



Fourth Session - Thirty-Sixth Legislature

of the

Legislative Assembly of Manitoba

**DEBATES
and
PROCEEDINGS**

**Official Report
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MANITOBA LEGISLATIVE ASSEMBLY
Thirty-Sixth Legislature

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LEGISLATIVE ASSEMBLY OF MANITOBA

Wednesday, May 20, 1998

The House met at 1:30 p.m.**PRAYERS****ROUTINE PROCEEDINGS****PRESENTING PETITIONS****Dauphin General Hospital Foundation**

Mr. Stan Struthers (Dauphin): Madam Speaker, I beg to present the petition of the Dauphin General Hospital Foundation praying for the passing of an act to incorporate the Dauphin General Hospital Foundation.

Rail Line Abandonment

Ms. Rosann Wowchuk (Swan River): Madam Speaker, I would like to present the petition of L. Leonhard, L. Maydy, L. Bresky and others praying that the Legislative Assembly of Manitoba request that the provincial government go on record requesting CN and CPR to not proceed with any discontinuance of lines until the report has been tabled, that being the Estey Grain Transportation Review report.

READING AND RECEIVING PETITIONS**Winnipeg Hospitals Food Services—Privatization**

Madam Speaker: I have reviewed the petition of the honourable member for Point Douglas (Mr. Hickes). It complies with the rules and practices of the House (by leave). Is it the will of the House to have the petition read?

An Honourable Member: Dispense.

Madam Speaker: Dispense.

THAT the Urban Shared Services Corporation (USSC) has announced plans to privatize laundry, food services and purchasing for the Winnipeg hospitals; and

THAT it is estimated that more than 1,000 health care jobs will be lost over the next year as a result, with

many more privatized in the next two or three years; and

THAT under the terms of the contract, Ontario businesses will profit at the expense of Manitoba's health care system; and

THAT after construction of a food assembly warehouse in Winnipeg, chilled, prepared food will be shipped in from Ontario, then assembled and heated before being shipped to the hospitals; and

THAT people who are in the hospital require nutritious and appetizing food; and

THAT the announced savings as a result of the contract have been disputed, and one study by Wintemute Randle Kilimnik indicated that, "A considerable number of studies have compared costs of service delivery in health care between self-operation (public sector) and privatization. Invariably, privatization is more expensive."; and

THAT no one in Manitoba seems to benefit from this contract, especially patients.

WHEREFORE YOUR PETITIONERS HUMBLLY PRAY that the Legislative Assembly of Manitoba urge the Minister of Health to put an end to the centralization and privatization of Winnipeg hospital food services.

Madam Speaker: I have reviewed the petition of the honourable member for Broadway (Mr. Santos). It complies with the rules and practices of the House (by leave). Is it the will of the House to have the petition read?

An Honourable Member: Dispense.

Madam Speaker: Dispense.

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PRESENTING REPORTS BY STANDING AND SPECIAL COMMITTEES

Committee of Supply

Mr. Marcel Laurendeau (Chairperson): Madam Speaker, the Committee of Supply has considered certain resolutions, directs me to report progress and asks leave to sit again.

I move, seconded by the honourable member for Charleswood (Mrs. Driedger), that the report of the committee be received.

Motion agreed to.

* (1335)

Introduction of Guests

Madam Speaker: Prior to Oral Questions, I would like to draw the attention of all honourable members to the public gallery where we have this afternoon 10 students from Shaughnessy Park School from the CEDA Taking Charge! program under the direction of Mrs. Doreen Szor. This school is located in the constituency of the honourable member for Inkster (Mr. Lamoureux).

On behalf of all honourable members, I welcome you this afternoon.

ORAL QUESTION PERIOD

St. Boniface Hospital Neurosurgery Program

Mr. Gary Doer (Leader of the Opposition): Madam Speaker, every month this government makes a new announcement on health care; a couple of months later they make another new announcement on health care, and then a couple of months after that they make another new announcement on health care. Regrettably, months after they make their announcements, patients are still waiting in the longest waiting lines in Canada. People are very concerned about the state of their health care system.

Madam Speaker, the government announced, as one of their so-called top priorities in the budget just presented in this House two months ago, that they would expand as a, quote, top priority the neurosurgery program at St. Boniface Hospital.

Today, Madam Speaker, the government announced they were going to cancel the same program at the same hospital. I would like to ask the Premier (Mr. Filmon): did he involve his Minister of Health in the preparation of the budget presented by the Minister of Finance (Mr. Stefanson), or is it just another example of health care flip-flops by this government?

Hon. Darren Praznik (Minister of Health): Madam Speaker, it is a sad day for the people of Manitoba when the Leader of the Opposition comes to this House

and so blatantly attempts to misrepresent what is happening. The member came here to say a program is being cancelled. Two things have happened here today. With respect to neurosurgery, it is being consolidated at Health Sciences Centre, being transferred to that particular facility. But what is really interesting is this whole design plan was not done by the cabinet, it was not done by planners in the Ministry of Health, by officials, it was done by physicians, by nurses, by allied health care workers and their administrators. For the first time, we have a plan that is being devised by front-line health care workers, and the Leader of the Opposition opposes it.

Mr. Doer: I think we had the answer that it was another flip-flop.

Health Sciences Centre Capital Expenditures

Mr. Gary Doer (Leader of the Opposition): In August of 1990, the government promised major capital expenditures to refurbish, renovate and upgrade the Health Sciences Centre's operating rooms. They put those capital promises on hold for four years, and then they dusted them off in March of 1995, before the last election, and promised to spend major amounts of money on capital for the Health Sciences Centre. They again froze that capital, and in questions we raised year after year after the broken promise, again, from the Filmon government, the government said we are very concerned about the situation at the Health Sciences Centre, and we do not want to see a so-called super hospital.

Given the fact that the government is now transferring surgery from St. Boniface to the Health Sciences Centre, closing down the Misericordia Hospital as an acute care hospital and transferring surgery to the Health Sciences Centre, why should anybody believe this government when just a year ago we had fruit flies in the operating rooms at the Health Sciences Centre? I want to ask the Premier (Mr. Filmon): when will the capital promise made in 1990 be completed at the Health Sciences Centre to deal with the long waiting lists that his government has created through his broken promises?

* (1340)

Hon. Darren Praznik (Minister of Health): The Leader of the Opposition is wrong in what he brings to this House. First of all, let me tell him that the capital redevelopment at the Health Sciences Centre is on track. It is well over estimate, well over \$70 million, and that planning and detail is well underway and will be going to tender in due course. It is in the control of those who are doing the planning; the authorities to spend the money are in place.

But secondly, the member for Concordia, the Leader of the Opposition, has said that we are moving surgery into the Health Sciences Centre. The plan that was unveiled this morning actually has a net decrease of some 1,200 procedures at the Health Sciences Centre as we expand the role of our community hospitals and move general surgery and surgery from the Misericordia out into those community hospitals, so I am not sure he knows what he is talking about.

Mr. Doer: The minister never answered the question. When will the promise be completed? That is what we asked. He never answered the question again.

Diagnostic Testing Waiting Lists

Mr. Gary Doer (Leader of the Opposition): The minister has distributed copies of his briefing notes, and his briefing notes state that in Manitoba, waiting lists for ultrasound, CT and MIR are significantly longer than any other Canadian city; a fact that we have made to the Premier (Mr. Filmon) time and time again, which he has denied, and now is contained within the Minister of Health's own briefing notes. The waiting list for ultrasound is 8,000; CT scans, 4,500 people, according to the minister's briefing notes, are on those waiting lists, Madam Speaker.

I would like to ask the Premier: is he satisfied with the fact that our waiting lists are significantly higher than every other city in Canada? Is he satisfied with that standard, and is he satisfied with the announcements made today to deal with these unconscionable waiting lists in our health care system?

Hon. Darren Praznik (Minister of Health): Madam Speaker, with all due respect to the Leader of the Opposition, I do not know where he has been in our

public statements or followed them over the last number of months. We have not denied those particular numbers. In fact, last winter we approved the first tranche of I think it was \$1.5 million for the Winnipeg Hospital Authority to develop a plan to bring those down to much lower levels. That plan is in the process of implementation. In fact, I understand today that waiting lists for a number of those diagnostic areas have already declined significantly.

One of the key tools to make this happen has been to get centralized planning, centralized operation of our diagnostic equipment, and the New Democrats have opposed that. So you cannot have your cake and eat it too.

Madam Speaker, we are seeing the beginnings, I think, of one of the best delivery systems for hospital care in Canada, and I am very proud to be associated with it. I just wish the Leader of the Opposition would be more up to date in his information.

Health Care Facilities Bed Availability

Mr. Dave Chomiak (Kildonan): Madam Speaker, the minister will have to forgive us for being a bit skeptical, because we have been this way before on many occasions. We had the Bell-Wade Report that spent—what?—a million dollars talking about how neurosurgery should be at St. B, cardiac surgery should be split between St. B and HSC, and now we are seeing a total shift. So we have been this way before.

One of our major concerns is one of the issues that came out of this morning's press briefing, the attempt by the government to indicate that there will be 165 additional beds available. That is not true, because the minister's own notes say that the net increase—given that we have the longest waiting lists in the country—of beds in the system will be 28 beds, 28 beds when you have people lying in the hallways as we speak.

How does the minister justify that?

Hon. Darren Praznik (Minister of Health): Madam Speaker, first of all, the reference was to the creation of the transition unit at Misericordia and what are now acute care beds. But it does allow for then acute care

beds in all of the other hospitals to be able to decant people who are waiting for personal care home beds into the Misericordia unit, and that will be beginning I gather in a number of months as a few issues are worked out with Misericordia, which means that the remaining acute care facilities, the six in the city, will be able to better manage their acute care services.

Madam Speaker, the creation of the palliative care program that was announced today and should be in operation very, very shortly, as one of the first initiatives out of this plan will again take away some of the demand on our acute care beds. Dr. Postl, I think, went into fairly great detail about their planning. The use of swing beds between medicine and surgery, taking into account seasonal variations and use of beds, again, will free up more resources for meeting our acute care needs.

As I have said, this plan was developed by health care professionals in the system to deal with these issues. I think we should have some confidence in them.

* (1345)

Mr. Chomiak: Madam Speaker, can the minister of a government who by their own figures have closed 1,400 beds, 1,400 beds by government figures, explain how the opening of 28 beds and the reluctance of the minister to indicate any proposal to hire more nurses in the system today, how Manitobans can have confidence that we will not have waiting lists in this province the next six months, the next eight months, the next year, and the next year and a half?

Mr. Praznik: Madam Speaker, I am not sure where the member for Kildonan was this morning. I thought I saw him at the press briefing that we held. Dr. Brian Postl clearly indicated that the development of this plan will require additional nurses in that system, and I have indicated that this government is committed to ensuring the financial resources are there to do the job. So that is part of the plan.

If the member is proposing that we just take a chunk of money and say go and do this without a plan, without a rational basis, without a targeting of those

resources, that is the kind of health planning we have seen in Canada for 30 years and it does not work.

