

**NEW VETERANS PROGRAMS FOR INJURED
CANADIAN FORCES PERSONNEL**

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INTRODUCTION

On 4 May 2004, the Minister of Veterans Affairs and the Minister of National Defence announced plans for the most fundamental reform of Canada's veterans programs since the Veterans Charter of the World War II period. The Charter outlined the Canadian government's commitment to provide care and benefits to military personnel returning from overseas, especially those injured during wartime service. The disability pensions and the long-term care provided today to the elderly war service veterans who served in the two World Wars and the Korean War are the legacy of this commitment. However, much has changed since 1945 and the benefits, care, and rehabilitation programs designed for those war service veterans do not always meet the needs of modern-day military personnel. The aim of the proposed reforms is to modernize veterans programs while maintaining the care and benefits provided to Canada's war service veterans.

IMPETUS FOR REFORM

The modernization of veterans programs is part of the process undertaken over the last decade to improve the various elements that contribute to the quality of life of members of the Canadian Forces and their families. In the mid-1990s, the uncertainties of the post-Cold War era, wage freezes, and an increasing number of deployments to complex and dangerous peacekeeping operations fuelled growing dissatisfaction among members of the military and their families. Further concerns were raised by the fact that military personnel injured during peacekeeping and other operations often experienced difficulties when they applied to obtain care and benefits. As a result, the Department of National Defence undertook a major reform of key elements such as pay, pensions, housing issues on and off military bases, and family support

programs. Together with the Department of Veterans Affairs, the department also reviewed the various programs available to help personnel injured during service. The reform process was assisted by a major study undertaken in 1997 and 1998 by the Standing Committee on National Defence and Veterans Affairs of the House of Commons, which visited military bases across Canada to learn first-hand the views of military personnel and their families. The Committee's 1998 Quality of Life report made a number of recommendations that provided a framework for the reform process.⁽¹⁾ Measures have been implemented by the two departments since 1998 to address many of the issues raised by various studies, including the Committee's report.

Some of the reforms are mainly the responsibility of the Department of National Defence, such as those dealing with retirement benefits provided for years of service in accordance with the *Canadian Forces Superannuation Act* and other legislation. With regard to reforms concerning the benefits provided to injured personnel, the Department of Veterans Affairs also plays a major role. Recent reforms include the amendments made to pension legislation in June 2003 when Parliament passed Bill C-31, *An Act to Amend the Pension Act and the Royal Canadian Mounted Police Superannuation Act*.⁽²⁾ As a result, members of the military (and the RCMP) now have pension coverage in the event of disability or death during service in an operation or area designated a "special duty operation" or a "special duty area" because a situation of elevated risk is deemed to exist.⁽³⁾ In the past, the area where a peacekeeping operation took place was often designated a special duty area for pension purposes. However, military personnel seriously injured while participating in other operations, including deployments within Canada to help fight a major forest fire, did not have full access to disability benefits. Now, an operation in Canada or elsewhere can be designated a special duty operation for pension purposes, thereby ensuring eligibility for full disability benefits in case of injury.

(1) Canada, House of Commons, Standing Committee on National Defence and Veterans Affairs, *Moving Forward: A Strategic Plan for Quality of Life Improvements in the Canadian Forces*, October 1998. See <http://www.parl.gc.ca/InfoComDoc/36/1/NDVA/Studies/Reports/ndvarp03-e.htm>. See also http://www.forces.gc.ca/hr/scondva/engraph/final_2002_e.asp?cat=1.

(2) See http://www.parl.gc.ca/37/2/parlbus/chambus/house/bills/government/C-31/C-31_4/C-31_cover-E.html.

(3) Since 2002, Veterans Affairs has taken a greater role in the management of disability pension payments for serving and retired members of the RCMP, whose members often serve in multinational peacekeeping operations.

THE CHANGING FOCUS OF THE DEPARTMENT OF VETERANS AFFAIRS

Despite recent reforms concerning disability pensions, the main focus of the Department of Veterans Affairs is still on the needs of the now elderly veterans who served Canada during the two World Wars and the Korean War. The department gives these veterans disability pensions for injuries suffered during wartime service. It also provides them with long-term health care services either in veterans' facilities across the country, where care is provided under contract arrangements between the department and provincial health authorities, or at the only veterans facility administered by the department, Saint-Anne's Hospital on Montréal Island. However, the number of war service veterans declines with every passing year, while the department is dealing with an increasing number of clients who are current or recent members of the Canadian Forces. The number of Canadian Forces clients increased from 23,600 in 2001 to 37,300 in February 2004.⁽⁴⁾

Some of these modern-day veterans suffered such serious injuries during peacekeeping or other military operations that they had to leave the Forces many years earlier than they expected. In cooperation with the Department of National Defence, the Department of Veterans Affairs has taken measures to make it easier for injured military personnel to apply for disability pensions and obtain information on support. For example, in 1999 the two departments created "The Centre," a central contact point through which injured military personnel and their families can obtain information and guidance.

Other measures include the extension of benefits originally designed primarily for elderly war service veterans, such as the Veterans Independence Program (VIP). The VIP benefits help elderly veterans and their spouses stay in their homes by, for example, covering expenses for snow removal and the construction of ramps to facilitate entry for persons in wheelchairs. The program attracted considerable public attention during 2003 when the department announced the extension from one year to a lifetime of certain VIP benefits paid to the spouses (or qualified survivors or primary caregivers) of veterans receiving such benefits at the time of their death. Previous extensions, however, had taken into account also the needs of modern-day veterans. In 1991, VIP benefits were made available to former members of the

(4) Department of Veterans Affairs, Speaking Notes for the Honourable John McCallum, P.C., M.P., Minister of Veterans Affairs, to the 40th Biennial Convention of the Royal Canadian Legion, 14 June 2004.

Canadian Forces who had served in special duty areas. An amendment to the *Veterans Health Care Regulations* in September 2001 also made it possible for any former member of the Regular Force with a service-related disability pension to receive some VIP benefits to cover the costs of, for example, modifying his or her home with ramps for wheelchair access.

NEED FOR REDESIGNED VETERANS PROGRAMS

Despite the numerous changes made in recent years, the fact remains that most of the veterans programs as they exist today were primarily designed for the war service veterans. For example, in the 1940s, it was determined that eligibility for disability pensions would be based mainly on service outside of Canada in World War II theatres of operation. Extensive disability coverage was provided on the basis of the insurance principle for any injury suffered during service in the theatres of operation. Since the end of the Korean War, eligibility for disability pensions has been determined in an analogous fashion. Military personnel have extensive coverage under the insurance principle if they are injured during a peacekeeping or other military operation outside Canada in a designated special duty area. As mentioned previously, the 2003 legislative amendments made by Bill C-31 provide members of the Forces with the same extensive coverage if they are injured during a special duty operation, whether in Canada or overseas.⁽⁵⁾ However, military personnel injured while training or during any service that is not in a special duty area or part of a special duty operation are covered under the weaker provisions of the compensation principle, where a clear link must be established between the injury and military service.⁽⁶⁾

Another problem is the extent to which access to other benefits and support programs revolves around disability benefits. In a March 2000 report on the third phase of a review of veterans' care needs, officials of the Department of Veterans Affairs noted that since individuals must be receiving a disability pension in order to obtain some other Veterans Affairs

(5) Another important legislative change was made in 2000 when *An Act to Amend the Statute Law in Relations to Veterans' Benefits* (Bill C-41), among other things, amended the *Pension Act* so that Canadian Forces members can collect a disability pension for service-related disabilities while still in the military.

(6) Veterans Affairs Canada – Canadian Forces Advisory Council, *The Origins and Evolution of Veterans Benefits in Canada, 1914-2004*, Reference Paper, Department of Veterans Affairs, March 2004, Chapter II, Part D, Section 2.
See <http://www.vac-acc.gc.ca/clients/sub.cfm?source=councils/vaccfac/reference>.

benefits and services, they had to wait until their pension application had been approved to obtain the help they needed. Indeed, the report concluded that the department, in terms of programs and benefits, “looks after wartime veterans better than it does today’s members of the Canadian Forces.”⁽⁷⁾ Such a situation exists at a time when many members of the Canadian Forces have served in numerous peacekeeping and other operations over the last decade and have suffered injuries. These individuals, some still in the military while others have recently left, are dealing with injuries ranging from the loss of a limb to stress-related problems such as Post-traumatic Stress Disorder (PTSD). Other members of the military have suffered injuries that are the result of the cumulative effects of years of training and operations in often physically demanding conditions. Rehabilitation programs were an important element of the Veterans Charter to help military personnel returning from overseas make the transition back to civilian life, but the needs of modern-day veterans are not necessarily well served by existing programs. Today, after 15 or 20 years of military service, some personnel are dealing with a number of health problems after leaving the Forces and find it difficult to make the transition to civilian life because they lack appropriate access to transitional services.

RECOMMENDATIONS OF ADVISORY COUNCIL

In July 2000, the Veterans Affairs Canada – Canadian Forces Advisory Council was established to advise the Department of Veterans Affairs on how to address the challenges facing modern-day veterans and Canadian Forces personnel and their families. The Advisory Council was composed of representatives from veterans groups, including the Royal Canadian Legion, academics and medical researchers, as well as departmental officials. In March 2004, the Advisory Council produced a report entitled *Honouring Canada’s Commitment: “Opportunity With Security” for Canadian Forces Veterans and Their Families in the 21st Century*.⁽⁸⁾ It outlined principles and processes for reform and called for, among other

(7) Department of Veterans Affairs, Review of Veterans’ Care Needs, Phase III: Needs of Canadian Forces Clients; quoted in Veterans Affairs Canada – Canadian Forces Advisory Council (2004), Chapter II, Part C.

(8) Veterans Affairs Canada – Canadian Forces Advisory Council, *Honouring Canada’s Commitment: “Opportunity With Security” for Canadian Forces Veterans and Their Families in the 21st Century*, Discussion Paper, Department of Veterans Affairs, March 2004.
See <http://www.vac-acc.gc.ca/clients/sub.cfm?source=councils/vaccfac/discussionpaper>.

things, benefits and services for Reserve personnel comparable to those for members of the Regular Force. The report stated that the modernization of the program for veterans should be the result of extensive consultations with military personnel, their families, and veterans. It also insisted that the changes must not lead to any reduction in the quality of care and benefits given to war service veterans. The Advisory Council identified six issues that should be given priority:

1. “a complete and thorough overhaul of the way that Canadian Forces members and veterans are compensated for injury”;
2. development of a robust program of transition services and benefits;
3. enhancement of the support provided to the spouses and children of military personnel;
4. a “more comprehensive” mental health strategy to help personnel dealing with PTSD and other stress-related injuries;
5. enhanced priority for employment in the Public Service for disabled modern-day veterans;
and
6. equitable access to burial and funeral benefits.

DEPARTMENTAL COMMITMENT

The Advisory Council’s report was presented to the Minister of Veterans Affairs, who responded on 17 March 2004 by stating that he had authorized departmental officials to begin more consultations. This paved the way for an announcement by the Department of Veterans Affairs on 4 May 2004 that unveiled plans to develop a new approach to services for modern-day veterans.⁽⁹⁾ The departmental news release identified the key program components as follows:

- disability awards and wellness programs to replace today’s pension system for new applicants;
- physical and psychological rehabilitation services, including vocational training and education;

(9) Department of Veterans Affairs, “Minister McCallum Announces A Vision For A Modern-Day Veterans’ Charter,” News Release, 4 May 2004.
See <http://www.vac-acc.gc.ca/general/sub.cfm?source=department/press/viewrelease&id=271>.

- earnings loss support for veterans undergoing rehabilitation, as well as longer-term support for veterans who can no longer work because of a service-related illness or injury;
- job placement assistance; and
- more extensive health benefits to meet the needs of veterans and their families.

A Service and Program Modernization Task Force has been established within the Department of Veterans Affairs to research, develop, and implement changes to the services and benefits available to modern-day veterans. This process includes consultations with veterans groups and with the RCMP. The implementation of the new measures will require amendments to the various Acts and regulations governing the benefits and services provided to modern-day veterans, such as the *Pension Act*. The legislation making these amendments was originally intended to be presented to Parliament before the end of 2004, but it will be delayed until 2005 to allow for more consultations. In keeping with the statements made by the Veterans Affairs Canada – Canadian Forces Advisory Council, the department reaffirmed that the pensions of the war service veterans and the care provided to them “will not be adversely affected.”