said that will help nudge the industry into looking at "ways to build a more diverse energy sector, rather than one that's purely based on fossil fuels.

Though much of the government's legislative agenda is in limbo, with regular sittings suspended until at least May 25, the 2020 budget delayed, and all eves on its COVID response, Mr. Dale and Ms. Abreu said they're hopeful the government will still be able to introduce a legislative framework for meeting its pledge to reach net-zero emissions by

"If the urgency of COVID-19 recedes over the next couple months, then I would expect that the government would then be picking up the ball on certain measures that we really want to see in place," Mr. Dale said, adding that includes offering "five-year interim targets" that would show the country how it will get to net zero. For example, it could show how many homes and government buildings would be targeted for retrofitting.

"That legislation is about stability. Ultimately, it's about charting a course for Canada ... we are kind of at the mercy of the volatile oil markets, because there's no plan," she said.

Mr. Gage said there are also signs that officials are trying to avoid fighting battles on two fronts, particularly in British Columbia, where most open burning across the province was banned on April 16. A B.C. Wildfire Servicebulletin says such "burning prohibitions will reduce demands on firefighting resources" during the pandemic, when "larger open burns pose an unnecessary risk and could detract from wildfire detection and response capabilities.'

"Governments are just beginning to grapple with what happens if we have floods during the COVID-19 pandemic," said Mr. Gage. "That's not an environmental regulation per se, but it's an area where we're trying desperately to prevent burning, partly because of the impact poor air quality would have, if we had a year like we had in 2017 and

The 2017 wildfire season in B.C. burned 12,161 square kilometres, costing the province more than \$564-million, and marked the first time in 14 years that a state of emergency was declared because of wildfires. It was eclipsed by 2018, when 12,984 square kilometres went up in flames, setting the provinceback by \$615-million.

"That would be devastating alongside a COVID-19 pandemic," said Mr. Gage.

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Feature Hill Life & People



the Victoria Building on Wellington Street, whose fate is up in the air as Public Services Canada looks to redevelop the entire city block it is situated in. *The* Hill Times photograph by Cynthia Münster

Senators Percy Downe,

Diane Griffin,

and Donna

pictured on

March 11, 2020, are

tenants of

Dasko,

'Every building meets its time': Senators occupying Victoria Building mull future revamp of precinct

It's unclear at this stage if Wellington Street's Victoria Building, where a large number of Senators have offices, will be facing the wrecking ball or be significantly redeveloped, with its facade intact. But one thing's clear: this city block 'has the most strategic spot in the land.'

BY DAVID LOCHEAD & BEATRICE PAEZ

It's one of the most famous city blocks in the country. With the fate of the stretch of historic buildings along Wellington Street in limbo as federal officials deliberate its future use, some Senators say every effort should be made to preserve the former site of the U.S. embassy "at all costs," but harbour no strong

attachments to the rest of the surrounding precinct targeted for redevelopment.

Once known as a hub of finance, politics, and shopping, Block 2, the unsentimental name given to the collection of 11 buildings directly across from Parliament's Centre Block, could be in for a massive overhaul. **Public Services and Procurement** Canada issued a tender in late January, inviting architects from around the world to propose a redesign for the redevelopment of the entire block, which encompasses Wellington and Sparks streets, with Metcalfe Street on the west and O'Connor Street on the east.

In its heyday, during the 19th and 20th centuries, the block, whose buildings boast Beaux-Arts, Second Empire, and Art Deco styles, was once known as Bankers Row, before banks moved towards conglomeration. Prominent bankers and politicians collided on the streets, mixing the financial and the political, and establishing the "threshold between Town and Crown," as the PSPC tender put it.

Former Ouebec Senator Serge Joyal, a vocal proponent of preserving and protecting heritage buildings, said the block "has the most strategic spot in the land." The recently retired Senator, who stepped down in February and spoke with The Hill Times before the pandemic, took issue with the consultation process, saying the vast majority of citizens have been sidelined in the debate over a national site that all Canadians hold claim to. (The Hill Times spoke with several Senators before the pandemic suspended parliamentary business.)