Diagnostic Testing Waiting Lists

Mr. Dave Chomiak (Kildonan): Madam Speaker, my final supplementary to the minister. Does the minister find it acceptable, with a waiting list of 8,000 people on ultrasound and 4,500 on CT scan, that his plan, as put out today, says that they are going to decrease those lists by 15 percent per year—that is the plan—whether that is acceptable to the Manitobans who have to wait months and years to get these tests? Does he accept the 15 percent per-year reduction that his plan, his grand scheme, envisions for patients who are on waiting lists of 8,000 and 4,500 respectively? That is not acceptable.

Hon. Darren Praznik (Minister of Health): Madam Speaker, again I would ask—and I have offered to have a detailed briefing provided to the member for Kildonan, because what was said today, not that the lists would be brought down by 15 percent, but to reduce the lists. The number of procedures would be increased by 15 percent. The member is bringing information to this House that quite frankly is inaccurate.

Now I appreciate there was lots of information provided today in the course of the briefing, and it will take the member some time to digest it, but what Dr. McClarty was talking about was increasing the number of procedures by 15 percent to bring down the waiting lists, not reducing waiting lists by 15 percent. The member is inaccurate.

Misericordia Hospital Ophthalmology Program

Ms. Jean Friesen (Wolseley): Madam Speaker, for the last 10 years this government has treated the sisters, the board, the patients and the staff of the Misericordia in an unconscionable manner, facing them with daily uncertainty about their future and about the future of the hospital. In March, the government ordered the closure of the hospital, and now the Winnipeg Hospital Authority has added some of the details to that, or at least we have this month's proposals.

I would like to ask the minister to tell us why in none of his press releases there was any reference to the ophthalmology department at the Misericordia. Will he confirm for us today in the House that ophthalmology will remain at the Misericordia?

Hon. Darren Praznik (Minister of Health): Madam Speaker, first of all, I think what we have done with the Misericordia board is provide that certainty as to the future of Misericordia, and it was a brave step for that facility to change its role, but it is because the Misericordia board was prepared to take on a new role in its future that many of the much-needed changes are able to happen.

With respect to ophthalmology, Madam Speaker, I can confirm that the plan for the WHA is to continue with ophthalmology at the Misericordia Hospital, and that accounts for about 50 percent of the surgeries performed there.

Ms. Friesen: Could the minister tell us how long that promise is good for? How long will Misericordia retain the ophthalmology services?

Mr. Praznik: Madam Speaker, Misericordia will maintain ophthalmology as long as it makes common sense for it to be there. That is the guiding principle of what we are trying to build, is a system that is flexible to deal with the demands of change, much of which we cannot predict today.

If I took the advice of the member for Wolseley and the members of the New Democratic Party, we would carve everything in stone, everything would be stagnant and within a short period of time would be out of date. But the commitment that I do make on behalf of this administration is that it has been our commitment to get the best use out of the facilities we have in Winnipeg, and the announcement that was made today does that. It ensures a long-term future for every facility in this city, and the Misericordia—if she had been properly briefed by her colleague, she would know that Misericordia already is being identified for some additional ambulatory services, like dialysis, for example. It is an excellent location for those programs, and I am sure it will have a long and successful future.

* (1350)

Ms. Friesen: Well, I wish the minister would read his own press releases. The Misericordia is being identified for exploratory ideas for new programs, not for new programs.

I would like to ask the minister to explain why within the last year over a million dollars was spent on renovations at the Misericordia to enable it to cover plastic surgery. Could he explain to us why that money was spent in that way when now, less than 12 months later, we have another program and the loss of that plastic surgery program?

Mr. Praznik: You know, Madam Speaker, there is a very fundamental difference between these two sides of the House. On that side of the House, they look at every little piece in isolation and really do not care about what is best for the overall view of health care. On this side, we are attempting to take a much larger view.

Our operating theatres in virtually every other community hospital, which are much more modern, in much more modern facilities, have gone tremendously underutilized. This gives us the opportunity to get the best use out of what we have. I can tell the member, part of the problem at Misericordia has been that there has not been a clear decision being made because everybody keeps debating around it. We now have one in which their board is supportive as they move into a new age. I can tell the member that they did some renovations there out of their foundation without any approval, direct approval of Manitoba Health. But, at the end of the day, we are trying to build a good system for the city of Winnipeg where patient care is No. 1, not the small "p" political interests of any single facility.

Misericordia Hospital Breast Care Services

Ms. Diane McGifford (Osborne): Madam Speaker, I notice the minister has not made any announcement on hepatitis C.

The breast care clinic at Misericordia Hospital is nationally known for its comprehensive program, including screening, diagnosis, surgery, treatment, reconstructive surgery and physiotherapy, yet the minister announced today that this program would be

fragmented. There will be a diagnostic centre to be announced in three surgical units, one at St. Boniface, one at Victoria and one at Grace. So I want to ask the minister: when consumer group after consumer group has come forward to speak about the advantages of a centralized breast care program, why has the minister chosen to fragment this program? Is this his idea of common sense?

Hon. Darren Praznik (Minister of Health): Madam Speaker, let us get some facts on the table in this discussion. First of all, in Winnipeg today, I understand there are four breast programs with surgery delivered in seven sites. In terms of breast health care for the women of our province and of our capital city, we have today a terribly fragmented program. Secondly, the design for this program was not done by the minister; it was done by health care professionals from an overall perspective of the city. If the member wants to debate with them, she can be my guest to do it. They designed it and make the recommendations. I am accepting the recommendation with my colleagues of front-line health care deliverers who have a mandate to deliver a program, one program for the entire city. What was announced today is that we will have, for the first time in the history of our province and of this city, one comprehensive breast care program with rapid diagnosis, which is what the women of Winnipeg and Manitoba want.

Ms. McGifford: Madam Speaker, since clearly many women have come forward to voice support for the Misericordia program, I would like to ask the minister: which consumer groups did he consult with when arriving at this decision?

Mr. Praznik: What is very interesting is the member for Osborne has totally ignored the fact that breast care in the city of Winnipeg today is terribly fragmented with four programs and seven sites for surgery. She conveniently forgets that to concentrate on one piece, rather than thinking about care for all women in the city of Winnipeg. I can tell the member that, in the announcement that was made today, Dr. Brian Postl indicated very clearly, as the details are put around the development of one breast care program, all of the various groups and organizations that have an interest in Winnipeg health, or women's health will be involved

in that process, and I look forward to them working with the WHA to build this new program.

Madam Speaker: Order, please. The honourable member for Osborne, with a final supplementary question.

* (1355)

Ms. McGifford: So, Madam Speaker, I presume the answer was he has not consulted.

I want to ask the minister if he realizes that his wilful destruction of this program at the Misericordia Hospital is not only medically regressive but denies women the services which they tell us, which they know will promote their healing and health.

Mr. Praznik: Madam Speaker, first of all, I do not know how many times one has to say it for people to at least acknowledge it or have it sink in, but all of this work was not done by the Minister of Health. It was not done by officials in the Ministry of Health; it was not done by boards playing turf wars. It was done by physicians, by nurses, by allied health workers and their administrators to build a system-wide approach to have one breast care program in the city of Winnipeg. In that process, I am aware that they talked to a number of these groups. Some of my colleagues from within the city of Winnipeg were involved in those discussions and sat in them. There was a lot of work that has gone into them, and I am pleased to indicate that, as the new program is put into place, those same organizations and groups will be invited to be part of that consultation and discussion and planning. I prefer to have all of them at the table building this new breast care program, rather than having it dictated by myself and certainly not from the member for Osborne.

Manitoba Hydro Amalgamation—Winnipeg Hydro

Mr. Kevin Lamoureux (Inkster): Madam Speaker, my question is for the Minister responsible for Manitoba Hydro. In the city of Winnipeg, we have, depending on what side of the street or the river or whatever it might be—determines whether or not you are a customer of Winnipeg Hydro or if you are a customer of Manitoba Hydro. In a private situation for profit,

there might be some sense to having two, but what does not make sense is to have two publicly owned Crown corporations administering hydro. My question to the minister responsible is: what has this government done in the last 10 years to deal with the issue of duplication and the justification of why, today, we are still being served by two public utilities serving one city?

Hon. Glen Findlay (Acting Minister charged with the administration of The Manitoba Hydro Act): I thank the member for the question. I will take it as notice for the minister responsible.

Mr. Lamoureux: Madam Speaker, will then the Premier make any sort of a commitment to any degree in terms of looking at the need for looking at our public utility of Winnipeg Hydro and Manitoba Hydro, and what sort of justification is there to allow both of those public Crown corporations to continue on?

Hon. Gary Filmon (Premier): Madam Speaker, I am sure the member opposite knows that that has been the subject of ongoing discussions for certainly this past decade, but it is a matter that has to be decided by the two utilities. They are utilities that are owned by two different levels of government, and obviously this is not something that can be done unilaterally by our government. If, as the member indicates, there are all of those synergies and advantages to be gained—and I am not necessarily arguing that he is right or wrong on it, but there has to be both partners who are persuaded of those synergies and those advantages.

Mr. Lamoureux: Madam Speaker, can the Premier then explain to Manitobans, in particular people who live in Winnipeg, how they benefit by having two publicly run hydro companies serving one city of the population base that Winnipeg currently has? How does the consumer actually benefit? Will he not concede that in fact they would benefit if it was one publicly owned company?

Mr. Filmon: Madam Speaker, I have certainly seen economic analyses that would suggest exactly the circumstances that the member opposite indicates. Winnipeg City Council and the people who run Winnipeg Hydro have a different point of view, and I have seen many letters to the editor and also analyses to the contrary. So, if he has that perspective, then he

obviously should be taking it to Winnipeg City Council and to the people who run Winnipeg Hydro to make his point.

Shaken Baby Syndrome Reduction Strategy

Mr. Doug Martindale (Burrows): Madam Speaker, since 1990 there have been 30 documented cases of shaken baby syndrome, and 25 percent of these tragically ended in death. In the last month, a six-week-old girl died, and a nine-month-old is on life support.

I would like to ask the Minister of Family Services what she is planning to do, what her government is planning to do by way of prevention so that in future there will be no more tragic deaths of this kind. Will her government appoint an independent commission of inquiry, as we recommended in October 1996, so that all of the causes and all of the remedies can be identified so there are no more future tragedies of this kind?

Hon. Bonnie Mitchelson (Minister of Family Services): I thank my honourable friend for that question. I would love to be able to guarantee Manitobans that not another baby would lose its life as a result of shaken baby syndrome. I am not sure I can make that guarantee, but what I can do is indicate that I have asked the Children and Youth Secretariat to pull together all of those people that might be responsible for working with new moms, whether they be public health, whether they be babysitting courses, whether they be the programs that are run like Nobody's Perfect, ensuring that we try to have an overall strategy and ensure in every program dealing with the care of children that there is a component around the dangers of shaking babies.

Madam Speaker, I do know that the new programs that we have introduced like BabyFirst, new programs and strategies around adolescent pregnancy and working with young moms will certainly have a component that creates and specifically speaks to the issue of shaken baby syndrome.

* (1400)

Mr. Martindale: Will the Minister of Family Services acknowledge that experts in this field such as Dr.

Debbie Lindsay, associate director of the Child Protection Centre, are saying there have not been a lot of programs which target these high-risk groups, although a two-hour program is not going to fix all these problems, and that what we need is for the government to act decisively in areas within their jurisdiction on areas that prevent these problems such as eliminating child poverty? We have the highest rate of child poverty in Canada. This is something that is a direct result of the policies of this government. What is she going to do to end this and prevent future deaths?

Mrs. Mitchelson: I know that in many of the instances where we have seen deaths as a result of shaken baby syndrome, they have been in fact young males that have been in charge of or caring for these infants.

Madam Speaker, again I have to say to you that everything that we are doing as a result of the National Child Benefit and our ability to reinvest dollars in families of high need have been focused towards reducing child poverty. We know that the best form of social security is a job, and if parents have jobs and are working in the system and have the additional support like the National Child Benefit and other programs that are available through government, it will break the cycle of poverty, and families will have more money and the ability to make better decisions for their lives and for their children.

Madam Speaker, as I indicated in my first answer, we will be working with all of those that are providing programs to ensure that there is a component around shaken baby syndrome and what the implications will be. We will continue to focus our energies and our efforts in reduction of child poverty around programs that will help to move people into a cycle of independence, not dependence.

Mr. Martindale: Will this minister acknowledge that the child tax benefit is being clawed back from the poorest of the poor? None is going to families on social assistance, and we know that poverty, poor education and a high rate of teen pregnancy, the highest rate of teen pregnancy per capita in Canada, are all contributing factors to this very serious problem. What is this minister and what is this government going to do about it?

Mrs. Mitchelson: All of the programs that we have announced over the last couple of months certainly are dealing with the issue of poverty and families in high risk trying to prevent neglect and abuse. Our BabyFirst program is one of those very specific projects that has intensive working with young moms, with single parents, to try to ensure that they understand what good parenting is all about, how to feed nutritious meals to their children and how to learn to parent. Obviously, shaken baby syndrome is one of those issues where parents do need some support and some tools to help them learn to parent in a better fashion.

Madam Speaker, our announcement around fetal alcohol syndrome and Stop FAS is exactly one of those initiatives that is working with high-risk families to try to help ensure that children are born healthy and that parents have the parenting skills to deal with those children when they are born.

Madam Speaker, our Earlystart program that we have just announced will deal with children in the child care system. And all of the additional money that we have put in through Taking Charge! and Making Welfare Work will ensure that people have the opportunity to work and break the cycle of poverty.

Capital Region Strategy Ministerial Responsibility

Ms. Becky Barrett (Wellington): Madam Speaker, on March 19 of this year, the Minister of Urban Affairs (Mr. Reimer) finally announced a task force to deal with the important issues facing the Capital Region, the names of which have not yet even been made public. Now, just as he did earlier with his bullying of Winnipeg over the sale of water to Headingley, the Minister of Rural Development (Mr. Derkach) has subverted that process agreed to by the province, the City of Winnipeg and the other Capital Region communities to provide long-term planning for the development of the Capital Region.

I would like to ask the Premier: who is in charge of the Capital Region in that government, the Minister of Urban Affairs or the rampaging Minister of Rural Development?

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please.

Hon. Gary Filmon (Premier): Madam Speaker, I thank the member for Wellington for her colourful question. The issue is that we need to provide services. We need to provide sewer and water services to what is the largest unserved urban-type development in the entire province of Manitoba. Those of us who walked in Headingley in recent weeks, as I have, know that there is a significant requirement for water supply and sewage treatment.

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please.

Mr. Filmon: Madam Speaker, the issue is not about the nature of future development in the ex-urban areas around the city of Winnipeg, which is the subject of the task force that has been announced, but it is about providing services for urban development that currently exists without the benefit of services in the way of sewer and water. That is an area of neglect that has existed for decades. It goes back to the time when Headingley was a part of the city of Winnipeg, and those services were not provided for—this is not about houses that have been built since Headingley seceded from the city of Winnipeg. This is about urban development that has existed for decades and in fact goes to the days when it was part of the city of Winnipeg. In the interests of a clean and sustainable environment, those services need to be provided today or in the near future, and that is not to be used as a bargaining chip; that is not to be used as a means of dealing with future development; that will be the subject of the review and study that has been announced. This is about what exists today and has existed for decades and definitely requires servicing by way of sewer and water.

Ms. Barrett: The issue definitely is that we need to look at a plan for the entire Capital Region rather than just ad hocking.

Madam Speaker: Order, please. The honourable member for Wellington, to pose her question, please.

Ms. Barrett: Why should we even have a task force on the Capital Region if the Minister of Rural

Development (Mr. Derkach) can hijack an agreed-to process, apparently at will?

Mr. Filmon: Madam Speaker, clearly there is a lack of understanding on the part of the member for Wellington, which is why a lot of people do not give them a great deal of credibility on that side of the House on issues of this nature. This is all about—

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please.

Mr. Filmon: Madam Speaker, the planning is required for future development decisions. The servicing is required for those homes that exist today and have existed for decades in that area. I know that is a difficult concept for the member for Wellington and her colleagues to get their heads around, but even if there was no future development allowed as an outcome of the planning process that is going to be decided by virtue of the task force that has been announced, we would still have to deal with providing the servicing to all of that housing that was constructed while Headingley was a part of the city of Winnipeg for decades. That is the issue that has to be dealt with. That is the issue that is being dealt with by virtue of the announcement made yesterday.

* (1410)

Ms. Barrett: I would like to ask the Premier: why should the residents of Winnipeg trust this government when the latest takeover by the Minister of Rural Development (Mr. Derkach) shows how planning issues vital to the city of Winnipeg and the rest of the Capital Region are trampled underfoot by an out-of-control Minister of Rural Development?

Mr. Filmon: I know that the member opposite has had the three questions written out for her and she feels obliged to ask them, but the fact of the matter is—

Madam Speaker: Order, please.

Point of Order

Ms. Barrett: I wrote the questions myself, unlike the members opposite who have their questions scripted.

Madam Speaker, I would like to ask you to bring the Premier to order and ask him to answer the question that was put and not get involved in personal vendettas.

Madam Speaker: The honourable government House leader, on the same point of order.

Hon. James McCrae (Government House Leader): The honourable member makes the same specious point of order, I believe, that she made yesterday or the day before, and I make the same response.

Madam Speaker: The honourable member for Wellington did not have a point of order.

* * *

Mr. Filmon: I repeat that there are two separate issues here. One is the planning for future development, and a process has been announced, a process to which this government is committed, the Minister of Urban Affairs (Mr. Reimer) is committed, the Minister of Rural Development (Mr. Derkach) is committed. The fact of the matter is decisions will be made as to whether or not there will be further expansion of ex-urban housing developments or not through that process. But it is intolerable, for what is an urban density development that exists today, that has existed for two decades, including during the period of time when Headingley was a part of the city of Winnipeg, that that should remain unserved by way of sewage treatment and water supply, and that is a process which must be addressed and is being addressed by this government.

Short-Line Railways Government Position

Ms. Rosann Wowchuk (Swan River): Madam Speaker, anyone who has had the pleasure of travelling in rural Manitoba in the last month can attest to the horrible conditions of the roads in the rural communities, and this is only going to get worse with rail line abandonment. We know that CN is planning to discontinue more services in rural Manitoba.

Since one of the answers to this is short-line railways, can I ask the Minister of Highways whether he is prepared to lobby to ensure that short-line railways can function properly, rather than be held at the mercy of

the railway companies who are not co-operating with these short-line companies.

Hon. Glen Findlay (Minister of Highways and Transportation): Madam Speaker, I am sure it comes as no surprise to the member for Swan River that we strongly support the concept of economically viable short lines. In many instances, we have supported people who promote the concept of setting up a short line. Whether it is in the Interlake or whether in southern Manitoba or southwest Manitoba, we support the people who come forward and make presentations and proposals to CN and CP to take over those short lines.

So our Legislature supports it, and in principle and practice the department supports it in the actions we undertake on behalf of people who propose short lines, so we know the merit of keeping freight on rail as opposed to roads.

Madam Speaker: Time for Oral Questions has expired.

MEMBERS' STATEMENTS

Film Industry

Mrs. Myrna Driedger (Charleswood): Madam Speaker, as we have seen in the hallways of the Manitoba Legislature this week with the taping of the Jane Seymour-James Brolin movie, the film industry is booming in Manitoba. The film industry has come a long way in the last decade. In 1986, revenue from the film industry was less than \$1 million. In 1998, it is estimated that production may reach as high as \$60 million. This is a 600 percent increase.

In order to further develop the industry in Manitoba, our government has introduced the Manitoba Film and Video Production Tax Credit. The success of this tax incentive is apparent. The National Screen Institute and its 23 members have relocated to Winnipeg. Cheryl Ashton, executive director of the Manitoba Motion Picture Industry Association commented: There is no doubt the government tax incentive played a role in our decision. As well, in the first half of this year some 30 film scouts have visited Manitoba, triple last year's total.

Madam Speaker, as more films are produced in Manitoba, I have every confidence that those Manitobans who dream of Hollywood will have a chance to see their dreams come true right here in Manitoba. Thank you.

Alternative Education Programs

Ms. Diane McGifford (Osborne): Madam Speaker, as a parent of a child who from Grade 7 to Grade 12 attended an alternative or flexible learning program, I was annoyed to hear alternative parents dismissed by the Minister of Education (Mrs. McIntosh) as "yesterday's people." Even more distressing was the minister's refusal to take the opportunity afforded her by the member for Wolseley (Ms. Friesen) and offer a public apology to the parents she had maligned.

Perhaps the minister does not understand the position some parents have taken. Perhaps she does not understand that whether she personally likes that position or disagrees with it, their position is founded on—

Some Honourable Members: Oh, oh.

Madam Speaker: Order, please. I am experiencing difficulty hearing the honourable member for Osborne. I would ask that the honourable members having private conversations do so in the loge or outside the Chamber, please.

Ms. McGifford: I was saying that perhaps the minister simply did not understand that these people's positions were founded on deep conviction and principle and not on whim and not on a disregard for all forms of evaluations.

Some parents simply think that the evaluation and testing methods, which the minister favours, are bad pedagogy. Perhaps the minister does not understand that when parents disagree with her, they have every right to voice and to act on their disagreement. Indeed, most of the dissenting parents probably feel they have a higher duty than subservience to the minister, responsibility to their children. Probably these parents also think that the Education minister should listen with grace and not dispense insults.

As the parent of a child who thrived in an alternative program, I advocate that the minister find out more about these programs, the dedicated teachers who work in them, the children who attend them and the parents who support them. Perhaps this kind of outreach work would broaden the minister's horizons, tame her tongue and encourage her to support Manitoba parents.

* (1420)

Golden Falcon Sport Competition

Mr. Peter Dyck (Pembina): For approximately 20 years, every May long weekend has seen communities in Manitoba and northwestern Ontario host the Golden Falcon sport competition. This past weekend the town of Morden once again outdid itself as an accommodating and gracious host community.

On Saturday, I had the opportunity to review the Wing Parade and Drum Head Ceremony, and I was most impressed with the attention to detail presented by all cadets. As well, I attended the Air Cadet League of Canada's provincial effective speaking contest featuring prepared and impromptu speeches. The young men and women who presented speeches focused on two main themes: patriotism and self-discipline. They spoke with wisdom and energy well beyond their ages. Air cadets have a proud and long tradition in our country. The young men and women of today's air cadets will go on to be the leaders of tomorrow. Their experiences in air cadets will help shape them and prepare them for the future, whether that future is with the military or in civilian life.

It is my hope that the hundreds of participants this past weekend enjoyed their time in Morden. Although not everyone received medals for their achievements this past weekend, I believe that everyone in attendance was a winner. The memories of a well-played baseball, soccer or volleyball game, the friendships forged and the chance to represent their squadron to the best of their abilities have ensured that all cadets came away with something they can cherish.

I would also like to thank Mr. Kenneth Gibson and Lieutenant Richard Helps of the 179th Royal Canadian Air Cadets for their generous invitation to the parade and closing banquet. Thank you very much.

Vision Quest

Mr. Gerard Jennissen (Flin Flon): Vision Quest, the second annual conference on aboriginal economic development, is currently being held in Winnipeg at the International Inn. Last year more than 70 businesses and organizations had booths at the event. From what I saw today, this year's event promises to be even bigger in numbers of businesses participating, the numbers of workshops and increased attendance from across the province.

The conference is about building partnerships and business relationships. It is a forum where aboriginal people from across the province can exchange ideas, business plans, proposals, with those businesses who want to work with aboriginal organizations and individuals. It is a chance for potential entrepreneurs to get advice from and access to experts in various business fields. Neither the provincial nor the federal government has fully acknowledged the ecotourism potential for First Nations communities. This must change.

Aboriginal people are not looking for handouts; they are looking for the chance to operate on their own. For a hundred years the paternalistic Indian Act has hampered economic development; that is changing, thankfully. Increasingly, the future of this province will be determined in the growing First Nations communities across Manitoba. It is time that First Nations people from these communities had the same opportunities to develop that exist elsewhere.

Vision Quest celebrates the many aboriginal success stories and points to new directions and possibilities. It is a recognition that aboriginal people are taking their own destinies in hand and moving towards true self-government and independence. Thank you, Madam Speaker.

Shaken Baby Syndrome

Mr. Doug Martindale (Burrows): Madam Speaker, I rise to speak briefly on shaken baby syndrome which is a very serious problem in our city and our province. We know that since 1990 there have been 30 documented cases of shaken baby syndrome, and 25

percent or seven of these ended in death. In the past month, a six-week-old girl died and a nine-month-old was and possibly still is on life support.

We have some experts who have commented on this very serious problem, such as Dr. Debbie Lindsay, associate director of the Child Protection Centre. It has been noted that the child poverty rate, which is the highest in Canada, combined with a high teen pregnancy rate, makes for a potentially deadly combination.

I would also like to quote Verna McKay, executive director of North End Community Ministry, who said: I believe more and more young parents are struggling. Young people today are under a tremendous amount of pressure, and that takes its toll. That fits with a report titled Trends, Issues and Innovations in Winnipeg's Human Care Services, a report on discussions amongst United Way of Winnipeg member agencies, who talked about shrinking resources and cuts in government services but increasing demands on United Way agencies for their services. One of the problems that they point out is a higher incidence of unemployment and poverty. So we have some contributing factors to shaken baby syndrome which I believe this government could have a positive impact on decreasing, such as the child poverty rate, which is the highest in Canada, and teen pregnancy rate. We have asked for the government to do something about these problems and to initiate an inquiry into the causes and means of preventing these deaths. Thank you.

ORDERS OF THE DAY

Hon. James McCrae (Government House Leader): Madam Speaker, would you be so kind as to call bills today, Bill 13, Bill 36 and the remainder in the order you find them in today's Order Paper, unless we come up with some other plan of action later in the afternoon.

DEBATE ON SECOND READINGS

Bill 13—The Prescription Drugs Cost Assistance Amendment Act

Madam Speaker: To resume adjourned debate on second readings on the proposed motion of the

honourable Minister of Health (Mr. Praznik), Bill 13 (The Prescription Drugs Cost Assistance Amendment Act; Loi modifiant la Loi sur l'aide à l'achat de médicaments sur ordonnance), standing in the name of the honourable member for Selkirk (Mr. Dewar). Is there leave to permit the bill to remain standing? [agreed]

Also standing in the name of the honourable member for Wolseley (Ms. Friesen), who has 32 minutes remaining.

Ms. Jean Friesen (Wolseley): It has been some weeks, if not over a month I think, since I first began to speak on this. It has been I think a subject of considerable concern to many of my constituents. Many of my constituents, as you know, Madam Speaker, are on low income, many of them on transfer payments and particularly those who are amongst what are commonly called the working poor. They find that the issue of drugs is one that faces them quite often on a daily basis, particularly those who have seniors for whom they are responsible or for children in their homes or those of their relatives who are required to take a number of drugs.

Madam Speaker, it is something which I encounter when I talk to constituents, particularly those who have children who require drugs on a regular basis. The cost of many of those drugs has risen, I would say in some cases quite astronomically. It is a double-edged sword in many ways because the drugs which they depend on, the ones which, in fact, keep them alive, the drugs which enable them to live relatively independent lives are also the ones that cost an enormous amount and they cannot do without them.

Their families know that and their doctors know that, and those drugs have to be bought sometimes at the expense of other things. I am not just thinking of food or clothing but often at the expense of the health of other members of the family, and those are terrible choices for a family to make but they are often made. I have met families who have told me that in order to buy drugs for their children, they have, in fact, gone without meat themselves. They have gone without fruit and vegetables in the winter in order that that first call upon their household budget can be paid.

So this bill dealing with the prescription drugs, The Prescription Drugs Cost Assistance Amendment Act, is one I think which is of interest to all Manitobans.

* (1430)

Madam Speaker, I had my first experience of the dreadful impact of the cost of drugs many years ago in the 1970s when I was campaigning in eastern Ontario. The riding was partly urban, partly in Ottawa, but it was also partly a rural riding and the conditions in the rural part of eastern Ontario in those days, in the late '60s, early '70s, were ones that perhaps now seem almost unimaginable. I encountered people, adults, for the first time, whom I found were illiterate. I had not encountered that before. I was quite young at the time, but I also encountered one senior and I still remember her. She invited me into her kitchen, and she laid out the drugs that she was required to take. This was the 1970s when the drug industry certainly had not expanded the range of drugs available. Research in the late 20th Century has expanded enormously and given us a much wider range and a more significant range and indeed more expensive range of drugs to be taken. But in the late '60s, early '70s there were still high priced and many drugs which were prescribed for seniors. This woman laid out on her kitchen table for me all the drugs that she was taking, all prescribed by a doctor, all of them which enabled her to deal with physical complaints and enabled her to stay in her home, in her farm by herself.

Madam Speaker, she laid them out and she put a price tag on each one, and then she showed me her budget and she showed me how little she had left for food and how at the end of the month the choice for her was between food and drugs, and she chose the drugs. But what an awful choice to have to make, and you could tell, I think, from her physical condition that the reduction of her food was certainly having an impact on her health, but that was the choice which she was forced to make in Ontario in the late '60s and early '70s.

I wonder, really, if things have changed for people. They certainly did I think for some people in some provinces in the years of the '70s and '80s. There were some provinces, and Manitoba was amongst them, as was Saskatchewan and indeed as was Quebec, where Pharmacare and drug plans and assistance to seniors, to

young people, to people on low income, indeed to the population in general, where assistance was extended to enable them to live healthy lives, to enable them to purchase the drugs which their doctors had prescribed and which enabled them, I think, to pursue an independence which might not have been possible before.

In Manitoba, people are well aware I think that the first of the Pharmacare plans came in under the Schreyer government, and I believe it was certainly the kind of thing that when people elected Schreyer they had expected to see. They had expected to see that expansion of public support for individuals who needed drugs, expensive drugs for their families, for their seniors and for their children. They expected to see those kinds of changes under a social democratic government and they did. They got them, just as they did in Saskatchewan and in many ways, in an extremely generous way, in the province of Quebec, as well, particularly in the Province of Quebec's plan for seniors.

Since then, Madam Speaker, we have had 20, 30 years of many changes to the pharmaceutical plans of different provinces. In particular, I remember very clearly when I moved to Manitoba, I think it was not long after that, that the Pawley government brought in the plan requiring pharmacists to prescribe the generic drug rather than a brand name drug, and that was a very progressive move I think and one which many other provinces, if not all provinces, have subsequently followed.

So changes to the drug plan—obviously, there are many improvements that can be made, there are changes which will bring benefits, but this bill, Madam Speaker, allows the minister to delegate responsibility to determine coverage for drugs. It is only one of the powers which the minister is delegating responsibility for, and I must say that this is one of the areas where I do have some serious concerns.

We notice in many of the bills that the government has introduced, in this session in particular, that there are areas where the government is devolving responsibility to groups which are not as accountable as a cabinet minister should be, although I might say in parenthesis, today when I listened in Question Period to

the Minister of Health's (Mr. Praznik) responses to questions about decisions made by the Winnipeg Hospital Authority, I thought that I saw a clear abdication of responsibility for decisions which remain and should remain always with the minister.

I think what we are seeing, and it is a pattern of that kind of activity on behalf of this government, the special operating authorities operate in a manner unto themselves. They may well be operating in an appropriate manner, but what they have become is much more distant from this Legislature, much more distant from the full accountability which Manitobans have the right to expect. I think the Minister of Health is going to find that as he moves along in this direction of abdicating and avoiding responsibility for the decisions reached by the Winnipeg Hospital Authority.

So, in this bill, Madam Speaker, Bill 13, I think that that area, Section 4 which allows the minister to delegate responsibility to determine coverage, that is one of the key elements: who is covered by such a bill, not just in medical terms but in terms of who within the general population will have access to coverage for certain drugs. So I think that is one area that I do want to alert the government to and to alert this House to, that this is an area I think which needs further discussion, partly because it is an area of general abdication of accountability by the government. If it were an isolated event, I think we might look at it perhaps in a more narrow way, but it is not. It is a general principle and a general approach that this government is taking, and so we have serious concerns and here is a very specific example.

I look forward when this bill goes to committee to discussing that with the people who I hope will come to present and who will give us their advice on the future of this bill. I would hope that those people who do come to offer their advice on this bill are also people whom the government have consulted, because one of the things that continues to appal me about this government—and I will not say I am surprised anymore because I am not; I am simply appalled at the absence of consultation with groups who will be affected by the passage of certain bills. I can give reference, and I will be when I speak on The University of Winnipeg Act later on in this session, some examples of that.

But we could go back to last session—or was it last session but one, Bill 32, the bill which managed to take away \$11 million from colleges and universities by transferring the taxing responsibilities to the individual institutions. That bill was introduced and passed without any reference, consultation, information, advice, acknowledgement of the position that those institutions would find themselves in. Here is a government which is responsible for post-secondary education and did not even have the common courtesy to pick up the phone and call the presidents or the chairs of the board of any one of the six post-secondary institutions in the province, and yet here was a bill which was going to cut them by over \$11 million.

So, Madam Speaker, I do hope that the government has done the appropriate consultation with the seniors groups who have always expressed their concerns about changes to prescription drugs. I hope the government has consulted with the medical profession. I gather there is a fairly close relationship at the moment with the medical profession and this government, and I hope that those appropriate consultations have been done.

I hope that the consultations have been done with the midwives and that it has been done in a formal way so that all of those people who were interested in midwifery and came to make presentations on the bill that the government presented last year, all of them are aware of the changes in this act, for, Madam Speaker, I do not think we can take that for granted with this government, and we want to ensure that that has been done and that those people are aware of the changes and understand their effect upon them.

It is seniors, in particular, Madam Speaker, who I think will be most interested in any change to the prescription drug act. They are the ones who have been most affected, I think, by the availability of a wide range of new drugs, and I think probably all of us being of a certain age perhaps, all of us have family who—seniors' families, who are affected by the expansion in the range of drugs. Sometimes I am not always sure it is for the best, but certainly there are many seniors who have been able to live much more independent lives. I think that probably is the most important thing, their independence and the quality of life that has been able to be maintained by the introduction of a range of new drugs, particularly, I would say, in the area of mental

illness. As we know, Alzheimer's, in particular, and many forms of dementia can be assisted for a long period of time, not forever, but they can be assisted by a number of types of drugs, and it has enabled people to remain at home. It has enabled them to be independent. It has enabled them to live a life that has a much greater quality than would have been thought possible even 10 years ago.

Madam Speaker, we should look in that sense also at the benefits of research. I know that the government—let me put it this way. I know that the government believes and claims that it has continued the policy of Howard Pawley in expanding the role or attempting to expand the role of a generic drug manufacturer and drug research in Winnipeg. I am not convinced that the progress has been as great as it could have been. I am not convinced that the connections with universities have been as well developed as they should have been over a period of 10 years. I am certainly not convinced that the destruction of the Manitoba Research Council and its replacement by an innovation council has been particularly helpful to furthering the cause of research and the extension of research to industrial products as it might have been. I have always thought that that was a very shortsighted and ill-planned move of the government and one which certainly did not benefit the laboratories, the people who worked in the laboratories and the job opportunities that might have been made available to Manitoba students, and which might have enabled us to bring to Manitoba young graduate students interested in pursuing work in well-supported laboratories with an economic and an industrial future.

* (1440)

I think over 10 years the government really has let the ball slip on that. It is true, yes, there is an enormous competition from Montreal, the area of Montreal, the west island of Montreal where the big drug companies welcome Glaxo and Merck Frosst—all have their headquarters. You drive through it as you get into Montreal, and it is building after building, industrial park after industrial park of pharmaceuticals. Yes, it is, from the economic perspective of Montreal, in which I think we all have a great interest and concern for, of enormous benefit. It certainly has been given added advantage by the actions of the federal Tory government of Brian Mulroney.

So, yes, Manitoba has faced competition, but we did, you know, in the 1980s, have a very important centre here in laboratories, in research, in medical facilities. I think the way in which the government has dealt with health, the many changes, the flip-flops, as we sometimes call them on this side of the House, the lack of a clear sense of direction, the many stops and starts, the many turning off of the tap and the turning on of the tap, the instability of a future for those people who are working not just in surgery, not just in family medicine, but those who are working in the research end of pharmaceuticals and the research end of health, those people, I think, are far fewer on the ground in Manitoba than they were.

I remember I used to raise this issue with the Minister of Education when it was Mr. Clayton Manness. I used to get the astonishing reply from him. I would say: why are you not supporting research? Why are you not developing graduate student fellowships? Why are you not putting money into the generic drug industry, as Howard Pawley did? Why are you letting all that fall? Why are you allowing the competition with Quebec to be so overwhelming?

I talked about the advantage of research to Manitoba in bringing in federal dollars. In those days there were some federal dollars to be brought in. There are certainly much less now, and the case might not be as strong now, but Manness was quite dismissive of that. It always surprised me—well, no, it should not have surprised me because Manness did have a clear ideology, a very clear market-driven ideology which said that the private sector essentially was the only game in town and that public money did not matter.

In fact, that was really his answer. I think it was as clear as that. Well, it is only public dollars, he said. It did not matter to him that you could generate with an investment in Manitoba research, in our hospitals and in our research laboratories, that you could generate, with a relatively small proportion of provincial money, you could generate a much greater influx of federal dollars. With those federal dollars would come researchers, people who have the incomes that are going to generate other spin-offs. I mean, I would have thought for a man who believed in the free market economy and who believed in the trickle-down effect, that when you believe that, he might, in fact, have paid

some attention to what his own investment could have generated. But his ideology came first, and his ideology said this is federal money, this is government money, it is not private investment, hence it is not what we are looking for.

So, in my view, Madam Speaker, if you go to the medical research laboratories now, you will find people who are on extremely short-term contracts. You will find people who do not know from one six-month period to the next whether they have a job and they are trying to run long-term research projects that will be of benefit ultimately to Manitoba and to Canada on that kind of basis. They are running those kinds of research programs often with very little new equipment. They are not able to compete, and we saw in the last round of grants from the Medical Research Council as well as the engineering research council that Manitobans are not faring as well as they could have done and certainly not as well as they could have done in the past.

Albeit we know that the federal government has reduced research money in all areas, but even so, one of the things that Manitoba could have advanced upon was the very basic, but more than basic, infrastructure that we had here in terms of knowledge, of universities, of a network of specialists amongst all our universities and federal research agencies that had a presence in Manitoba. We could have made that an important base, but this is a government which has put ideology first and which has chosen not to invest in the same way that we did in the 1970s and 1980s in that area of Manitoba's economy, and we will pay the price for it.

In fact, I would say that in agricultural research we have already paid the price for it. We know the advances that have been made in Saskatchewan. We know that they put money very early into undergraduate degrees in food and agricultural research at a time when we did not have them, at a time when the dean of agriculture was coming begging to the government trying to get a hearing. He came to the opposition because he could not get a hearing. And, yes, now, eight years down the line, the government is listening to those kinds of things. It is listening to those kinds of arguments, but it missed the boat. It has gone to Saskatoon. It has gone to British Columbia. It has gone to Alberta, and the two-tier levels of research that

are occurring across this country are occurring with Manitoba in the bottom tier.

The research council that we had when this government came to power, the research council representation, the research council synergies that were being brought together and being supported by government simply disappeared for the first six or seven years of this government's office. What we saw, in fact, was a council which devoted its attention to other areas, devoted its attention to innovation, as it said, and nothing wrong with that; very useful to focus people's attention upon the role of innovation, particularly at low level and intermediate technology. That is an area that across Canada is attracting attention. But what we saw out of that was one very well-produced and well-written bulletin, document on innovation in Manitoba and nothing else—over 10 years, nothing else. A granting system which was not based upon peer review—but I digress. I should be focusing my attention on Bill 13, The Prescription Drugs Cost Assistance Act. Madam Speaker, you have been very tolerant of my digressions. I appreciate that. I got carried away.

In health care, Madam Speaker, what every report, every royal commission—and there have been a number over the last 30 years. All of them have talked about the importance of seamless service in health care, the importance of having the home care piece, the importance of having a drug piece, the importance of having efficient and well-run hospitals and in some communities, such as Quebec and Saskatchewan and British Columbia, of having well-run and very effective community clinics.

That is one of the ways in which we have to look at Bill 13, that it is one piece of a much larger area of health care. It is one piece, like a number of others, that this government has chosen to reduce. I think members are very well aware, even government members must be well aware, of the impact in the reduction of Pharmacare support on their own constituents, a reduction by instituting a 2 percent or a 3 percent minimum before the 100 percent coverage comes in. That really does have a serious impact, again, particularly on seniors, and those who are about to face, as a result of federal changes and federal cutbacks, relatively well-hidden federal cutbacks.

Those seniors are about to face another large income tax claim upon their incomes.

So those who, 10 years ago, might have thought that they were well supported, well provided for, for their later years, for their post-retirement years are beginning to understand, beginning to wake up to the impact that the federal changes in pension legislation are going to have upon their incomes, and I look forward—I hope the Minister of Urban Affairs (Mr. Reimer) is going to speak on this, although I think it is relatively unlikely. Sorry, the minister responsible for services. I said it is relatively unlikely because I do not mean to single out this minister, and so my apologies, Mr. Minister, on that.

I am not singling this minister out, but so very few government ministers speak on any bill. It was a general application. I would, however, hope and look forward to a Minister for Seniors (Mr. Reimer) speaking on drugs, speaking on Bill 13, and giving us a sense of why it is important to transfer the responsibility for decisions on the coverage of certain types of drugs to a board, which is less accountable to this Legislature rather than to one that is more accountable. That minister, more than others, is responsible for the impact of so many changes, and many of them are federal changes, but not all of them. Many of them are federal, and I am speaking now particularly about pensions and the impact that is having, literally already having, upon seniors' incomes.

* (1450)

So it is not going to be a question of how well you planned 10 years ago. It is not even a question of how much time and energy they, and many seniors do, devote to maintaining their health and maintaining their quality of life, because in many ways once you have passed a certain age, and perhaps I will not say which age that is, but after a certain age it does become the primary task in life, in fact, to maintain oneself and to maintain, insofar as one has the individual capacity to do that, the individual quality of life.

The minister must well know that the seniors' incomes are being seriously affected. Some of them are being affected by changes to CMHC grants or absence of grants, I should say, that the opportunities or the

choices in housing are being greatly reduced for many seniors, particularly those below a particular income level. The minister must be well aware already of the impact on seniors' incomes of the clawback features of the federal income tax, and he must be well aware, from the depositions that he must have received from seniors, of the impact of the expected changes to pensions over the next five to 10 years. I would say that those changes are going to affect everyone in this Legislature as I look around at the general age level, that this is not something which will affect seniors of today.

So, Madam Speaker, that is certainly one area that we are concerned about, the impact upon those on fixed incomes, those who are classified often as the working poor, those who have seniors in their family to look after, those who have to look after children or others who are disabled, all of whom depend upon drugs, not just for survival, but for a particular type of independence and quality of life.

There is one section of this bill that also extends the ability to write prescriptions to midwives, and this, I understand, was what the government had promised over 12 months ago when it introduced, and I might say at long last, the bill on midwives. I remember, I think it must have been before—certainly before the last election—in fact, it might even have been during 1990 when I was first canvassing, and I remember in my constituency a number of people approaching me about the issue of midwives. It is of particular interest to a number of my constituents, some of whom did appear at the hearings on this bill last year. But there I was in the Legislature for five years, Madam Speaker, and never heard hide nor hair of any bill on midwives, and yet there they were. There seemed to be a group of people in Manitoba who anticipated it, if not daily, but certainly yearly.

The government sat on the bill. It appointed committees. It consulted, and fair enough, I would have expected all of those, but seven years later a bill, Madam Speaker? One would have expected that this might have moved a little more quickly, perhaps five years, particularly when Ontario had already introduced such a bill, particularly when Ontario had already shown the way in midwifery and had begun the training program put in place that is one of the first steps that is

required in the introduction of midwifery in Manitoba. In Manitoba, in fact, I believe that we are still some ways behind Ontario. This piece is one small piece of this, but there are many more steps that the government needs to take before the system of midwifery and the full training that needs to go into that will be available to Manitobans.

So that section, Madam Speaker, I think has some merit, much belated, much awaited, and I think when we go to the hearings we may find that it is much welcomed. But there are other parts, particularly that was delegating responsibility, with which I have some concerns, and I also have a number of questions which I want to ask the minister when we get to the discussion in committee about the section which allows the government to prescribe charges for drug companies to have their products covered in the formulary.

At first glance, that appears to be a very unusual procedure. It is not a licensing procedure. It is a procedure, essentially a payment for selection, as I understand it, and I find that a very unusual component of this bill, and I look forward to hearing explanations from the minister when this goes to committee. Thank you.

Madam Speaker: As previously agreed, this bill will remain standing in the name of the honourable member for Selkirk (Mr. Dewar).

Bill 36—The City of Winnipeg Amendment and Consequential Amendments Act

Madam Speaker: To resume adjourned debate on Bill 36, The City of Winnipeg Amendment and Consequential Amendments Act (Loi modifiant la Loi sur la Ville de Winnipeg et modifications corrélatives), on the proposed motion of the honourable Minister of Urban Affairs and Housing (Mr. Reimer), standing in the name of the honourable member for Selkirk (Mr. Dewar). Is there leave to permit the bill to remain standing?

Some Honourable Members: Yes.

Madam Speaker: Yes. Leave has been granted.

The honourable member for Wellington, and I must advise the House that I have received notification under

Rule 38.(2) that the honourable member for Wellington is the designated speaker on Bill 36 and, as such, will have unlimited speaking time.

Ms. Becky Barrett (Wellington): Madam Speaker—[interjection]

All humour aside from my colleagues across the way, when The City of Winnipeg Act, Bill 36, at this session was first announced, I immediately asked and received permission of my Leader and caucus to be the designated speaker, because I knew that it was going to be a very important piece of legislation. “Important” is a word that has both positive and negative connotations, so before members opposite get too excited about our final position on this piece of legislation, keep that in mind, please.

This bill and the context within which it was brought forward deserves and requires a great deal of discussion, and I know that not only myself but other members of our caucus will be speaking to this piece of legislation before it goes to committee and perhaps even after it comes back from committee on third reading.

First of all, Madam Speaker, what I would like to do is to outline the areas that I will be speaking about in my discussions today and as we carry on my time on Bill 36. I am going to provide first, after brief introductory remarks, an overview of the current situation in not only in Winnipeg in the context of where we are at the end of the 20th Century, but also some comments that the minister made in his introductory remarks in introducing Bill 36 for second reading.

I think it is very important that we discuss this bill in the context of Winnipeg today in 1998, over 25 years after the first implementation of Unicity. There are some very positive things about the city of Winnipeg that I think we need to remind ourselves of, and there are also some very negative things about the city of Winnipeg that are also important for us to be aware of and cognizant of as we discuss the elements of Bill 36.

Bill 36 is a culmination, Madam Speaker, of decades of reports on the city of Winnipeg. I do not know the answer to this, but it would seem to me that the city of

Winnipeg has been, along with Toronto, perhaps one of the most reported on communities of any size in the country, partly because of its unique position as the single focus of the majority of the activity in the province of Manitoba. No other province in Canada, certainly none of the 10 provinces—the North West Territories and the Yukon perhaps are different, but of the 10 provinces, no other province has the unique configuration of demographics that the province of Manitoba has and the city of Winnipeg within that province.

* (1500)

In addition to that, Unicity in 1970 and '71 provided another level of uniqueness, if you will, to this situation. We need to go back, I think, in order to thoroughly understand the context within which Bill 36 is presented and perhaps the outcomes of Bill 36, at least from our perception. They need to be looked at, I believe. Seeing as how I have unlimited time, I can do that very thing, and I will.

The next section, after we have gotten a little bit of a history lesson and a historical context, is I would like to talk about the current situation as it relates to the city of Winnipeg in its political component. Earlier I will have spoken about the socioeconomic demographics of the city of Winnipeg, the positives and the negatives. Then I will get into the political situation that resulted in the Cuff report and, ultimately, in Bill 36.

Then, Madam Speaker, we get to probably the heart of the matter, and that is discussion first of the Cuff report. There has been a lot of public information through the media about George Cuff's report to the city of Winnipeg, and the Cuff report led, if not in its entirety certainly in the vast majority of its recommendations, to the request from the City of Winnipeg to the Province of Manitoba that has resulted in Bill 36.

The Cuff report is important not only because it is the genesis of Bill 36 but because of the premises, the ideology, the process and the conclusions of the Cuff report. A report is never just the paper it is written on. A report is always a product of a number of elements that go into it. Consultants' reports, in particular, are

never objective. I will get into, as I said, the premises, the ideology, the process and the conclusions of the Cuff report, and, as I am sure will come as no surprise to members opposite, not very flattering comments about the Cuff report and the whole concepts and processes that engendered it.

Then, next, Madam Speaker, I am going to talk about, within the context of second reading, where we cannot discuss specific sections or items of the bill, but we can discuss the principles of the bill, I will be discussing those principles using the minister's own words and the minister's own framework in his comments of May 6, where he introduced Bill 36 for second reading.

I will be talking about the various elements in Bill 36, within the principles of the elements in Bill 36, again the process that ended with Bill 36, particularly the concept of consultation, a concept which is sadly lacking not only in the Cuff report but in Bill 36 itself. But we will not just be negative, because the government has accused us over the years of being only negative and only criticizing without coming up with constructive options and alternatives.

That, Madam Speaker, is not a fair criticism, I believe, because we have in virtually every area that we have raised, every area of concern that we have raised, provided constructive alternatives in the areas of health care, in the areas of Education, in the areas of Justice, Housing, Family Services, Status of Women, Rural Development, Agriculture, Urban Affairs, Northern and Native Affairs. I am going through the list of the departments. In virtually every department, every area of activity of this Legislature in the almost eight years that I have been a member of this Legislature, we have been very good, I believe, in presenting not only constructive criticism but also constructive alternatives, alternatives that may not have and in virtually all the cases were not accepted by the government, but they were there and, in many cases, those constructive alternatives have been accepted by the people of the province of Manitoba.

There are many examples in many departments, many areas of concern to the people of Manitoba where our suggestions have been greeted and received with a great deal of positive feedback.

One particular area that I will briefly talk about at this point, because it does reflect on the city of Winnipeg in particular, although it is not an issue that is only or solely the concern of the city of Winnipeg, that also is impacted by Bill 36 or the impact of Bill 36 if enacted without—as it stands will have potentially a very negative impact on this.

That is the whole area of youth gang activity. Now, the government has talked a hard line over the years, the provincial government, the federal government as well, hard line about getting tough on young criminals, on dealing with the gangs in the city of Winnipeg, in particular. The results have been all talk and virtually no action. Gang membership has exploded in the city of Winnipeg and it has been an export, albeit a very negative export to many of the communities in the rest of the province of Manitoba, into many of the communities that are represented by members opposite.

The current provincial government does not represent the inner city or many of the older neighbourhoods in the city of Winnipeg. It does not represent at all the North of the province, but it does represent constituencies in the newer areas of the city and the suburbs and the southern parts of rural Manitoba. In virtually every one of those sections of the province and of the city we have problems with youth gangs.

Now, Madam Speaker, in our role as constructive critics and constructive alternative givers, as we will in Bill 36, we have also produced a very good, constructive alternative to the do nothing, words but no actions, talk but no walk, of the provincial government, and that is our Gang Action Plan, which has 18 recommendations. Virtually half of those recommendations deal with the need for a speedy, effective, efficient justice system, and the other half of those recommendations talk about and understand the reality, which is you cannot deal with young offenders, you cannot deal with the problem of youth gangs if you do not deal with the causes that lead young people into gangs in the first place. So half of the Gang Action Plan deals with providing programs, specific programs that have been formulated and used to very good effect in other communities in Canada and across North America.

So, Madam Speaker, the alternatives that we will present, that I will present, in Bill 36 follow along in a

long, honourable tradition of the NDP in opposition in the last 10 years in this Legislature. That is providing good, positive, constructive criticism and at the same time good, positive alternatives to the actions of this government. Those alternatives also reflect the differences in ideology and view between our two parties and our two views of the role of government and what a civilized society looks like.

Finally, Madam Speaker, I will, as all good speeches do, whether my speech is good or not, but the form will conclude with conclusions in which I will recap what I have said in my speech as a whole and hopefully provide some preliminary views on a dialogue that I hope will take place in this Legislature.

* (1510)

The member for Wolseley (Ms. Friesen) touched on an interesting thing when she was speaking about Bill 13, where she said that virtually no cabinet ministers, other than the minister responsible for the legislation in introducing it for second reading, speak on the government's bills. Casting my mind back over the last eight years that I have been in the Legislature, and the member for Inkster (Mr. Lamoureux) has been in the Legislature for 10 years, and the member for Brandon East (Mr. L. Evans) has been in the Legislature for a great many years, 31 years in June, I do not have the historical context that the member for Inkster or, for sure, the member for Brandon East has, but it seems to me that this government does not often debate the legislation that comes forward. Certainly in this session and the last couple, the minister responsible will make opening remarks and then maybe one or two others from the government side will comment.

An Honourable Member: Well, sit down, Becky, and I will get up. Right now.

Ms. Barrett: The member for St. Norbert (Mr. Laurendeau) has issued me an invitation that I am afraid I am unable to accept at this time, which is to sit down and he would get up and debate Bill 36.

I am more than prepared, Madam Speaker, to have not only the member for St. Norbert but the 30, 29 other sitting members of the government to get up and speak on this piece of legislation. I know, historically,

sometimes governments tend not to speak too many times, particularly on second reading, because it is an opportunity for the opposition to put their views on the record. I think that by and large that is not a bad thing, but I think in the case of Bill 36, The City of Winnipeg Amendment and Consequential Amendments Act, it would really be helpful for the people of the city of Winnipeg and the people in the province of Manitoba as a whole to have more MLAs on the government side, both cabinet ministers and upper benchers, put their views on the record on this piece of legislation because it is so critical to the future of the people of the province of Manitoba.

I think that while the Minister of Urban Affairs' (Mr. Reimer) comments on May 6 were very clear and they were very concise, they do not necessarily reflect the view of every other member of the government, and they would not in their entirety because we all, whether we are ministers, upper benchers on the government side or critics in the opposition, represent our own constituencies.

So our focus and our views on an issue or a piece of legislation will all be slightly different depending on where we come from not only personally in our own backgrounds in our own histories but also the constituents that we represent.

So the views of the member for Fort Garry (Mrs. Vodrey) might be slightly different than the views of the member for Springfield (Mr. Findlay). Springfield is not part of the city of Winnipeg, but I used the member for Springfield, because I think that this bill has an enormous impact not only on the voters and the residents of the city of Winnipeg but, by definition, on the residents of the Capital Region, and by extended definition, the residents of the province of Manitoba as a whole because of the unique characteristics of the population and socioeconomic elements in Manitoba.

Madam Speaker, before I get into my brief overview, I would like to say also that in reading Bill 36 and reading the minister's comments and reading the Cuff report, the media coverage and the background material that I have in preparation for this speech, several themes run throughout. I will be reflecting on them as I speak and others of my caucus will follow as well, and I am just going to use the word not whether it is

positive or negative, because I think that will come clear as I speak.

The theme of democracy runs throughout the whole of the history of the city of Winnipeg, the politics, the structure of the city of Winnipeg. Everybody who has ever talked about the city of Winnipeg and how its political structure should be formulated uses the words and the theme and the terms of democracy. Now, our position on this will become clearer as I begin to discuss it, and I believe that my colleague the member for Osborne (Ms. McGifford) has already begun that dialogue with a question to the Minister of Urban Affairs (Mr. Reimer). If he believes in democracy, why is he beginning to destroy it, proceeding to help destroy it? That is the position that we will be taking, that Bill 36 does democracy no good at all.

Another element of democracy, Madam Speaker—and this goes back to the Greek origin of the concept of the western concept of democracy and that is “demos,” the Greek word for “people,” I believe, and the city state of Athens was the first example or the first—the word escapes me—example will have to do, of democracy in action at least that we know of. Perhaps in the matriarchal prehistory there were—and I would assume if it is a matriarchal society, that is, by definition, a more democratic society than what the developed world has come to know, but that I believe is getting far beyond the context in which I want to speak.

But the city state of Athens provided for direct democratic participation by its citizens. Now, one of the problems with the city state of Athens from our time frame several thousand years later is the definition of citizen. We have come a long way, baby, maybe, but in ancient Athens only men were citizens. Only free men who had a certain amount of property, much of that defined as slave property, could vote. But there was the concept of democracy. Now there is still the concept of democracy. We all talk about democracy. I imagine the President of Indonesia talks about democracy. I could go on about examples of dictators who have, over the years and the decades and the centuries and the millennia, said that their reigns were democratic. [interjection] Yes, we did. Thank you. We talked about democracy during the MTS discussions and debate, but that definitely is getting a little far afield.

But the whole concept of democracy is essential. It is pivotal when you are talking about the city, and I think that there are some real problems in this concept, the concept of democracy in Bill 36. As I said, citizen participation going all the way back to ancient Athens—a democracy only works if the citizens are allowed and encouraged to participate. You do not have a democracy if you do not have citizen participation. Now in ancient Athens, those people, those men who were defined as citizens, had direct democracy. They met in the marketplace. They spoke, they discussed, they debated and they came up with an answer.

Town halls, town meetings in New England in the early part of the 19th Century were direct democratic structures. Direct democracy works in a small setting, but in a city the size of Winnipeg, or even much smaller communities, direct democracy is very difficult to achieve. So what over the millennia we have come up with is representative democracy which allows for citizens to have representation so that their needs are addressed or at least recognized. This is a very clear connection and corollary of the whole concept of democracy.

Our position in debating Bill 36 is that the citizen participation element of democracy so critical to an effective functioning government is missing. It has been taken away. It does not exist to the extent that it did before. That is our position.

* (1520)

Then there is another theme, if you will, that runs through this whole discussion. This is a theme also that has been stated in this Legislature time and time again by members of the opposition, members of my party, not just in the context of urban affairs or any other specific thing. It is the whole concept, the whole theme of consultation.

This government in its 10 years has twisted the meanings of so many words, and the whole concept of consultation is one of those words, one of those concepts, that has been twisted, pretzelized if you will, out of all meaning by this government. I am positing today and will show, I believe, through my comments, that the process, not only of Bill 36 but of the Cuff

report before it and of the current situation at City Hall, which is reflected in Bill 36, shows a diminution of the concept of consultation. It may be there on the surface, but in any meaningful way it did not take place.

Frankly, Madam Speaker, if Bill 36 passes, the whole concept of consultation will be further diminished. There will be less need and less ability for the City of Winnipeg to consult with its residents on what is best for those residents.

The timing. Timing is another theme that runs through not only the Cuff report and Bill 36, but going back and talking about the history of Unicity from 1970—and I will talk about the concept of consultation in that context too—but the whole issue of timing is interwoven into this whole Bill 36. It is also connected to consultation because if you do not have consultation, if you do not care about real, open consulting with people, then your whole timing process can be truncated. That is what had happened in the Cuff report and what has happened with Bill 36, in contrast, in sharp contrast with the other reports that had been done, the reports that created Unicity and the two or three other ones that have been done since Unicity.

The timing situation also reflects back, as all of these visions do, all of these themes reflect back, on the concept of democracy. If you do not have openness, if you do not have consultation, if you have a very short time frame for the production of a piece of legislation or a vision such as this one is, then you are subverting the concepts of democracy and citizen participation. The Cuff report and Bill 36, in consultation and in timing, go against, fly in the face of, the other history of the reports that have started from Unicity on to this day. So the government cannot use, well, this is the way it has always happened, when talking about the timing of Bill 36.

Accountability and transparency are other themes that run through this bill and the history behind it. I am sure that the ministers used—after my time is over today, I might just go count just how many times the minister used the words “accountability” and “transparency.” I think Mr. Cuff and the City Council used those concepts too, and, again, these are concepts that this government, over its 10 years, has subverted. There are a number of bills in this legislative session alone that

take away accountability and transparency through the very simple means of streamlining, which means, in effect, taking a decision away from an Order-in-Council and giving it directly to the minister.

Now, that may on the surface seem like a technicality, just as the Minister of Justice tries to tell us that his suborning of the legislation regarding the independence of judges is just a technicality. Madam Speaker, there is a reason for having an Order-in-Council process, and that basic reason is to provide the people of the province with open, accountable decision making.

Now, I imagine that not one person in 10,000 in the province of Manitoba has ever seen an Order-in-Council, and maybe that number would not even know what an Order-in-Council is. An Order-in-Council, however, is the door through which the decisions of cabinet are seen by the rest of the citizens; and, even if they are not seen by anybody else but the opposition members, that at least is a window, sheds light on a decision made by the cabinet.

So if you say that the process for a decision is by Order-in-Council, that means that the minister and the Premier have put their signature to a decision, that that decision is laid out in the Order-in-Council and that it is a matter of public record. When you remove the Order-in-Council process from the decision making, you may be "streamlining" the process, but at the same time you are also shutting the door to an open and accountable government process. When you give the minister, of whatever political stripe that minister is, the authority on his or her own to make a regulation, to make a change that formerly was done by Order-in-Council and is no longer required to be done by Order-in-Council, you shut that door on accountability and transparency and you shut that door on democracy.

Why do you shut that door on democracy, Madam Speaker? Because not only do you have to have citizen participation but, as an element of citizen participation, you have to have an educated citizenry.

Now, the member for Wolseley (Ms. Friesen), our Education critic, can and has waxed quite eloquent on the whole issue of citizen education, of our children and our citizens being educated to be good,

constructive citizens, not educated simply to be cogs in the wheel of a vast private company, not merely to be consumers, but to be thinking, productive citizens. If you do not have that kind of an educated citizenry, you do not have democracy. If you do not have access to information about what the government does, which is what the Order-in-Council process allows, then you have lost a whole bit of democracy, you have lost accountability and transparency. If the minister can make rules and regulations without coming back to the Legislature as a whole for discussion and debate like we do with legislation, or at least without that public notification of an Order-in-Council, then you do not have accountability. Accountability is only effective if it is combined with transparency, citizen participation, and an educated citizenry.

* (1530)

Madam Speaker, you may think that I am going far afield here, but I am not, because there are elements of Bill 36 which parallel exactly what is happening in this Legislature with pieces of legislation, "housekeeping" pieces of legislation. In some cases, these bills are three sections long. They take five inches. But one of the elements of those pieces of legislation is a suborning of the democratic process, and this is what is happening in Bill 36 as well. It is what happened with the debate around the Cuff report. It is what happened with City Council when they engendered the Cuff report, and it is something that did not happen with the other large reports that started with the creation of the City of Winnipeg and have gone through until this time.

So the minister and the government cannot say it has always been done this way in this regard, because it has not. This is a sea change, a major sea change, and it is not something that we should be surprised at, because it is a continuation of what this government has done over the past 10 years.

Transparency, another element that is essential, and I have touched on that when I have spoken about the fact that if you take away the responsibility of the elected representatives, if you take away the ability of the citizenry to see and learn about the operations of government, then you take away the transparency and, again, democracy is held ransom.

Madam Speaker, why do we have a media gallery in this legislative Chamber? Why do we have a public gallery in this legislative Chamber and legislative Chambers throughout the western world? Why do we? Because it is not only a symbol, but it allows for the public to participate in the democratic process. Now, you will not see very often many people in either the public gallery, sometimes not even in the media gallery, but at the very least those galleries are accessible.

Today we have Hansard. We have practically instantaneous reproduction of virtually every word we say here. We have television. We have audio coverage of what goes on in this Legislature. Again, the vast majority of what we say and do here are not words of wisdom, they are not words that will stand the test of time. They are not words or concepts—well, there are some concepts but not words that are going to end up on the next Legislative Building in the province of Manitoba, the way the words of Confucius and Lycurgus and Alfred and Justinianus have ended up on our beautiful Chamber here, but the mere fact that we have and allow our citizens to have direct access to what we say and do in this building as legislators is an essential part of the democratic process. It is what provides the transparency that we require if we are going to have a democratic system.

Finally, Madam Speaker, another theme, and perhaps this along with a theme of democracy is the most important one or the most basic one that runs throughout this whole process, and it really is not a theme, it is a concept and it is the concept of vision. What kind of a city does this government envision as a result of Bill 36? What kind of a city do Winnipeggers envision generally? What kind of a city did they envision when they began the Unicity process?

I would suggest, Madam Speaker, and I will discuss this more thoroughly, that there is a very dark, dark vision that comes out of a thorough analysis of Bill 36 and the process that has led up to Bill 36. It is a vision arguably that turns a blind eye to many of the concepts of democracy, citizen participation, consultation, accountability and transparency. It is a vision again as in many other elements of this government; it is not just a vision that is seen in Bill 36. It is a vision that we have seen throughout the legislative agenda of this government in its over 10 years in existence. It is a

vision that says people do not really know what they want. People do not really know what is best for them. It is not important that people have access to the legislative process, to the governing process. Only certain kinds of people can really govern. The vast majority of people, as I have said before, do not care about government. They do not care about what happens to their communities. It is only people “like us,” that should be given the authority to run the show.

Frankly, Madam Speaker, it is a corporate vision. It is a neoconservative vision. It is a vision that has found credence throughout the world unfortunately today, although there are many places in the world where the pendulum is swinging back or frankly where it never swung in this direction in the first place. The vision envisioned in Bill 36 is not the vision of The City of Winnipeg Act when it first came into being in 1970 and 1971. It is not the vision that if the citizenry of the city of Winnipeg or the province of Manitoba had time to look at Bill 36 they would want for their city or their province or their capital region.

Madam Speaker, as I said, it is a dark vision. It is an antidemocratic vision. It is a vision that I believe very strongly Winnipeggers do not want, and if they had had the ability to be consulted, if there had been transparency and accountability in the process, they would have said no. There is a reason why the consultation process and the timing process of the Cuff report and Bill 36 were as they were. That relates directly back to the vision thing, that is, people are not important. What is important is that our vision of what is right is encoded and carved in stone. We feel that is wrong, that goes against everything that a democracy should say and should do.

So that is kind of the outline of where I will be going in my comments. I would like to begin my actual discussion of Bill 36 and the concept with a paragraph from a man that many of you here will know. If you do not know him by name, you will know him by reputation. His name is Greg Selinger. Greg Selinger is currently a faculty member at the University of Manitoba Faculty of Social Work, works with the Winnipeg Education Centre. He was a former city councillor, and he ran I am sorry to say unsuccessfully for mayor in 1992. I would posit, Madam Speaker, that

had Mr. Selinger come in first in 1992, I would not be standing here today talking about Bill 36. [interjection]

No, no. Let me clarify that for the Minister of Urban Affairs (Mr. Reimer). I would not be standing here talking about Bill 36, not because I would not have been an MLA, but because Greg Selinger as mayor would never in a million years have countenanced this kind of democratic aberration. I think Mr. Selinger's contributions, which are many and will be extensively quoted in my speech, will continue to be very important in the provincial and urban situation. He is a remarkable human being, and he has a way with putting things together.

So what I would like to do is quote the first paragraph of a paper that Greg Selinger presented to a forum held a few months ago, I believe last September, about a retrospective of Unicity 25 years later, and I think his first paragraph sort of encapsulates kind of where we are at the end of the millennium.

*(1540)

I am quoting here: "As we enter the 21st Century, effective urban governance will continue to be problematic in a federal state such as Canada. Provincial governments are unlikely to yield the authority and resources that cities need to address the problems they experience. Federal government spending will be targeted to cash credits or transfers directly to individuals and families in order to increase federal government legitimacy with Canadians and to by-pass provincial governments. The corporate globalization agenda will demand tax concessions and greater privatization of services delivered by urban governments. Cities will prioritize their strained budgets to stimulate economic development by attracting new corporate investment. Technological innovations will create job losses as computers displace low-skilled workers. Urban issues such as poverty and inequality, safety and security, inner city and downtown deterioration will lead to exurban citizen flight. As a consequence, healthy neighbourhoods will be difficult to sustain."

Now, in a paragraph, Greg Selinger has beautifully, I believe, summarized where we are today as a city, as a capital region, as a province, as a country. How the

various levels of government, how the nongovernmental multinationals and transnationals, how the globalization concept is impacting on cities, on provinces, on neighbourhoods and on individuals. I could go through every single sentence in this paragraph and show, just through Question Period in this last week, examples of every single thing Greg Selinger is talking about here. I will actually be talking about many of those things in another section.

Another sort of overview is some of the things that the minister said on May 6, when he did his second reading in the Legislature about Bill 36, not the same concept and not a global overview, but a kind of—it sort of sets the tone for what the government's view of the context of Bill 36 is, again using some of those same words that we have been talking about. Here I am quoting: "Bill 36 marks a significant step in the evolution of the unicity model of civic government."

I would say parenthetically, it certainly marks a significant step. I am not sure it is evolution or devolution. It certainly is not convergence; it may be divergence, which is about all I remember from my high school biology. But it is not an evolution. Evolution, to me, says you are moving forward, you are progressing, you are modifying in a positive way the current situation so that you can more effectively deal with the future. That is not what Bill 36 is all about from our view.

I continue with my quotation: "Our community today is not what it was 10 years ago or even 20 years ago." I have absolutely no quarrel with that statement. Our community certainly is not what it was 10 years ago, and it bears virtually no resemblance, in many cases, to what it was 20 years ago. I will give examples of how that is true in my next section. I believe what the minister is saying here, he probably, if he were to expand on that sentence, would talk about the positive things, as the Minister of Finance (Mr. Stefanson) did in his comments in response to its being the child poverty capital of the country. At any rate, we all agree that the city of Winnipeg is not what it was a while ago.

Back to the quotes: "Accordingly, we need to respond to the realities of our times by putting in place a new and enhanced political and administrative organization that can effectively respond to the

challenges of the 21st Century.” We do need to put in place those organizational components, but Bill 36, I am sorry to say, Mr. Minister, does not do that. As a matter of fact, I will go through, in my discussion of the principles of Bill 36, example after example after example of where it does exactly the opposite. Again, we are talking about democracy here. We are talking about citizen participation, or we should be. Bill 36 is the anathema to those concepts.

Now back to quoting: “More than ever, citizens are aware of the importance of good financial management on the part of a government because of the impact it has on their quality of life.” That is true. Now, I am not at all sure what parts of Bill 36 will help to increase good financial management. We can discuss that at more length when we talk about the elements of the Cuff report, but I do not see where in Bill 36 those amendments have necessarily any impact on improving good financial management.

I am back quoting the minister: “Value for money, accountability for decisions, managing performance and long-range planning are the expectations which citizens today have of government.” Now, I mean, I could go on, on this paragraph, for quite a while. Do you know what? You could read this sentence: Value for money, accountability for decisions, managing performance and long-range planning are the expectations which stockholders have of the bottom line for their corporation. It would make just as much sense—as a matter of fact, it would make more sense than this sentence in the context of Bill 36. We are talking about civic government here.

Point of Order

Mr. Gerry McAlpine (Sturgeon Creek): Madam Speaker, on a point of order, this member has been in this Legislature long enough and realizes that all her comments should be made through the Chair. She is in discussion and a little bit of an exchange with the honourable member across the way here.

I would ask you to bring her to order and ask her to make her remarks through the Chair, which is the proper parliamentary procedure.

Madam Speaker: Order, please. On the point of order raised by the honourable member for Sturgeon Creek,

indeed I think most members on occasion get wrapped up in debate and have exchanges across the way.

I would remind the honourable member for Wellington (Ms. Barrett) indeed that her comments are to be addressed through the Chair.

* * *

Ms. Barrett: On this occasion I agree with Madam Speaker. It has not always been the case. I take her admonition to heart, and I hope I do not stray again.

Madam Speaker, I think the point that I was making through you to the minister was that the minister's comments about what the citizens of the city of Winnipeg want go back to what I said earlier about the corporate vision that this government has. Of course citizens want accountability, they want good government, they want long-range planning. But if you ask the citizens of the city of Winnipeg what they wanted, they would say they want my potholes fixed. They want my garbage picked up. They want my city councillor to respond to their telephone calls on occasion. They want to have a sense that the level of government that is closest to them is responding to them. They would not use language like the Minister of Urban Affairs (Mr. Reimer) used in his comments on May 8, corporate language. It again goes back to what I said earlier, that this government has a vision that is corporate and in the extreme.

Again, Madam Speaker, to quote the minister's comments on May 6, he says: “To respond to these challenges”—those are the challenges that he talked about earlier—“at the local level, the structure of the city government needs to adapt to new ways of providing services, need to explore and implement it where appropriate. Essentially, Bill 36 tries to position the city of Winnipeg to function as a first-rate capital city.”

* (1550)

Now, Madam Speaker, none of use would disagree with the words of the Minister of Urban Affairs on May 6. Of course we want to position Winnipeg as a first-rate capital city. But Bill 36, and, of course, we will not get into the details because it would be inappropriate for me to do that on second reading.

Nowhere in Bill 36 does this come through. It does not come through that we are focusing on making it a first-rate capital city. It does not come through that we are trying to respond to the needs of the new millennium. It certainly does not address the needs of the citizens of the city of Winnipeg even if we were to accept what the minister said, which is that the citizens of Winnipeg want managing performance, accountability, and long-range planning.

I agree with those because the citizens of the city of Winnipeg do want accountability, as I talked about in my introduction, and they do want long-range planning. Actually, it is quite remarkable, I think, how city governments actually function because—this is a personal aside, Madam Speaker. I know there are several members of the government benches who have been city councillors in the past—and that is another whole story that we will not get into, the incubator of City Council.

That aside, Madam Speaker, being a city councillor has got to be one of the most difficult jobs in public service, I believe. The people who are the best city councillors, I believe, are the ones for whom—and there are no personal aspersions being cast here—but the ones for whom the city level of government is the most interesting and attractive. I am not for a moment saying, believe me, that former city councillors who now find themselves in the Legislative Assembly were bad city councillors. I do not think any of the members here would disagree with me when I say it is a very difficult job. It really is a 24-hour a day job. Your phone line, if you are good, never shuts up. You do not have the resources you need to work effectively for your constituents, really, because you do not have the kind of support staff. It is a very, very difficult job.

Bill 36 is not going to make it any easier. It is not going to make being a city councillor any more enjoyable, maybe no piece of legislation can. It is not going to make your city councillor more accountable. As a matter of fact, for fully half of the City Council, there will be virtually no accountability at all, but I will get into that in a later part of my discussion. It is not going to provide value for money, accountability for decisions.

Accountability for decisions, Madam Speaker, I must digress a bit. I will get into this in much more detail

later on, but Bill 36, accountability for decisions, half of the decisions of City Council can now be in camera. Just like I was talking before about how legislation in this session gives cabinet ministers, in many cases, and in several cases unfortunately and frighteningly the Minister of Rural Development (Mr. Derkach), the ability to make decisions without going through Orders-in-Council. Good heavens, the Minister of Rural Development seems to have all the power over there already. We are just going to hand him more. It is paralleled exactly in elements of Bill 36. So the minister stood in his place on May 6 and with a straight face said Bill 36 will provide for accountability for decisions. What unadulterated balderdash, if you do not mind the colloquial phrase. I am sure it is probably not on any list.

Long-range planning. Now I know what the minister is talking about here. It is the change in the term from three years to four years, and I will get into that in my discussion of the elements of the bill. Bill 36 does not necessarily provide for better long-range planning. First of all, you have to have good information in order to plan well. We can talk about the role of the board of commissioners, the positives and negatives about the board of commissioners, for a very long period of time.

Frankly, that change to the City of Winnipeg structure was not one that required legislative approval. So that change, the elimination of the board of commissioners and the putting in place of one single chief executive officer, was done at the behest of City Council not requiring provincial approval. But you put that in place and then you put in place some of the other elements of Bill 36, you get exactly the opposite from what the minister was saying was going to happen.

Managing performance. Now, this is interesting. I am wondering if this is sort of another way for accountability to come through here. When you talk about managing performance in the context of Bill 36, boy, that is sure true. Half of City Council is going to be able to manage the entire government of a city of 600,000-plus individuals without any accountability, in many regards without any transparency and without any citizen participation. You can manage performance that way real well.

I mean, democracy is messy. When you have people with rights and privileges, it is messy. Look what

happens in here. This is a messy process. What is the comment? People should not know how sausages and laws are made because it is messy. Madam Speaker, we have all got recent experiences of how messy the process is, but the whole point of a democracy is that you do not manage it to an extreme.

Benevolent dictatorships may be well and good in some contexts, but it is not democracy. I am going to suggest that there are elements in Bill 36 that move us not towards a new and enhanced political and administrative organization that can respond to the challenges of the 21st Century, but there are elements in Bill 36 that are going to move us further along, if not a benevolent dictatorship, then certainly a non-benevolent oligarchy. I do not think any one of us here would say, at any rate, that we would rather have an oligarchy than a representative democratic process and system.

Well, Bill 36 provides basically for an oligarchy. The minister may choose to refute me on this, and I look forward to our discussions at committee. I hope that the minister and members of his caucus put their refutations of my comments and my caucus colleague's comment on the record so that we can truly have a dialogue because, Lord knows, we have not had a dialogue on this whole issue from this part of the process, and that is another element.

Bill 36, far from enabling the City of Winnipeg to function as a first-rate capital city, is going to, I believe, very quickly make it more difficult for Winnipeg to operate as an effective, first-rate capital city. