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# Standing Committee on Veterans Affairs

EVIDENCE

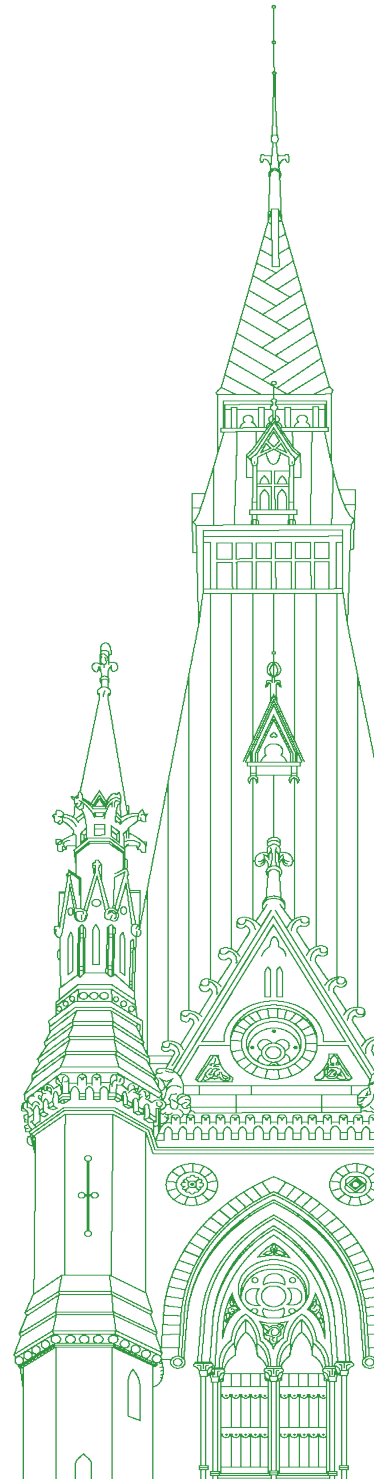
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Thursday, September 26, 2024

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Chair: Mr. Emmanuel Dubourg





## Standing Committee on Veterans Affairs

Thursday, September 26, 2024

• (1105)

[*Translation*]

**The Vice-Chair (Mr. Blake Richards (Banff—Airdrie, CCP)):** Welcome to meeting number 105 of the Standing Committee on Veterans Affairs.

Today, a witness is taking part in the study undertaken by the committee.

[*English*]

We have a two-and-a-half-hour meeting today, which is a little unusual, just to point that out for members in case anyone has forgotten. We will have an hour and a half with our witness, whom I'll introduce in a moment, and then we will be in camera for an hour on committee business.

For the public portion of the meeting, which is what we'll start with, we will hear from our witness who is with us this morning: Ms. Joanne Kimm. She is here to share with us her personal situation and how that might lead to some improvement, hopefully, for others in the future.

Typically, we give five minutes. You are our sole witness today. I think we can probably be fairly lenient on that, so we'll give you the time you need, within reason, of course.

I'll turn the floor over to you and let you give your opening remarks, and then we will go into questions from members in order by party.

Joanne, the floor is yours. Take it away.

**Mrs. Joanne Kimm (As an Individual):** Mr. Chair and honourable members, my name is Joanne Kimm. I'm the wife of John Kimm. Thank you for inviting me to speak with you today.

My husband served in the Canadian Armed Forces' navy from 1989 to 2011. His overall service to Canada was 22.5 years, with over 11 years of that service being away from his family.

In 2022, my husband was diagnosed with stage 4 metastatic colorectal cancer, a cancer he got from using toxic chemicals while serving our country. My husband was awarded the maximum compensation for pain and suffering, in the amount of \$334,424.65, and currently receives monthly compensation in additional pain and suffering, diminished earnings and income replacement benefits. He chose to receive the lump sum pain and suffering payment due to his diminished life expectancy diagnosis.

In May 2022, my husband couldn't breathe and fell. My son and I struggled to get him up on the bed. After calling 911, I sent my

son and grandson out of the bedroom and sat with my husband. Honourable members, I have seen my husband cry twice in the 36 years that we've been together. Once was when my mother died. The second time was when he lay on the bed anxiously waiting for the ambulance, struggling to breathe. It gutted me when I saw him cry out that he didn't want to die. It crushed me knowing I could do nothing but wait with him for the paramedics to arrive. I had to hold back my fears, tears and emotions so that I could be calm for him. It was later revealed that my husband's oxygen levels were so low from blood clots in his lungs that he could have died.

My husband has received ongoing chemotherapy treatments, CT scans and MRI scans and had numerous oncology appointments. These treatments have not only impacted his physical and mental health but have also impacted our family's mental health. I have had to take time off work twice for mental anguish and exhaustion, and now I will be taking an unpaid compassionate care leave so I can be with him until he passes.

My husband was hospitalized twice this past February for pneumonia, and again in June for adverse reactions to chemotherapy treatments. His oncologist said the chemotherapy treatments were no longer working and that the best we all can do is to keep him comfortable. He does not anticipate my husband living into 2025.

Mr. Chair, while my husband has received excellent service from Veterans Affairs staff, and we have only high praise for them, their hands are tied to the policies they keep. We acknowledge that my husband has received the maximum pain and suffering compensation available; however, we worked out that it was the equivalent of 5.19 years of salary—five years for a disease that is robbing him of his life. I have watched this once strong man shrink before me. I am watching him wither from this disease. He shuffles and must use a walker to walk the 20 steps to the washroom. I almost cry when I see his spine and shoulder blades sticking out further from his skin now, his feet cold from the slowing circulation. I see him bend over when he sits because it takes too much energy to sit up straight. I hear him out of breath just walking the eight steps from his bathroom to our bedroom.

Excuse me for a minute.

As my husband's health continues to decline, he wants to make sure we're okay when he passes. He's a proud man. He was trained to follow orders and to not ask questions. He does not like to ask for help, so I come before you today, from Nova Scotia, to ask this honourable committee for help. I request a review of the pain and suffering compensation to find a way to increase it and to also put in motion a swift decision on steps to offer additional compensation to our family.

Mr. Chair, the pain and suffering compensation was extensively discussed by this committee between the years 2007 and 2010. On October 20, 2009, there was a discussion between Mr. Peter Stoffer and Mr. Brian Ferguson from Veterans Affairs about a comparison with the British lump sum payment.

• (1110)

Mr. Stoffer said:

I also have here information on what the British do for their HM Armed Forces personnel. They've doubled the upfront payment to £570,000 for the most severe injuries or death. That's quadruple what we give. This is one of the things I'd like to see changed. I know we work side-by-side in Afghanistan. The guys are sitting there, thinking: well, if you go, your family gets this; if I go, my family gets that. So maybe it's something to look at in the future.

Mr. Chair, I think that future is now.

Currently, the United Kingdom awards £650,000. This is the equivalent to over \$1 million Canadian. The 2024 maximum lump sum for Canada is \$440,991.96.

Canada is severely lacking in adequate compensation for pain and suffering. In these volatile economic times, it is essential that veterans know that their country truly appreciates their sacrifices for the freedoms we have today.

From fiscal year 2012 to present, Veterans Affairs has sent back hundreds of millions of dollars to Treasury Board. In 2022-23, it was \$271,634,711, which is 4.77% of their budget. In fiscal year 2021-22, it was \$920,995,685. That's almost a billion dollars.

In closing, Mr. Chair, I would like to thank this honourable committee for allowing me to speak today.

I also beseech this committee to forward recommendations to help my family now, before my husband passes. Veterans Affairs indicates that its priority is to help veterans. I'm asking for that help now.

Thank you.

**The Vice-Chair (Mr. Blake Richards):** Thank you, Joanne.

First, I want to say thank you to your husband for his service to our country. Thank you for your service as his spouse and as his family member. Also, thank you for your strength in coming here today to share your family's experience, obviously with the hope that you'll see change. We thank you for that. We thank you for reminding us of the importance of ensuring that we do everything we can to be there for those who have served our country. Thank you very much.

We will now turn to questioning. We do that in order, by party. In the first round, each party will receive six minutes.

Our first person is Fraser Tolmie from the Conservative Party.

**Mr. Fraser Tolmie (Moose Jaw—Lake Centre—Lanigan, CPC):** Thank you, Mrs. Kimm.

I really appreciate and want to echo what my colleague has said with regard to your coming here and sharing your testimony, and with regard to thanking your husband for his service. I believe you said it was from 1989 to 2011, which is 22 years. Obviously, you've shared a great deal of that journey. Quite often, spouses are not recognized for their service, commitment, sacrifice, and obviously advocacy, as you now come before this committee.

There are a couple of things that I wish to cover.

You made a comment with regard to the volatile economic times that we're presently experiencing. You talked about a lump sum. I want to unpack that a little bit, if you don't mind. Do you feel that the compensation you're receiving is covering the costs of inflation in the volatile economic times we're experiencing? Are you being adequately compensated right now?

• (1115)

**Mrs. Joanne Kimm:** If what you're asking is whether we can pay our bills, yes, we can. It's in the anxious moments that we're going through on a daily basis that we realize that once he passes, we may not be able to. Some of the benefits he receives now will go away. I understand there are benefits that I will receive as a spouse.

To answer your question is a bit difficult because as we compare bills now...going forward, I don't know. It all depends on what the bills are.

**Mr. Fraser Tolmie:** You talked about anxious times. When you're going through what you're going through, obviously it's emotionally draining for the whole family, and then you have your concern about what the future looks like.

You also mentioned earlier on in your testimony that you've taken unpaid leave in order to look after your husband. Can you share a little bit more about that? That obviously impacts you financially as well.

**Mrs. Joanne Kimm:** Thank you for that. Just to clarify, the unpaid leave will be in the future. I was able to go on short-term illness for the past two times. The next time is what's called a compassionate care leave. It is unpaid through work, and I have to go through EI to receive money. It will be a lot less than what I would be getting from my current salary. Yes, that will impact us, but it isn't unpaid leave from work.

**Mr. Fraser Tolmie:** We hear, time and time again, testimony about the challenges and the financial difficulties. You're not the first person who has shared that and expressed that, but to hear it from your perspective, obviously, as a spouse, as someone who has to be a caregiver.... Personally, that has happened in our home, where we've had dementia or Alzheimer's and someone has had to give up work to look after someone who has dealt with that challenge.

Do you think the government could be doing a better job helping veterans in their time of need and in the challenges they're facing, like you are, rather than adding to their troubles? Can you share a little more about that?

**Mrs. Joanne Kimm:** My thoughts on that are that many veterans don't know about the help they can ask for. Veterans Affairs is a demand-driven type of service. Had I not advocated already for some of the benefits he has received, we wouldn't have even known about them. To add to what you've asked, when you're walking this road, you don't realize what you may or may not be entitled to.

**Mr. Fraser Tolmie:** Okay, so let's unpack that. I'm sorry to walk you through this, and if it's difficult.... What I'm hearing is that not very many people know what they're entitled to. How do you find that out? That's obviously an interaction with Veterans Affairs. How do you get that information to find out what you're entitled to? How did doors get opened up for you, or were you pushing those doors down? It's obvious that you've been pushing some doors down, or you wouldn't be here.

• (1120)

**Mrs. Joanne Kimm:** That's true.

I've spoken to many staff at Veterans Affairs, who have been fantastic. I also belong to a number of Facebook groups for veterans, where we share advice and recommendations. I've also contacted my MP's office. I've been talking to whoever will listen to me. A lot of it is knocking on doors. I don't know if a lot of people could actually do that. You're dealing with a situation where you have someone who's dying. You have that emotional and physical journey that you're travelling. In my case, I'm just very resilient. I try to speak with whoever will listen, whether that's Veterans Affairs staff or an MP.

**Mr. Fraser Tolmie:** What you're saying to me is that Veterans Affairs isn't the one that's helping you out. It's Facebook and other communities that are actually getting you the information you need to navigate through this situation. Is that what you're saying to me?

**Mrs. Joanne Kimm:** No. Veterans Affairs has helped us out a lot. In fact, the staff I've spoken to there have been very, very supportive, and they have suggested other benefits we may be entitled to, but yes, I have had to approach them. However, in the conversations we've had, they have asked me if I knew about this or if I knew about that. That's what has helped us along as well.

**Mr. Fraser Tolmie:** Okay. Thank you for your time.

**The Vice-Chair (Mr. Blake Richards):** Thank you, Mr. Tolmie.

We will now move to the Liberal Party and Mr. Samson for the next six minutes.

**Mr. Darrell Samson (Sackville—Preston—Chezzetcook, Lib.):** Thank you very much, Mr. Chair.

Mrs. Kimm, thank you very much for being here and for sharing your story and some of the challenges. I'm a Nova Scotian as well, so I'm very happy that you are here publicly sharing that information and some of the struggles.

I want to thank your husband for his service, and, as my colleague said, thank you as well. We know very well that when one

individual serves, the whole family is actually serving. It's very challenging on that front.

I also understand you met with the minister. Is that correct?

**Mrs. Joanne Kimm:** Yes, I did. She came to our home and visited us.

**Mr. Darrell Samson:** Can you tell us a bit about how that conversation went?

**Mrs. Joanne Kimm:** It went well, I think. I felt that it was important for her to meet us, because quite often, as you know, you deal a lot with paperwork. There's a file number, but I really needed her to meet us in person so that we could express ourselves and so she could actually see my husband and see what he is like.

I prepared a briefing note for her, of course, and it was a lovely discussion. I felt that she did listen to us, and she promised to try to see if she could speak to whomever she needed to speak to, to help.

**Mr. Darrell Samson:** It's very important that you're sharing the story and meeting with key stakeholders.

Have you spoken to any of the Legion branches? They also have officers who can help veterans find information and help them fill in forms and whatnot. Have you met with them at all?

**Mrs. Joanne Kimm:** I'm actually a Legion member. The Legion, of course, is limited as to what information they can provide. In our case, we filled out the forms that we needed to fill out, and Veterans Affairs staff have been helpful in guiding me to the applicable forms that I would need to fill out.

I haven't really had to go to my Legion, although they do know what's going on and they've offered support, but it's Veterans Affairs that I've been mostly dealing with.

**Mr. Darrell Samson:** That's very good, and that's what we want. We want veterans and their families to reach out to Veterans Affairs to ask the questions, to get the support they need and to find out if there are any other types of support that could help, because your challenges change as this moves forward, as you shared in your story, which is important.

I am just trying to make sure I understand fully. You're sharing your story and you're indicating that Veterans Affairs has been very supportive and the staff have been very good. The real purpose or the real objective of yours is that the benefits you're receiving are not enough compared to others. Can you talk about that a bit more?

**Mrs. Joanne Kimm:** It's the pain and suffering component of those benefits that I'm referring to. It's a legislated amount, as I understand. My husband was assessed at 116%, but because of that rating scale, he could not receive any more than 100%. That's the issue I need to address, because that particular lump sum is not adequate enough, in my mind.

• (1125)

**Mr. Darrell Samson:** Let's talk about that lump sum. I don't know if you're aware—maybe you are, through your discussions—that if you had to take the decision today, you would not have to take the lump sum if you didn't want it. You could take a pension for life. Did anyone mention that? Did you have a conversation around that as well?

**Mrs. Joanne Kimm:** Yes. There was the option of a monthly amount versus the lump sum, but because of my husband's diagnosis...at that time, the diagnosis was for six to 12 months with no treatment or a 75% chance of five years with treatment. Because we didn't know how long he was going to live, we opted for the lump sum.

**Mr. Darrell Samson:** Who is the caregiver now? Are you receiving funding for that?

**Mrs. Joanne Kimm:** I do. We also now have a caregiver who comes in during the day while I'm at work. I do the bulk of the nighttime because he's very sedentary during the day. He is in his recliner most of the day. It's after dinner and in the nighttime that I kick in and make sure that he's getting bathed and that he makes it where he needs to go without falling. His legs are very weak right now, so I have to make sure that someone walks with him.

**The Vice-Chair (Mr. Blake Richards):** You have one minute, Mr. Samson.

**Mr. Darrell Samson:** Thank you.

God forbid, if he passes, you said that the challenges financially could be greater. Can you share what happens to the funding you're receiving now versus in the future if things go as you've indicated?

**Mrs. Joanne Kimm:** From my understanding—and actually, I have a letter—I'll be entitled to some of the benefits that we currently have. There's the veterans independence program, which I understand may be kept. That's the housekeeping and lawn maintenance program.

Of course, there is his pension, when it kicks in. Well, actually, he does get his pension right now, and there are a few other benefits, but some other things will of course not be available after he passes away. I think the diminished earning capacity and the income replacement benefits will go away, from my understanding. There are a few things that I'll be entitled to, but a few things that we won't have after he passes.

**Mr. Darrell Samson:** Thanks very much for sharing, for showing up here and for your strength. I know how difficult it must be for you. Thank you.

**Mrs. Joanne Kimm:** Thank you.

**The Vice-Chair (Mr. Blake Richards):** Thanks, Mr. Samson.

That's the end of that round.

[*Translation*]

Ms. Bérubé, you now have the floor for six minutes.

**Ms. Sylvie Bérubé (Abitibi—Baie-James—Nunavik—Eeyou, BQ):** Thank you, Mr. Chair.

Mrs. Kimm, thank you for agreeing to come and testify. I know that what you are going through is very difficult, and you have my compassion.

You mentioned that your husband was diagnosed with cancer in 2022 and that his life expectancy, if it was left untreated, was six to 12 months. If he agreed to treatment, his chances of survival were 75% and his life expectancy was five years.

Mrs. Kimm, do you think his cancer was caused by his career in the Canadian Armed Forces?

**Mrs. Joanne Kimm:** Thank you.

[*English*]

Yes. My husband, while serving in the navy, was exposed to toxic chemicals. He was also exposed to asbestos on some of the older ships he served on. AFFF was one of the chemicals they used in firefighting exercises. To put it into context, my husband was a marine engineer—or a “stoker”, as they called them—and quite often had to deal with toxic chemicals in the course of his duties. From my understanding from my husband, when they used, for example, the AFFF, which we now know is cancer-causing—it's renowned for it—it also leached into groundwater and poisoned it. When he was serving, they didn't use protective gear. They used it for a variety of things in the course of their duties, as I mentioned—for firefighting exercises and so forth—so he was exposed to very many chemicals, yes.

Cancer doesn't run in his family either, so it was quite shocking. When he was diagnosed, we were very surprised. It was unexpected. Just in talking to him and doing a bit of research...especially since many of his colleagues he served with also passed away from cancer. He did use a lot of chemicals in the course of his duties. Therefore, yes, it was from duty.

• (1130)

[*Translation*]

**Ms. Sylvie Bérubé:** From what I know, you also said that your husband had been awarded the maximum lump sum payment, according to the schedule, at the time he made his choice.

In your opinion, was that enough? If not, why not?

[*English*]

**Mrs. Joanne Kimm:** Thank you for that question.

When we first found how much we were going to be awarded, we were actually quite grateful. At that time, I didn't realize, though, that it was only five years of salary. We were just happy. We thought, “Finally someone's acknowledging that he got cancer from work.” It took a little while to settle in. My husband is the type who doesn't like to spend a lot of money, so he wanted to save some because we know that once it's gone, it's gone. We understand that.

However, after doing a bit of research into his file, I realized what it equated to. I thought, “Boy, a person who had a very lengthy career in the military, who is dying from that career, gets the equivalent of five years’ salary.” That was shocking to us. And while it did help—that money did, of course, help, and still does—the realization of what he’s going through versus the amount of money he got.... It just seems so unfair. He’s losing his life. I’m not downplaying this, but he didn’t lose a limb; he can’t get a prosthetic. He’s going to die before the end of the year; I heard it from the palliative care doctor and his oncologist.

While we are very appreciative to get that money, just from some of the other veterans I spoke to in our family, it’s not enough. How do you put a dollar sign on someone’s life? Obviously, you can’t—you just can’t—but I think the fairness.... After looking at what the United Kingdom provides for their veterans, it’s quite shocking when I looked at a comparison.

I hope I’ve answered your question.

[Translation]

**Ms. Sylvie Bérubé:** Your husband pretty much gave his life for the country, according to what you just said. You also said that veterans have contributed a lot to the country.

Since then, has your husband received any other benefits from Veterans Affairs Canada related to his health condition?

[English]

**Mrs. Joanne Kimm:** Yes, my husband receives an income replacement benefit, and a diminished earning capacity benefit. He also has received support.... There are two kinds of benefits we’ve received: monetary and actual physical supports. For example, he has a lift chair to help him stand up and sit down. He has supports in his bathroom. These things do help him in his day-to-day activities, but he also receives a monthly amount for the two that I just mentioned.

[Translation]

**The Vice-Chair (Mr. Blake Richards):** You have a few seconds left.

**Ms. Sylvie Bérubé:** You’ve been a caregiver since 2022, is that right?

[English]

**Mrs. Joanne Kimm:** That’s correct, yes.

**The Vice-Chair (Mr. Blake Richards):** Thank you.

Now, we will go to the NDP and Rachel Blaney for the next six minutes.

**Ms. Rachel Blaney (North Island—Powell River, NDP):** Thank you, Chair.

Thank you so much, Mrs. Kimm, for being here with us today. Thank your husband on my behalf for letting you come here and be away from him during such a hard time, and of course for his tremendous service to the country.

My first question for you is this: Why did you want to speak to the committee?

**Mrs. Joanne Kimm:** Thank you for your question.

I wanted to come before the committee today to speak to you all because you are the body that can make a difference. You hear many things from many people. You affect policies. You affect legislation.

It’s very important for me to sit here in person before you so that you can hear my story, our family’s story, with the hopes that you are able and willing to make this change. It’s so important. I was reading the committee mandate, and it says, “Pursuant to the Standing Orders, the government is required to respond to the opinions and recommendations presented in ACVA reports if so requested by the Committee.”

I’m here today in the hopes that you will help to effect change, not only for my family, but also for other veterans going through similar circumstances. Many are silent. They don’t know how to ask for help. My heart goes out to those who cannot, because the freedoms we have today are only here because of those in the past who fought for us. Now, we really have to reciprocate. We have to fight for them, and that’s why I’m here today.

● (1135)

**Ms. Rachel Blaney:** Through your testimony and your answers to the committee, I heard you talk a couple of times about one of the things that you want to see, which is legislative change. Could you talk a little about what that looks like for you, and what your thoughts and recommendations to the committee would be on that?

**Mrs. Joanne Kimm:** To confirm, are you talking about the legislated monetary change?

**Ms. Rachel Blaney:** Yes.

**Mrs. Joanne Kimm:** Because the amounts are legislated, what we need to do is to have a really good look at those numbers. Are they adequate with what is being given in comparable Commonwealth countries? We all fight together. Our veterans have all fought in wars together. They didn’t care who sat on what side of the fence. They were there for a common purpose: to defend their countries, to defend our freedoms.

Finding out that Canada is really lacking in the compensation means that we have some work to do. We need to bring it up to similar standards, like the U.K.’s, for example, and it has to be done through legislation.

**Ms. Rachel Blaney:** Thank you.

In listening to your testimony, one of the questions that came to mind is this: What can Veterans Affairs do to really assist veterans in recognizing the benefits and compensation that they may be entitled to? It makes me think of a conversation you and I had not too long ago about finding out that your husband was eligible for a bit of money for clothing, I believe, and you just had no idea.

I’m wondering how you think it could be explained better to families.

**Mrs. Joanne Kimm:** Thank you.

To put it into context, I found out recently that we could apply for a clothing allowance, which was surprising to me, because I never would have thought of that. Because of my husband's condition, I'm quite often doing laundry. We get a small stipend for that.

Veterans Affairs needs to be proactive with veterans. We need to create a veterans liaison office that actively reaches out to individual veterans to find out how they are doing, what they currently get and whether there is anything else they may need. As I mentioned before, veterans don't like to ask for help. They're used to following orders, and they're used to doing what they are told to do. It's about having an office that reaches out to them to find out what they might need. Proactively establishing those systems so veterans can get what they need without having to come before Veterans Affairs with cap in hand, asking, "Please, sir, can I have some more?" would make a difference to so many.

My husband won't ask for help. It's up to me to try to do what I can to give him that help. Having a Veterans Affairs liaison office would be a big help to those veterans who can't ask for help, or who don't know what to ask for.

**Ms. Rachel Blaney:** Thank you.

In this process, have you approached the veterans review and appeal board?

**Mrs. Joanne Kimm:** In our situation, because we received the maximum amount, we can't approach the appeal board. The appeal board is there for those who feel they were treated unjustly and haven't received benefits they feel they're entitled to.

In our case, we cannot approach the appeal board.

• (1140)

**Ms. Rachel Blaney:** Thank you.

**The Vice-Chair (Mr. Blake Richards):** Thank you.

That's the end of our first round of questions. We'll now move to a second round of questions. The only practical difference is that it's five minutes rather than six minutes for the round.

We go now to Mr. Dowdall for the Conservative Party.

**Mr. Terry Dowdall (Simcoe—Grey, CPC):** Thank you, Mr. Chair.

Thank you, Joanne, for being here today. I want to thank your husband John, as well, for the service he's provided to our country.

I know it must be difficult to take time away from your husband in order to come here and educate us on the issues at hand. I have to commend you. You're helping others. You want some help now, too, but you're trying to be a spokesperson for the veterans we don't hear from all the time, quite frankly. I really want to thank you for that. I think it's important that this is here before the committee.

Most of the time, what I've found in committees—I've been here since 2019, not always on this committee—is that we do a lot of studies. Usually, something is picked up from the media, more so than the actual study getting accepted. Sometimes we see change. Maybe that's something that could happen today. Meeting us is fantastic. It's good to get out there. You seem to be meeting all the stakeholders. You said earlier that you met with the minister.

When did you meet with the minister?

**Mrs. Joanne Kimm:** It was on July 8.

**Mr. Terry Dowdall:** Was that July of this year?

**Mrs. Joanne Kimm:** Yes.

**Mr. Terry Dowdall:** That's probably the best recommendation you have.

Have you had any follow-up from there as to what the next steps might be?

**Mrs. Joanne Kimm:** Do you mean from her visit?

**Mr. Terry Dowdall:** Yes.

**Mrs. Joanne Kimm:** I received some correspondence from her thanking me for the meeting and so forth, but the recommendation was to go before the appeal board. There were other outlets, as well—for example, Veterans Affairs' 1-800 number.

Unfortunately, she was unable to effect any change. That's the answer I got from my request.

**Mr. Terry Dowdall:** That's not what you wanted to hear, I would imagine. You were kind of frustrated with that fact.

**Mrs. Joanne Kimm:** I was disappointed. I was hoping that, if I met the minister in person, she would understand what I was asking for. Unfortunately, I didn't get the answer I was hoping for. I understand that sometimes it's difficult for ministers to get the changes they need.

**Mr. Terry Dowdall:** Our study will be recommendations, more so than the ability to move forward with those recommendations. I wanted to clarify that part of it.

Another thing you said that was very important, which I've witnessed since I've been in this committee—I'm one of the newer members—is that the confusion.... As you say, a liaison officer is probably a fantastic idea. I know it's hard to know whom to go to for help.

Did the caseworkers move around? We had a new contract last year. Do you find that they're moving and that you're not getting the same caseworker all the time? Does that wear on the veterans?

**Mrs. Joanne Kimm:** I believe it could. In our case, we've been very fortunate. We've had two caseworkers, and one of them, I understand, deals with some of the different benefits covered by Blue Cross. The other caseworker deals more with the Veterans Affairs side of things. We've had two, but I never knew who I was going to speak with, because when you call the 1-800 number, you just get whoever answers the phone, and then they refer you to whoever is the most appropriate person. You don't know who that's going to be.



**Mr. Terry Dowdall:** I live with military, right beside CFB Borden in Angus, Ontario. It is one of the larger bases. I hear often from many of the veterans that they seem to feel more like they're a number than an individual. That's what I hear the most. Would you say that's kind of the case?

**Mrs. Joanne Kimm:** I would agree, yes.

**Mr. Terry Dowdall:** Okay, that's good.

The other question I had.... This is kind of interesting. Your husband had a long career, and the amount that was received was \$334,000. Is that taxable?

**Mrs. Joanne Kimm:** No.

**Mr. Terry Dowdall:** Okay, so it's not taxable.

For 20 years, it's \$300,000, which is about \$60,000 per year over five years. What would your recommendation be? If somebody got it after four years in the military, should they get the same amount as someone who served 20 years?

I'm just wondering what you're hearing from the veterans side. How would you judge? If it caused your cancer, no matter how long you were with the service, should that be the reason...? I know that the amount's too low, probably, but I'm having a hard time with the years of service part. It's great that you served 20 years, but if someone was there for four years and happened to get some kind of condition because of the military, should they get a lot less?

• (1145)

**Mrs. Joanne Kimm:** Well, as we know, cancer doesn't discriminate based on how long you serve in the military, so my feeling is, why wouldn't they get the same amount?

**Mr. Terry Dowdall:** Okay.

**Mrs. Joanne Kimm:** Regardless of how long they served, cancer's cancer. If it was caused by service, then they should get the same amount. I don't mean the same amount person to person, but they should still receive, in our case, the maximum.

In your example, if the person is rated at 100% on that scale, of course they should get the same amount. It doesn't matter how long they've served.

**Mr. Terry Dowdall:** Okay.

**Mrs. Joanne Kimm:** If they got their cancer from service, then....

**Mr. Terry Dowdall:** Okay, just because we were talking about the years of service and how much per year, I was wondering if that could be a basis that maybe we could go upon: if they worked more, they would get more.

**Mrs. Joanne Kimm:** No, it was just for context, to say how long he served.

**Mr. Terry Dowdall:** Well, thank you so much for coming here today.

**The Vice-Chair (Mr. Blake Richards):** Thank you.

For our next round of questions, we'll go to the Liberal Party and Mr. Casey.

**Mr. Sean Casey (Charlottetown, Lib.):** Thank you, Mr. Chair.

Thank you for being with us, Mrs. Kimm. Your testimony is powerful. Your husband would undoubtedly be enormously proud of your advocacy for him and for others in your situation.

Mrs. Kimm, there are a couple of things that I want to canvass with you. First, when we have veterans appear before this committee, most of the time they're here because they have an issue with Veterans Affairs, and it hasn't met their expectations. The number of veterans we have who repeat that is actually not aligned with the data that is collected by Veterans Affairs in terms of levels of satisfaction. Your story actually is. In your testimony today, you described your interactions with Veterans Affairs as providing excellent service. The staff have been fantastic. They've been very supportive. They've pointed you to other benefits, and you've been very fortunate.

When we have people here who aren't happy with their service, we delve into that in some detail, so I'm here to ask you to expand a bit on your satisfaction with how you've been treated by Veterans Affairs and their staff. Can you cite any specific examples for the committee?

**Mrs. Joanne Kimm:** Yes, thank you. I can cite a few.

For example, one time my husband's caseworker came to our home to visit us.

**Mr. Sean Casey:** As did the minister.

**Mrs. Joanne Kimm:** As did the minister, yes. I really appreciated that, because it showed me they cared. In this age of technology, it's easy to pick up the phone and ask someone, "What's your file number?" That's the first thing you have to give, your file number. To have a caseworker take time to come to our home and explain it to me and present a letter stating what we're entitled to now and what we're going to be entitled to when he passes, that went a long way. That showed me that staff really did care.

At other times, I've received phone calls from the other caseworker who's dealing with the VIP and the Blue Cross benefits. For example, I was trying to get approval for some in-home caregiving. I want to say it took about two and a half or maybe three weeks, and I was told that because it was a lot of money, it had to go up to the next level for approval, which, for me, is a bit frustrating, because no amount of money is enough, but that's a whole different discussion.

This woman took time to call me. It was a Friday. She said she was just about to log off and she noticed the approval came through and wanted to let me know right away so that I could let the service provider know. I was at a point where we were willing to just pay it ourselves before the approvals came in, because it got to the point where we needed someone to come in while I was at work. For her to take time on a Friday to do that for me meant the world, and it took a lot of stress off my shoulders.

Those are a couple of examples I can give to you.

• (1150)

**Mr. Sean Casey:** Thank you.

With the little bit of time I have left, I would like to hear from you about the other benefits, separate and apart from the maximum lump sum for pain and suffering. I think if we're going to do a fair comparison of Commonwealth countries, the entire suite of benefits offered to injured and ill veterans is relevant.

I think what I heard you say is that there's a caregiver benefit, a veterans independence program, a military pension, a diminished earning capacity allowance and an income replacement benefit, along with the physical supports and the clothing allowance. Is that the entire list?

**Mrs. Joanne Kimm:** I'm just having a look here. I think you've covered it.

**Mr. Sean Casey:** Mrs. Kimm, are you comfortable providing in written form to the committee a summary of the benefits and their status? We're not going to have enough time to pursue this topic.

**Mrs. Joanne Kimm:** Yes, I can certainly provide that to you in writing. That's no problem. Just let me know who I need to send it to.

**Mr. Sean Casey:** Thank you.

Thank you, Mr. Chair.

**The Vice-Chair (Mr. Blake Richards):** Okay, thank you.

We'll now move to the second portion of our second round, where the Bloc Québécois and the NDP each get two and a half minutes to ask some further questions.

Madame Bérubé, go ahead.

[*Translation*]

**Ms. Sylvie Bérubé:** Mrs. Kimm, how many years' salary would be acceptable as compensation, in your opinion?

[*English*]

**Mrs. Joanne Kimm:** For compensation, it all depends on the severity of the illness or injury. Right now, there's a rating scale. If a member is hurt, for example, they get assessed and they are placed on the scale, and that is the compensation they receive based on the severity of their affliction. I'm not quite sure how to answer that question, because every veteran or member is different. There are mental afflictions and physical afflictions, and it all depends on the situation, I think.

[*Translation*]

**Ms. Sylvie Bérubé:** Do you feel you have obtained all the information available from Veterans Affairs Canada on the benefits and services you are entitled to?

[*English*]

**Mrs. Joanne Kimm:** That's a good question.

I'm not sure, because I'm still finding out about benefits we could be eligible for. For example, I had no idea about the clothing allowance. It's a nominal amount, but I had no knowledge of that. If we don't know what's available, we don't know what to ask for.

[*Translation*]

**Ms. Sylvie Bérubé:** What impact will this have on your personal and family life following the death of your spouse?

[*English*]

**Mrs. Joanne Kimm:** That's a good question. Currently, we have our son and grandson living with us. My older son, ironically, is in the navy on the west coast, and he has his family out there. Initially, there will be a lot of paperwork. We'll then have to survive in a new normal state of family. That means that after all the paperwork is done and we know what we're entitled to, we'll be able to know how to move forward.

Of course, there will be a gaping hole without my husband, but, as we all know, life goes on with or without us. It's a matter of how we move on from that. I think he will be happy knowing I've done all I can to try to make a better life for our family. That's what it all comes down to. We all want what's best for our families. We take care of our families.

I think if he knows we're okay and we're going to be able to, for example, make the mortgage payments and make sure that we're able to move forward, it will give him peace of mind. Moving forward after he passes will of course be difficult, but we'll be able to do it.

• (1155)

**The Vice-Chair (Mr. Blake Richards):** Thank you.

Now we have Rachel Blaney for two and a half minutes.

**Ms. Rachel Blaney:** Thank you, Mr. Chair.

Thank you again for this testimony. I'm finding it really helpful and very powerful. It was interesting for me to listen to some of the questions.

I just want to make sure I understand clearly what you're saying to us, which is that two things can be true at the same time. You can be happy with the kind service you've received—the fact that you've had a caseworker come to your house and help, and the fact that you've had the minister come to your home and learn about your story—but at the same time, you can be very disappointed with the fact that the compensation package you received was just not enough.

I just want to make sure that what I'm hearing from you is that both things are true at the same time.

**Mrs. Joanne Kimm:** Yes, I would agree with that.

**Ms. Rachel Blaney:** Thank you.

My question for you now is about the process you're going through. You found out your husband was very ill and would not live for a very long time, and it is related to the service he provided to his country. I'm assuming you had a conversation with VAC about what the options are for you moving forward.

During that period of time, were there any emotional supports offered to you and your husband to have that discussion? One of the things I've noticed about the service is that there are a lot of good people, but they may not have that higher level of trauma-informed service delivery. It seems to me that if you're in that space of suddenly having to take on the possible death of your husband sooner than you ever expected due to a serious illness, and then you're looking at options and you're not sure which one is the best fit...

Was there any support for you and your husband during that time that dealt with how you were processing all of that trauma and grief and trying to face reality in that context?

**Mrs. Joanne Kimm:** We were offered the chance to speak with a social worker. I took up their offer, because sometimes it's easier to speak to someone outside of the family, and they have a different perspective on things. The emotional support was offered.

My husband chose not to take it. He's just stubborn. However, he and I have chatted. It's difficult for some family members to speak about their internal grief, because everyone grieves differently—and we are grieving now. It's hard to open up to that. It's also hard to ask for that help from Veterans Affairs. However, it has been offered to us.

**Ms. Rachel Blaney:** What do you think would have made it easier for you to accept that help?

**The Vice-Chair (Mr. Blake Richards):** We'll have to make that a really quick response. We're actually over time, but we'll let you give a quick response.

**Mrs. Joanne Kimm:** Just offering it to us is important. I think providing the information to us is important, as well. If you don't know what's out there, you don't know whom to ask.

**The Vice-Chair (Mr. Blake Richards):** Thank you very much.

We'll go to our third round now. It's back to five-minute rounds. It will be Cathay Wagantall from the Conservative Party for the next five minutes.

**Mrs. Cathay Wagantall (Yorkton—Melville, CPC):** Thank you very much, Chair.

Joanne, thank you for being here today.

I appreciate the circumstances you're in. I've been on this committee for nine years now. I'm into my ninth year. Believe me, in my own circle of veterans, there are many who have experienced what you are experiencing at this point in time. I have deep feelings about that. One was definitely in the same circumstance as you. Of course, her husband wanted her to have that care level. He has passed away.

I think it's very important that we look at the fact that many veterans are well cared for and happy. We have 400,000-plus in this country, and many are well taken care of by Veterans Affairs. However, we have a certain cohort who seem to face constant challenges. They are listening today and, of course, cheering on your being here and your purpose. However, when they hear things like a caseworker coming to your home, or you having had time with the minister.... You've been offered things and provided with information that is not the norm for all veterans. What you mentioned about the need for a liaison officer has been brought up often in this place. I can't agree more with your thinking on that. It certainly says something of importance.

Can you share with us a round figure for the difference between what your husband is currently receiving through these various programs versus what you will receive for pain and suffering when he passes away? What kind of change is that to your family income?

• (1200)

**Mrs. Joanne Kimm:** Monetary-wise, it will be significant. I don't have a—

**Mrs. Cathay Wagantall:** Just give a broad number. I'm not expecting details. I understand what Mr. Casey said.

**Mrs. Joanne Kimm:** I would have to go through some of the paperwork. Actually, I was looking for the letter outlining it. It's at least about.... I want to say \$1,500, perhaps.

**Mrs. Cathay Wagantall:** That's fair. Thank you.

I had a veteran just yesterday who reached out because he went to the VAC office. It wasn't in my riding. I'm from Saskatchewan. Ontario, of course, is across the country. He went, and there was no one there. He called and there was no answer. Basically, there was a notice that you could have a meeting, but you'd have to set up an appointment and then they would reach out to you. He found this very disconcerting. When you think that, across the country, there are many offices.... The idea is that when you have concerns or needs, they should be available to answer your questions.

Did you face that at all? How did you get in touch with Veterans Affairs? Was it through your Legion? Was it through an office? How were you able to navigate?

**Mrs. Joanne Kimm:** It was a bit of both. I called the 1-800 number often.

**Mrs. Cathay Wagantall:** Okay.

**Mrs. Joanne Kimm:** I was able to connect with someone.

**Mrs. Cathay Wagantall:** How long does that take?

**Mrs. Joanne Kimm:** It's been fairly quick, actually. I haven't had any issues with the 1-800 number.

**Mrs. Cathay Wagantall:** It's mostly by reaching out through the number.

**Mrs. Joanne Kimm:** Yes.

**Mrs. Cathay Wagantall:** That's fair enough.

I'd like to make sure you understand how this works. We're pleased to have you here today. At the same time, in discussion, there are many others who I think could offer testimony in this circumstance. As a committee, our role is to study specific issues or policies. What we do is come up with recommendations, which then go to the minister. It is the minister who responds to our recommendations and determines which ones they would like to consider.

I am concerned about the fact that you had two meetings with the minister and she could not effect change. This indicates, I think, an imbalance between the role of the minister versus the deputy minister and the folks who run that. I would go back to the minister and see whether she could encourage a study on this issue, because it's true that it's very hard to make sudden changes to circumstances. I appreciate that you want long-term change, but you are also asking for a difference in your family's life. I applaud you for your efforts. However, I know that, in certain circumstances, suddenly, this can happen for some. This has happened with the critical injury benefit. There are rules and regulations around how it's processed and used. Then, all of a sudden, it is used differently, so—

**The Vice-Chair (Mr. Blake Richards):** We're out of time. I don't know if there was anything the witness wanted to respond to there.

**Mrs. Joanne Kimm:** No.

**The Vice-Chair (Mr. Blake Richards):** Okay, no problem.

Thank you, Mrs. Wagantall.

Now we'll go to the Liberal Party and Wilson Miao for five minutes.

**Mr. Wilson Miao (Richmond Centre, Lib.):** Thank you, Mr. Chair.

Thank you, Mrs. Kimm, for being here and appearing before the committee.

I'd like to offer you some more time, since I'll be the last person who will be asking you some questions, to share with the committee your point of view. You mentioned how a lot of the benefits programs are not known, and therefore it is not known where and how to apply for them.

Can you share with us your view of what kind of system you feel would be helpful in your circumstance and to those who are listening and experiencing the same issue?

• (1205)

**Mrs. Joanne Kimm:** As I mentioned before, I feel it would be so helpful if there was a veterans liaison office that reached out to veterans to talk to them about their circumstances and then go through the benefits available to them that they may not know about. As I mentioned, we didn't know about the clothing allowance. It sounds minimal, but it was available. The only way I knew about it was because it was brought up by the Veterans Affairs staff.

Proactively reaching out to veterans and their families would also help them understand their family situation to see what other programs or benefits could be available to them. Otherwise, as I mentioned, Veterans Affairs is a very demand-driven office. Unless you know what you're asking for, you don't know what's available.

**Mr. Wilson Miao:** I understand that, during the pandemic, a lot of the Veterans Affairs offices were closed, and even before that, a few of the offices were closed, which affected the quality of service to our veterans.

Hearing from you, it seems like having a liaison officer and having them be proactive in being there in person and listening to the stories of the veterans and understanding their circumstances to see what could be helpful to them would be really important.

Is there any other recommendation or suggestion you would put forward to us so that when we draft the report of this study, it can also support any future veterans who are going through hard times like you are?

**Mrs. Joanne Kimm:** My other thought on that goes back to serving members. My father was in the military, too, so I have quite a lengthy military family history.

Before a member actually gets discharged from military service, I know there are seminars they can take to discuss Veterans Affairs, and they're given some information on what they could be entitled to. I think it needs to go a bit deeper. We have to take a step back into DND and have them provide more information ahead of time to those who.... They might not need these services for 20 years, like in the case of my husband, but the information should be provided ahead of time, so that if something happens, they can refer to this binder or package of information that says, "Okay, if this happens to you, this is who you can contact, and this is what you might be entitled to", and they have a clear and transparent picture of the services that could be available to them.

Just giving them that information could be very helpful for when the time comes and they are veterans, so they have something to look back on and say, "Oh, that's right. I have that in my package here."

**Mr. Wilson Miao:** Knowing you have a family that has served our country, I think for most who are serving us, when they are being deployed, one thing that goes through their minds is when they can come home and if they can come home in one piece. What you have suggested with that guidance would really help them to understand what they can expect before they go into service.

I know time is running short. Is there any additional information you would like to share with the committee or something further you can submit so that we can also incorporate it into our study?

**Mrs. Joanne Kimm:** My suggestion is that there needs to be a more proactive approach on things, instead of being demand-driven. As I mentioned, a lot of people don't know what to ask for. There needs to be that thinking: "Okay, how can we best approach veterans to let them know what they're entitled to in different circumstances?" It could be a table laid out that says, "If you have experienced this, this is what you could be entitled to and here's who you can contact." Clearly lay it out. Obviously, there are a lot of mental and physical afflictions and so forth, and it'll take work to develop this, but I think that having it clearly laid out will be a big help.

• (1210)

**Mr. Wilson Miao:** Thank you very much, Mrs. Kimm.

**The Vice-Chair (Mr. Blake Richards):** That's the end of the time for that round.

What we'll do at this point is give each party another two and a half minutes.

[Translation]

We still start with Ms. Bérubé from the Bloc Québécois.

You have the floor for two and a half minutes.

**Ms. Sylvie Bérubé:** Mrs. Kimm, your husband is really lucky to have you. I imagine that there are veterans who are alone and not lucky enough to have the support of their loved ones.

Is there an officer who handles your case file, or do you have to start the process over every time you call or make an application?

[English]

**Mrs. Joanne Kimm:** That's a very good question. Sometimes I had to go into my VAC account and send them a message. I don't know who initially would see it, but then they would pass it along to our caseworker. Even though we had two, sometimes I spoke to somebody else. It would be great if we had direct contact with those caseworkers. Just the way the system is set up, you don't know who you're going to be speaking to until you mention, "Oh, I've been dealing with this person as our caseworker." Initially, we don't know who we're going to talk to, until we mention, for example, my husband's file number. Then the person can look it up and say, "Oh, okay, so you've been dealing with this person. Let me pass you over to their voice mail, or I'll give them a message for them to contact you."

[Translation]

**Ms. Sylvie Bérubé:** How do you feel that we as committee members can help you?

[English]

**Mrs. Joanne Kimm:** The awareness of what we're going through and how the pain and suffering compensation is inadequate is something.... I want to bring that awareness to you in person so that, when you make recommendations, you know how impactful a decision or a recommendation that you make is to people like me, my husband and other veterans. I think it's very important that you realize this particular issue has been discussed before in length, yet nothing has happened. There has been no concrete change.

My hope is that you can effect that change and, going forward, I look forward to hearing that the change has been recommended. Like I said earlier, it is a legislative change, so I know it takes work, but I know that this committee has the ability to help effect that change.

[Translation]

**The Vice-Chair (Mr. Blake Richards):** Thank you.

[English]

Now we go to Ms. Blaney of the NDP for two and a half minutes.

**Ms. Rachel Blaney:** Thank you, Chair.

I was admiring the huge file that you brought with you, which obviously is what you're using to track everything for your husband. Thank you for being such a strong advocate. Not all people can speak during these hard times, and when you have the capacity to do it, I really appreciate your stepping up and doing it because, when you speak, you're not just speaking for yourself. You're giving voice to what a lot of veterans and their families are experiencing. Thank you for being willing to take that on.

When I look at that big file, I just wonder whether you can tell us how this process was for you in terms of applying for different things, and whether there was any resistance from VAC about accepting the fact that the cancer your spouse has is connected to service.

• (1215)

**Mrs. Joanne Kimm:** When I first submitted the application, I knew it was going to take a long time and I knew we didn't have the luxury of time, so I approached our member of Parliament to expedite it, which they did. The initial application indicated that he had been exposed to the toxic chemicals, yet I found out later that they indicated the asbestos was the reason they were accepting his cancer. Even though I stressed the AFFF chemical, I didn't even think about asbestos. It was only after we received word that he'd been accepted and we found out it was the asbestos that I asked my husband if he was around asbestos a lot, and he said, "Yeah, on the older ships, sure." It was quite a surprise to find that out.

**Ms. Rachel Blaney:** I'm glad to hear that they accepted it, but it's scary to know they accepted it for something you weren't thinking of.

You talked about the application process. Did you find it overwhelming, or was the process fairly clear to apply for whatever resources you could get?

**Mrs. Joanne Kimm:** The application process can be quite daunting. It's very intimate in what you submit because, of course, you're telling a stranger or a medical professional you've never met why you think you deserve this, and that can be hard for someone to express. It's like somebody asking you what you do in your job. You just do it. You don't think about the exact duties in what you do.

In filling out the application, I had to ask my husband some very interesting questions, and I found out some scary answers. For example, he had to hang upside down just to fix machines and things like that, and he injured himself doing this or that and I never heard about it. It was pretty scary to me.

These applications can be quite intense for some members, especially, I think, for those suffering from psychological afflictions. It can be hard to relive those on paper and try to express what happened without it triggering something.

In the case of my husband, just filling this out made me very upset and sad, and I felt really bad for what he had to go through. We, as a family, don't know what our spouses do in their positions. My biggest fear when he was at sea was what would happen if there was a fire. That was my biggest worry while he was away, but then to hear the other things while filling out this application was pretty shocking to me.

I'm sorry. I've gone off a bit.

The applications can be quite complicated and they take time.

**Ms. Rachel Blaney:** Thank you.

**The Vice-Chair (Mr. Blake Richards):** That's all for now, but I'm going to use the chair's prerogative to ask a follow-up question, if I can, because it sounded like that's where that was headed. You talked about the lengthy...the stuff you learned and how much there was involved in all of that. Can you share with us if you think that was overdoing it? For example, there were probably things that would have been on his file from his time in CAF, which would have meant you didn't have to go through all that again.

Did you find that you were asked to do this over and over again, or was it only one time that you had to share all of this information with one person at Veterans Affairs? We've often heard from veterans that they end up having to reshare it multiple times with multiple people. Was that your experience, or was yours better than that? I hope it was.

**Mrs. Joanne Kimm:** Just so I understand, you're not talking about the application, but in general.

**The Vice-Chair (Mr. Blake Richards):** Yes. What you were referring to was having to give a lot of information about things that you weren't even aware of and that probably aren't easy to have to share with someone you don't know.

We've often heard from veterans, for example, that stuff that would have been on their file already could have been shared by the CAF with VAC. It would have prevented them from having to go through that stuff or having to retell that story to two, three or seven different people at Veterans Affairs over the course of some time, rather than just having to tell it once, which really is what should happen, I would say.

Was your experience that you had to retell this, or were you able to have it be just a one-time experience?

**Mrs. Joanne Kimm:** Luckily for us, I only had to retell it a couple of times.

You mentioned something interesting, in that much of this would have been in his file. A lot of it wasn't in their everyday duties. Sometimes you don't see that on a formal piece of paper, because if they're firefighting or if they're doing this or that, you're not going to see some of these details. Therefore, when he's reliving it to me and I have to notate it or tell somebody, to learn of that was, like I mentioned, surprising and shocking.

To answer your question, I've only had to retell it a few times, but each time, yes, it is difficult.

• (1220)

**The Vice-Chair (Mr. Blake Richards):** I would submit that more than once is too often.

Thank you for sharing your experience with us on that.

We have two more rounds of two and a half minutes. The first will go to the Conservative Party and Mrs. Wagantall.

**Mrs. Cathay Wagantall:** Thank you so much, Chair.

Joanne, you mentioned that you were surprised that asbestos was what Veterans Affairs indicated was the cause of your husband's cancer. Did they require a doctor's diagnosis to verify that? Could you provide a quick yes or no, since I have a couple more ques-

tions? Did they simply say, "This is what caused it and that's why you're getting the funding"?

**Mrs. Joanne Kimm:** They just said that.

**Mrs. Cathay Wagantall:** Okay. Thank you.

You talked a lot about the lump sum. It sounds as if the two of you knew what you were doing with that fund. Of course, a lot of times, young guys suddenly have this money and it goes to the wind. I think educating veterans on how it would work best for them might be a good thing to offer. I'm wondering about that.

Also, now that you've been through this process to some degree, do you feel the lump sum versus the monthly pension will work better for you, following your husband's passing away? Do you see a difference, or are you happy with the fact that you've managed it well? That is what I am asking.

**Mrs. Joanne Kimm:** It's a good question to ask. Thank you.

How you approach that depends on your circumstances, I feel. In the letter of acceptance, they offer financial assistance if you need it.

**Mrs. Cathay Wagantall:** Good.

**Mrs. Joanne Kimm:** To answer that, I think it's your circumstance and where you are in life. Of course, if you're younger, it might depend on how you've been educated in financial management.

However, I think my whole point was that the lump sum was only equivalent to five years' worth of salary. That, to me, was a jarring moment—realizing, "Wow, that's it."

**Mrs. Cathay Wagantall:** We'll have to follow up on that. I appreciate that.

Briefly, I'd like to go back to the diagnosis of your husband's cancer.

What did the doctor indicate was the cause? Was there any indication as to what caused the cancer? Your impression is that it was something very different from what Veterans Affairs suggested.

**Mrs. Joanne Kimm:** Doctors can't tell you 100% how you got cancer. All they can do is—

**Mrs. Cathay Wagantall:** Did they make a recommendation based on your feedback to them regarding his lifestyle or anything like that?

**Mrs. Joanne Kimm:** They said it could have been.

**Mrs. Cathay Wagantall:** It could have been what?

**Mrs. Joanne Kimm:** It could have been caused by the chemicals he used on the ship.

**Mrs. Cathay Wagantall:** Okay. They didn't mention asbestos.

**Mrs. Joanne Kimm:** Well, at the time, we weren't even aware it was asbestos-caused.

**Mrs. Cathay Wagantall:** Okay.

**Mrs. Joanne Kimm:** A doctor has only a finite amount of knowledge, and cancer is something that is, you know....

**Mrs. Cathay Wagantall:** Yes, I appreciate that.

Thank you very much.

**The Vice-Chair (Mr. Blake Richards):** Thank you.

We will have one last round of questioning, from the Liberal Party for two and a half minutes. That will be Ms. Hepfner.

**Ms. Lisa Hepfner (Hamilton Mountain, Lib.):** Thank you, Chair.

Mrs. Kimm, I also want to chime in and tell you how impressed we are with your testimony and how valuable your time here has been. Thanks again to you and your husband for your service to our country, which continues to this day.

You've now been testifying, I think, for an hour and a half, so a lot of the questions I originally wanted to pose have already been touched on in the committee. Forgive me if it seems a bit repetitive.

I was curious about how long it took for your husband's diagnosis to be accepted to have been caused by his work. You said that a lot of his colleagues were also affected by these chemicals—AFFF and asbestos. They didn't use protective gear. Regarding the colleagues who served with him, do you know whether they had a similar experience, in that they were accepted right away as having a disease directly related to their service?

**Mrs. Joanne Kimm:** All I can tell you is that, when my husband is looking at Facebook, he sees that one of his colleagues has passed away from cancer. I don't know the stories behind the colleagues, but they all served together on the same ships, so we just assume this is what happened.

• (1225)

**Ms. Lisa Hepfner:** You haven't been in touch to find out whether they received similar levels of compensation.

Do you think it was your local MP intervening that made a difference?

**Mrs. Joanne Kimm:** Yes, I think it was because of that intervention that we were able to expedite his initial application and were successful in meeting with the minister.

**Ms. Lisa Hepfner:** You have also talked quite a bit today about the burden of the paperwork you've had to endure through this process. Do you have any suggestions for us on specifically how to alleviate that burden?

**Mrs. Joanne Kimm:** Unfortunately, I think paperwork is going to be around for quite a while. I have an extensive background in records management. We used to call it "the paper tiger". It's unfortunately something that has to be done.

The challenge with it as well is that some veterans are not computer-literate. For them, to manoeuvre through the online version could be very daunting. With respect to them, paper is probably preferred.

**Ms. Lisa Hepfner:** And—

**The Vice-Chair (Mr. Blake Richards):** Pardon me. We're out of time.

That will end our time in this particular portion of the meeting.

We really appreciate your time with us here today, Mrs. Kimm. I think the committee members have learned a lot. Hopefully, the recommendations we make will lead somewhere further than where you've been able to get thus far. Thank you again.

We will close off this portion of the meeting.

I will suspend the meeting. I will just point out to members that I'm going to start again in about five minutes or less, at about 12:34. I know that people will want to have a chance to thank our witness in person, but let's make that brief.

If you're not a parliamentary staff member who is authorized to be in here for an in camera meeting, please leave the room quickly if you can, so that we can reconvene our meeting as quickly as possible for our in camera portion.

Again, thank you, Mrs. Kimm. It's much appreciated.

**Mrs. Joanne Kimm:** Thanks very much to all of you for having me speak today. I appreciate it.

**The Vice-Chair (Mr. Blake Richards):** The meeting is suspended.

*[Proceedings continue in camera]*







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