Mr. Joyal said consultation should be broadened to the wider public and include heritage organizations. "This is a national site; it belongs to all Canadians," he said.

According to PSPC, the goal of the design competition is to choose a proposal that provides a cohesive, integrated, and efficient complex of buildings, which will accommodate the Senate, House of Commons staff, branch space for the Library of Parliament, and the Sparks Street shopping area.

The tender stated that many of the 11 buildings situated on the 9,800-square-metre block have either hit or are close to reaching "the end of their life cycle."

A spokesperson for PSPC said on April 17 the "next step will be to issue a request for qualification (RFQ) this spring." The design competition is expected to run for a year, starting this summer. Well-known architectural firms, including from Canada and the U.S., such as B+H Architects and Pei Architects, have staked their interests.

The proposed redevelopment to Block 2 is part of a larger effort underway to rehabilitate and revitalize the parliamentary precinct. Centre Block's lights dimmed last December for what's expected to be at least a decade as it undergoes work. In anticipation of that massive undertaking, West Block and the former train station went through roughly a billion-dollars' worth of renovations.

It's unclear at this stage whether Wellington Street's Victoria Building, where a large fraction of the Red Chamber's occupants hold offices, will be

Continued on page 35

Union Bank Building

The other classified heritage building along Wellington Street is the Union Bank Building, located on 128 Wellington. Built in 1888, it is the oldest remaining building of the Bankers Row era and is currently vacant. The three-storey building, with its round-headed arches, turreted roofline, and yellow New Brunswick sandstone, has a Romanesque Revival facade. It was designated of historic value because it evokes the street's character as a "central business district," according to Parks Canada.



The empty Union Bank Building at 128 Wellington St. boasts a Romaneseque Revival facade. *The Hill Times photograph by Andrew Meade*

Bank of Nova Scotia building

Formerly the Bank of Nova Scotia building, this heritage building was built in 1924 and is currently occupied by the Library of Parliament in the interim while Centre Block is renovated. Its simple structure and decorative carvings encapsulate the Beaux Arts style, though mixed with large pillars that evoke the ancient Greek buildings.

"The carvings in between represent agriculture and the other aspects of the Canadian economy that the bank would help to finance," Mr. Jeanes said, pointing to the decorative carvings of bison heads carved in the structure of the bank.



The Bank of Nova Scotia building on 125 Sparks St., currently houses a branch of the Library of Parliament, whose main location is closed while Centre Block undergoes a decade-long rehabilitation. *The Hill Times photograph by Andrew Meade*

The Canadian Imperial Bank of Commerce building

Located beside the former Bank of Nova Scotia building, the former CIBC building, constructed in 1922, was initially built with an interest in financing the timber and lumber trade, two of the most prominent resources in the region.



The former CIBC building at the time had an interest in financing the timber and lumber industry. The Hill Times photograph by Andrew Meade

Hill Life & People Feature

Continued from page 34

facing the wrecking ball or be significantly redeveloped, with its facade intact

That building hasn't been named a classified building, the highest heritage designation, which means if it had to be completely gutted or torn down, such moves may not invite fierce opposition at the level seen when the City of Ottawa unveiled the design for the Château Laurier redesign.

"It's very premature to talk about what will happen to Wellington Street," said non-affiliated Senator Dennis Dawson (Lauzon, Que.), who has an office in the Victoria Building, adding that plans to redevelop the precinct have been in discussion on and off for the past 40 years. "We're not going to be evicted [any time soon].

Built in 1928, the 10-storey building made of limestone and brick was among the first high rises built in Ottawa at a time when skyscrapers started to populate cities around the world. It was tall enough that Parliament decided to take a more active role in local planning through height restrictions. Among the most notable tenants in the past was the CBC, which had their headquarters there from 1938 to 1964. Now, the building is home to the offices of Senators and staff.

Unlike some of the Victoria Building's other tenants, Independent Senator Jim Munson (Ottawa/Rideau Canal, Ont.) has many fond memories of the site, dating as far back to his days as a journalist. Reflecting on the trajectory of his career, Sen. Munson said he was covering city hall politics from the fourth-floor newsroom of a radio station called CFGO in 1972alongside journalist-turned-Senator Mike Duffy, who worked for another outlet-and decades later, he now has an office on the seventh floor.

