

The Rt. Hon. Herb Gray, MP
Deputy Prime Minister of Canada
Parliament Hill
Ottawa

April 23, 1998

Att: Nancy Thornton

Dear Mr. Gray,

Please pass on our thanks to Nancy Thornton. We were all three extremely pleased to meet her today. Ms Thornton listened for a long time, and it is appreciated.

We agree that the important thing now is to focus on what you might be able to do. From our point of view, it has something to do with the magic of politics, of neatly navigating the impossible.

You must know that forwarding life and death concerns can be sobering. Black hats and white hats exist in dime plots in dime movies (and dime news). We tire of locking horns with obstacles. We eventually learn to make our resolutions dependent on things that are available.

Most of all we learn that it is often a fresh approach, one that charts a course of action without specific reference to past situations, based on a vision of consensus rather than defeat, which proves to be the most healing for the entire community. Sartre and Camus are models for this idea of being fully a person, of "drawing an arc in untouched space", of refusing to believe that freedom means multiple choice, of realizing that the greatest freedom (and responsibility) is the ability to create.

My current and other MPs, other people I've met across Canada and elsewhere, including three years living with hundreds of residential school survivors, suggest we each have a

responsibility to grow and create, and to work for the best healing in the overall community. Some people believe that nobody really wins, not even themselves if, in the processes, someone else is caused to lose.

We needed and need to heal Health Canada, not shame it. For instance, the front end of the Canadian Human Rights Commission process has no real mediation power, so amicable resolutions are pushed off the table too early in that process.

A Liberal once pointed out, in the House, that lip service to the persons with environmental sensitivities is illogical, empty, and meaningless, if it is given in a context that buries our history, buries what scientific knowledge does exist, buries the existence of mainstream methods of assessment that can be used to assess and protect people, buries the truth about ongoing child abuse or other family abuse related to sensitivities, buries the fact that mandated authorities have made specific recommendations to specific agencies as to how to protect persons with sensitivities from being caused damages in the health care system, in the community at large, buries the fact of horrific ongoing harm being caused, buries concerns about the consequences, for young women, of presumptions being made in eating disorder clinics, in fact buries people alive.

As Archbishop Tutu once said: "I can forgive you for stealing my land. But first you have to give me back my land." Despite their many pressures, we believe you and your supporters, assistants we have met over the years, like Len Kuchar, Vivien Ellis, Gord Douglas, Glen Okranitz, and now, we suspect, Ms Thornton, are up to "giving back our land".

There was some discussion of a working group. For the moment, this might be a loose cluster of ministerial assistants. The kind of thinking involved in charting a diplomatic course forward would be, in my opinion, more characteristic of political assistants than public servants. I mentioned some public servants at the meeting. My associates suggest against involving them at this stage. Once a creative solution is arrived at, public servants can be tasked with achieving modified goals which they can be monitored in forwarding.

There truly is a need for visible leadership - sometimes externally, sometimes within. But if attitudes are not addressed in a meaningful way, if people in high risk groups are not protected, it may be viewed somewhat sceptically.

There was some discussion of the idea of community, and the need for community to achieve policy or change. Maybe the beginning is to form a small community - perhaps Nancy, Vivian Ellis, perhaps John Dwyer (943-9146) at the CHRC, it would have to somehow relate to the Human Rights Committee and Health Canada. David Rodier may have some understanding. (There are some other good sources at the end of the brief,

attached.)

The principal concerns have to do with civil and human rights, the right to protection from arbitrary interference, freedom from adverse differential treatment, the right to due process, rules of evidence, equal treatment concerning onus and presumption, and, most importantly, an end to the bobbing and weaving which seems only to obscure what's been going on, to enable and trivialize abuse, and to stand in the way of using existing means to identify people in high risk groups and protect them from preventable harm.

At one time, a Health Canada workshop recommended increased involvement of our organization in policy development. I unreservedly recommend our Ottawa Board members as experienced professionals who understand such things as public service management, policy and action development, political and human rights processes, community development, economics, and have, to the last one, a commitment to both integrity and cooperation. I'd suggest they be considered as members of any small community or informal working group shaping a program that might address some of the issues we were well on the way to achieving in 1993. They are committed to constructive problem-solving approaches, to win-win.

Attached is the brief we gave Mr. Rodier. Thanks again very sincerely for Ms. Thornton's time.

Chris Brown, Leslirae Rotor, Debra Sine