"Personally, I think my life has come full circle in Ottawa, a full political circle," he said. "When I worked for CFGO, I got to cover some Hill stories, and I was able to because [of the] proximity to Parliament.'

At the same time, Sen. Munson said, "every building meets its



in front of the Victoria Building in Ottawa, March 11, 2020, says if the building is deemed not to be of great historic value, she sees no problem with starting fresh. The Hill Times photograph by Cynthia Münster



Non-affiliated Ontario Senator Jim Munson says his journalism and political careers have unfolded in the halls of Victoria Building, previously home to the CBC and other news outlets, noting his 'life has come full circle in Ottawa. The Hill Times photograph by Andrew Meade

time, as we've seen with Centre

"By the time we get around to this, [implementing the project] it will be almost 100 years," he added.

Sen. Munson, who was deputy chair of the Senate's Internal Economy Committee's subcommittee for oversight of the precinct's renovation, said one of his main recommendations around the project is that there should be expansive consultations.

Senator Percy Downe (Charlottetown), who sits as part of the newly formed Canadian Senators Group (CSG), said cost considerations should figure heavily in deciding the fate of the Victoria Building. "The Victoria Building is more of an office building; it's of a different category. It's a very nice building ... but is it cheaper to do a patch job?"he said."It doesn't have to be restored to the

same degree [as other precinct buildings of higher significance]. It's not at the same level as the former train station, nor does it have to be."

Sen. Downe said the building's bones appear to be in "reasonably good shape," noting that the three elevators function regularly.

Senator Diane Griffin (Prince Edward Island), for her part, echoed her fellow CSG colleague in saying the building serves its utilitarian purposes, but has no deep attachment to it.

'If this building can't be reused as an office building, I would see no problem with tearing it down and building fresh," she said. "The history of the building isn't as spectacular as some of the other buildings here, like the Sir John A. Macdonald Building.'

That's not to say she doesn't enjoy the view from her office, which faces the former Bank of

Montreal Building, in all of its Beaux-Arts glory. "What I really like about this particular suite is it has maximum comfort and work space for the staff who came with me when I got the office," she said. "We like the current setup and where we are, but we're not particularly wedded to this."

Several Senators who spoke to The Hill Times pointed to the fact that Ottawa has had a good track record so far in overseeing the rehabilitation of heritage buildings such as West Block and the former train station, now the Senate of Canada Building-insofar as the architectural firms chosen to restore the facilities were able to preserve the integrity of the structures

'If it's considered to be not at all valuable, I don't mind if it's torn down," said Independent Senator Donna Dasko (Ontario), who also has an office in the Victoria Building. "There are really talented architects in this country who can do a good job. I would be in favour of taking it down, and building something fantastic with the architectural talent we have."

'Just because I'm in the Victoria Building, I'm not worried about being evicted," she added. "If it's only of middling value, don't see any problem with going for something new."

The former U.S. embassy building, which was designated by Prime Minister Justin Trudeau (Papineau, Que.) as a space for Indigenous peoples, is one building that many Senators, from Sen. Griffin to Sen. Downe, said should be spared from a major overhaul. (The building, which has been empty for the past two decades, has yet to open over disputes around how the space might be shared.)

When 100 Wellington St. was finished in 1932, it became the first American embassy in Canada; it was later relocated to Sussex Drive, in a fortress-like building that faces Parliament from a distance. Renowned American architect Cass Gilbert, who designed the U.S. Supreme Court building, was behind the design. When construction began, it was set to be an American legation, as Canada still had the United Kingdom control their foreign policy, but before its completion, the Statute of Westminster passed in

the U.K. in 1931, making Canada a fully independent nation.

According to David Jeanes, a member of the board of Heritage Ottawa, who hosts historical tours of Ottawa, 100 Wellington St., with its rounded-arched windows and sets of either real or false balconies, was designed in a classic Italian palazzo style.

It's also a classic example of the Beaux-Arts style, characterized by a flat roof, arched windows, and symmetrical features. Its close proximity to Parliament gave the U.S. quick access to Canadian politicians and vice-versa.

"[It] should be preserved at all costs," said Sen. Downe, noting that the 100 Wellington St. building is surrounded by empty lots, which will likely be used to build new structures. "It's a significant building and has been there for a number of years.

Kevin McHale does not have control over PSPC's decision, but, as the executive director of the Sparks Street Business Improvement Association, the street he oversees stands to be affected by the project. Mr. McHale said he hoped the redevelopment would create opportunities for businesses to thrive.

The prime activity of Sparks Street as the hub of shopping is unlikely to return, he said, given that in the past, it was the only place to get certain goods. Now, the city's population is more suburban, and shopping malls outside the downtown core offer similar products.

"Whether it's Sparks Street or another street, buildings always come and go with what's in fashion," Mr. McHale said of the transient nature of the stores in buildings.

Kathleen Kurtin, president of the Ontario Association of Architects, said that while the building exteriors don't need to change, there's opportunity to redevelop the interiors to adapt and respond to the demands of climate change. According to her, previous revitalization projects have made historic buildings nearly net zero in emissions.

"I see this as an opportunity rather than a challenge," Ms. Kurtin said.

–With files from Palak Mangat dlochead@hilltimes.com bpaez@hilltimes.com The Hill Times

Bate Building

Built in 1859 and restructured in 1904, the Bate Building, located on the north side of Sparks Street, is the oldest building on Sparks Street. With its six storeys, the building was once one of the tallest buildings in the area. Its namesake is Henry Bate, a businessman who owned a grocery store and department store. What distinguishes this building from others are the decorative details on the second storey, where the arches switch between triangular and half-circle.

That's a pattern which is very common in Renaissance Italy and other parts of Europe," said Mr. Jeanes "But there aren't any other buildings in Ottawa that have that particular window pattern."



The Bate Building was once one of the tallest buildings in Ottawa. The Hill Times photograph by Andrew Meade

Birks Building

With its five storeys and long windows, the Birks Building, which is named after Montreal jeweller Henry Birks who opened the eponymous store, was supposed to give a vertical impression. It was among the luxury stores that once drew Ottawa's elite to Sparks Street



The Birks Building once housed Henry Birks' jewelry store. The Hill Times photograph by Andrew Meade

Four Corners Building

Montreal entrepreneur Hugh Allen once owned this four-storey building that's situated at the intersection of Sparks and Metcalfe streets. The 1871 building previously housed his bank, the Merchants Bank, and is distinguished by the stone carvings of heads as keystones. Mr. Jeanes said the identity of those heads remain a



The Four Corners Building was once owned by Montreal entrepreneur Hugh Allen. It is situated at the corner of Sparks and Metcalfe streets. The Hill Times photograph by Andrew Meade

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This briefing will explore whether better encryption the answer to privacy and security issues. It will also look at what the government can to do curtail the use of intrusive data-collection strategies by app developers.

Be a part of this relevant and important briefing.

SNORING IS FUNNY ... BUT NOT REALLY **SNORING** MEANS YOU ARE HEALING LESS AT NIGHT SNORING MEANS YOUR BRAIN AND HEART ARE HURTING AND NOT GETTING GOOD OXYGEN TO HEAL AND FUNCTION

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In the neighbourhood Feature

Ottawa, a city in lockdown

The Hill Times photographs by Andrew Meade



Looking north up Elgin Street with the Peace Tower in the distance and the East Block under renovations in Ottawa, pictured on Wednesday, April 22, 2020.



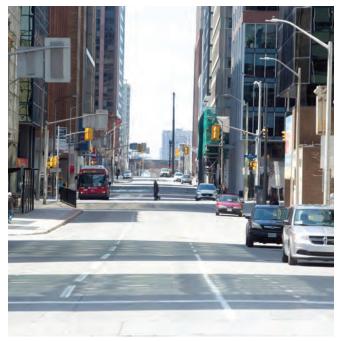
The sign outside one of Ottawa's oldest watering holes, the Chateau Lafayette in the ByWard Market, established in 1849, says 'It's going to be OK. We'll be back.'



A man sits in the sun and up against the National Arts Centre, pictured April 22, 2020.



Another man, pictured outside Ottawa City Hall on April 22, 2020, holds a sign that says 'End the lockdown.'



Looking west down a nearly empty Slater Street in Ottawa, pictured on April 22, 2020.



Ottawa's normally bustling ByWard Market is empty, pictured April 22, 2020.



A man, pictured April 22, 2020, cycling up Elgin Street past one of the most beautiful buildings in the city, the iconic Central Chambers Building.



HILL CLIMBERS

by Laura Ryckewaert

Crown-Indigenous Minister Bennett bolsters team



Crown-Indigenous Relations Minister Carolyn Bennett, pictured Dec. 4, 2019, addressing the Assembly of First Nations' Special Chiefs Assembly in Ottawa. The Hill Times photograph by Andrew Meade

A N APARTMENT NEAR PARLIAMENT HILL—A few staffers have joined the office of Crown-Indigenous Relations Minister Carolyn Bennett since Hill Climbers last checked in at the beginning of February, including Emily Williams as press secretary to the minister.

A former Queen's Park staffer, Ms. Williams spent the last year and half, roughly, before joining Ms. Bennett's team working for public relations firm Hill + Knowlton Strategies, ending as a senior consultant. Before then, Ms.

Before then, Ms. Williams was working for then-Ontario Liberal labour minister **Kevin Flynn**, starting at the end of 2016 as a special assistant for operations and stakeholder relations and ending as manager of issues and legislative affairs. She'd previously interned in Mr. Flynn's office the then MPP for



Emily Williams is Ms. Bennett's press secretary. Photograph courtesy of LinkedIn

office, the then-MPP for Oakville, Ont., over the summer of 2012. Ms. Williams is also a former research associate with Ward Health and has a bachelor's degree in life sciences from Oueen's University. In Ms. Bennett's office, she's now working under the minister's director of communications, **Gillian Hanson**.

A slate of regional affairs advisers have also since joined Ms. Bennett's office, including **Josh Wagamese** as northern regional adviser. Mr. Wagamese, who is the son of Ojibwe author and journalist **Richard Wagamese**, previously interned in Ms. Bennett's ministerial office over the summer of 2018.

Kaitlyn Forbes has been hired as a policy and Ontario regional affairs adviser to Ms.

Bennett. She's a former constituency assistant to Toronto Liberal MP **Julie Dzerowicz** and to Ms. Bennett as the MP for Toronto-St. Paul's, Ont.

Harrison Paul
has been brought on
board to cover Atlantic
regional affairs for Ms.
Bennett and is also
serving as assistant to
the minister's parliamentary secretary,
Liberal MP Gary
Anandasangaree.



Harrison Paul is in charge of the Atlantic desk in Ms. Bennett's office. Photograph courtesy of LinkedIn

Mr. Paul was previously working as a retail sales associate for the Halifax Wanderers Football Club, and over the same time was volunteering as a co-chair and Indigenous representative on the Halifax Regional Municipality's youth advisory committee, and as chair of the Nova Scotia Young Liberals' election readiness committee and member of its policy committee in the lead up to the last election.

After graduating from Acadia University with bachelor's degree in political science, and a minor in French, he spent the summer of 2018 interning in the ministers' regional office in Halifax. He previously interned with the Nova Scotia Liberal Party and caucus

Rounding out the regional affairs team is **Chloe Van Bussel**, who is now covering the Quebec desk for Ms. Bennett, along with serving as manager of operations, as previously reported.

Bennett Donahue has also recently joined the Crown-Indigenous relations minister's office as a special assistant for operations. He was previously busy as executive assistant to Ms. Bennett in her capacity as an MP.

Meanwhile, there have been three staff departures from Ms. Bennett's office to note.

Senior special assistant for operations Julie Hill recently exited the office after almost three years. Zachary Caldwell, who joined the office as a parliamentary affairs adviser after the 2019 federal election, has also left.

So too has policy adviser Jessica Morrison, who'd been in the office since November 2018. Before then, she was a policy adviser to then-heritage minister Mélanie Joly, and is also a former issues manager and Western regional adviser to then-public safety minister Ralph Goodale.

Ms. Morrison has since joined the office of the federal privacy commissioner, **Daniel Therrien**, as a policy and research analyst.

Sarah Welch is chief of staff to Ms. Bennett. Also currently working in the minister's office are: Shaili Patel, director of policy; Vincent Haraldsen, director of parliamentary affairs; and James Fitz-Morris, senior adviser.

Innovation Minister Bains adds to policy team

Innovation, Science, and Industry Minister Navdeep Bains has some fresh faces in his office, including new policy advisers Lambert Lorrain and Marco Chan.

Mr. Lorrain has spent the last two years as a senior consultant for advisory services and strategy with KPMG in Montreal, and for two years before that, he was an adviser in the office of then-Quebec finance minister Carlos Leitão.

He has a background in law, which he studied at the University of Ottawa, and briefly worked as a lawyer with LCM Avocats. While in university, Mr. Lorrain spent time as a political operation co-ordinator for the federal Liberal Party and in 2014 was a legal intern with the judicial and legal affairs

section of the UN's Office of the Registrar.

For his part, Mr. Chan has spent the last two years as a consultant with global management consulting firm Bain &

Company in Toronto, and before then was a policy adviser with the Privy Council Office's LGBTQ2 Secretariat.

He had previously worked in the PCO in 2016 as an analyst with its then-new results and delivery unit, which was created as part of the then-new Liberal government's deliverology approach to implementing its



Lambert Lorrain is a recent addition to Mr. Bains' policy team. *Photograph* courtesy of LinkedIn

campaign commitments. Mr. Chan went on to do similar work as an adviser in the Quebec government's priorities and strategic projects secretariat under then-premier **Philippe Couillard**.

Mr. Chan is also a former consultant with The World Bank, amongst other past jobs, and is a graduate of Harvard University. He

obtained a bachelor's degree in romance literatures at the school—during which time he was part of the Harvard Glee Club and the school's Queer Students and Allies group, among other extra-curricular activities—and a master of public administration, focused on performance improvement,



Marco Chan is a policy adviser to the innovation minister. Photograph courtesy of LinkedIn

diversity, and inclusion, according to his LinkedIn profile. On top of that, he studied for a master's of business administration at Stanford University.

Timothy Logan has been hired as a special assistant for British Columbia regional affairs, while Sarah Assoum has joined Mr. Bains' office as a special assistant for Quebec regional affairs. Ms. Assoum previously filled a similar role in the federal health minister's office, starting under then-minister Ginette Petitpas Taylor in early 2019. Before then, she was a marketing co-ordinator for Montreal-based lingerie company, Montelle Intimates.

Sean Matthew O'Neill has joined Mr. Bains' team as assistant to one of the min-

ister's two parliamentary secretaries, Liberal MP Ali Ehsassi, who covers the innovation and industry files.

Amanda Woodley, who's been working in Mr. Bains' office since the end of 2018, is now a special assistant for policy and assistant the minister's other parliamentary secretary, Liberal MP Will Amos, who



Theresa McManus is now an operations adviser to Mr. Bains. Photograph courtesy of LinkedIn

covers science. She was previously a special assistant for policy and executive assistant to the chief of staff in Mr. Bains' office and is also a former assistant to Mr. Amos, the Liberal MP for Pontiac, Que.

Though not yet noted by Hill Climbers, Theresa McManus also remains in Mr. Bains' office, now as an operations adviser. She's been on the minister's team since 2016, when she was hired as executive assistant to the director of policy, and was last executive assistant to Mr. Bains.

Ryan Dunn is chief of staff to Mr. Bains. Other current members of the minister's team, as previously reported, include: Sarah Hussaini, director of policy; Parvinder Sachdeva, deputy director of policy; Celine Caira, policy adviser; Vanessa Hage-Moussa, director of communications; Véronique Simard, senior adviser for communications and media relations; communications advisers Mollie Anderson and Shauna Roddey; Michael Power, director of parliamentary affairs; parliamentary affairs and issues management advisers Alexander Jagric and Sam Eberlee; and Tasha Ismail, director of operations.

 $lryckewa \^{e}rt @hill times.com$



Events **Feature**

House suspended until Monday, May 25



MONDAY, APRIL 27

House Not Sitting—The House has been suspended until Monday, May 25, and the spring schedule is still not confirmed due to the global pandemic. However, during this adjournment time, a Special COVID-19 Pandemic Committee has been established, composed of all members of the House, to meet beginning Tuesday, April 28, on Tuesdays, Wednesdays, and as of May 7, on Thursdays as well. The Wednesday meeting will be in person, while the Tuesday and Thursday sessions will be held virtually. As per the original sitting calendar, if the House resumes on May 25, it will sit for four weeks, until its scheduled adjournment on June 23, but none of this has been confirmed yet. The House was also scheduled to adjourn again for three months and to return in the fall on Monday, Sept. 21, for three straight weeks. It was scheduled to adjourn for one week and to sit again from Oct. 19 until Nov. 6. It was scheduled to break again for one week and to sit again from Nov. 16 to Dec. 11. And that would be it for 2020. We'll update you once the House calendar has been confirmed.

Senate Not Sitting—The Senate has extended its suspension due to the COVID-19 virus until June 2. The June possible sitting days were June 1, 5, 8, 12, 15, and 19. The Senate was scheduled to sit June 2-4; June 9-11; June 16-18; and June 22, 23, it was scheduled to break on June 24 for St. Jean Baptiste Day; and it was scheduled to sit June 25 and June 26. The Senate was scheduled to break from June 29 until Sept. 22. The Senate's possible September sitting days are Sept. 21, 25, 28. It's scheduled to sit Sept. 22-24 and Sept. 29-Oct. 1, with a possible sitting day on Friday, Oct. 2. The possible Senate sitting days are Oct. 5, 9, 19, 23, 26, and 30. It's scheduled to sit Oct. 6-8; it takes a break from Oct. 12-16; it will sit Oct. 20-22; and Oct. 27-29. The November possible Senate days are: Nov. 2, 6, 16, 20, 23, 27, 30, It's scheduled to sit Nov. 3-5; it will take a break from Nov. 9-13; it will sit Nov. 17-19; and Nov. 24-26. The possible December Senate sitting days are: Dec. 4, 7, and 11. The Senate is scheduled to sit Dec. 1-3; Dec. 8-10 and it will sit Dec. 14-18. We'll also update you once the Senate calendar has been confirmed.

MONDAY, MAY 4

International Day of Pink—In celebration of the 50 h anniversary of the Stonewall Riots/Pride; and the 30 anniversary of the International Day Against Homophobia, Transphobia, and Biphobia, we are proud to invite you to Stonewall 50 across Canada, in Vancouver, Calgary, Winnipeg, Ottawa, Toronto, Montreal, Halifax, and Cape Breton, from May 4-21, featuring Stonewall

riot activist Martin Boyce. Stonewall 50 across Canada is a free speakers' series in cities across the country featuring Stonewall Riot activist Martin Boyce. Boyce is among a handful of surviving Stonewall activists whose contributions have had a significant impact on our communities. Join us as he shares his stories of uprising and rebellion, what motivated him that night.

WEDNESDAY, JULY 8

Canada's Foremost Fintech Conference FFCON20-Featuring high-growth start-ups and leading industry experts across fintech sectors including digital banking, P2P finance, Al. capital markets, Wealthtech, payments, crypto, and blockchain. July 8-9. Speakers include: Robert Asselin, senior director public policy, BlackBerry; Paul Schulte, founder and editor, Schulte Research; Craig Asano, founder and CEO, NCFA; George Bordianu, co-founder and CEO, Balance; Julien Brazeau, partner, Deloitte; Alixe Cormick, president, Venture Law Corporation; Nikola Danaylov, founder, keynote speaker, author futurist, Singularity Media; Pam Draper, president and CEO, Bitvo: Justin Hartzman, co-founder and CEO, CoinSmart; Peter-Paul Van Hoeken, founder & CEO, FrontFundr; Cynthia Huang, CEO and co-founder, Altcoin Fantasy; Austin Hubbel, CEO and co-founder, Consilium Crypto; Patrick Mandic, CEO, Mavennet; Mark Morissette, co-founder & CEO, Foxquilt; Cato Pastoll, co-founder & CEO, Lending Loop; Bernd Petak, investment partner, Northmark Ventures; Ali Pourdad, Pourdad Capital Partners, Family Office; Richard Prior, global head of policy and research, FDATA; Richard Remillard, president, Remillard Consulting Group; Jennifer Reynolds, president & CEO, Toronto Finance International; Jason Saltzman, partner, Gowling WLG Canada; James Wallace, co-chair and co-CEO, Exponential; Alan Wunsche, CEO & chief token officer, Tokenfunder; and Danish Yusuf, founder and CEO, Zensurance. For more information, please visit: https://fintechandfunding.com/

THURSDAY, OCT. 15

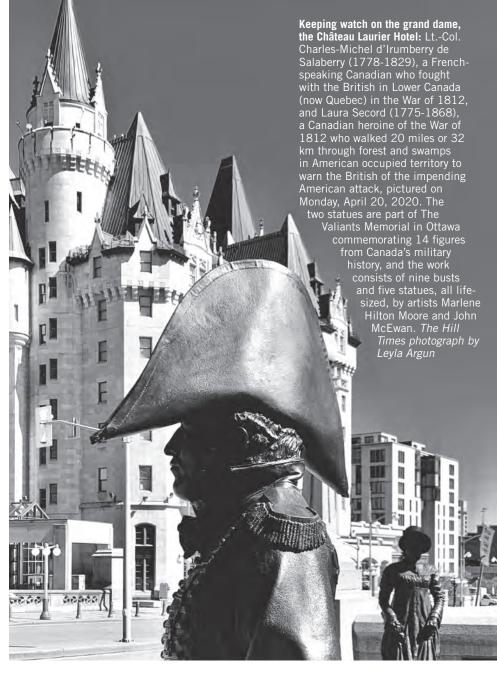
repressimonial Dinner and Awards—Join us at the 33 annual event to network and celebrate as the Public Policy Forum honours Canadians who have made their mark on policy and leadership. Anne McLellan and Senator Peter Harder will take their place among a cohort of other stellar Canadians who we've honoured over the last 33 years, people who have dedicated themselves to making Canada a better place through policy leadership and public service. The gala event will be held on Thursday, Oct. 15, at the Metro Toronto Convention Centre, 255 Front St. W., Toronto.

SATURDAY, OCT. 24

Parliamentary Press Gallery Dinner—The Parliamentary Press Gallery Dinner happens on Saturday, Oct. 24, in the Sir John A. Macdonald Building on Wellington Street in Ottawa.

FRIDAY, OCT. 30

CJF Awards Celebrating 30 Years of Excellence in Journalism—The Canadian Journalism Foundation Awards will be held on Oct. 30, 2020, at the Ritz-Carlton, Toronto, hosted by Rick Mercer, former host of *The Rick Mercer Report*. The CBC's Anna Maria Tremonti will be honoured. Tables are \$7,500 and tickets are \$750. For more information on tables and sponsorship opportunities, contact Josh Gurfinkel at jgurfinkel@cjf-fjc.ca or 416-955-0394.



THURSDAY, NOV. 12

CJF Awards Celebrating 30 Years of Excellence in Journalism—Liberal Party National Convention—The Liberal Party of Canada announced the 2020 Liberal National Convention will be hosted in Ottawa, from Nov. 12-15. For more information, please contact: media@liberal. ca, 613-627-2384.

Conservative Party National Convention—The Conservatives will hold a convention in Quebec City from Nov. 12-14. For more information, please contact 1-866-808-8407.

The Parliamentary Calendar is a free events listing. Send in your political, cultural, diplomatic, or governmental event in a paragraph with all the relevant details under the subject line 'Parliamentary Calendar' to news@hilltimes. com by Wednesday at noon before the Monday paper or by Friday at noon for the Wednesday paper. We can't guarantee inclusion of every event, but we will definitely do our best. Events can be updated daily online, too.



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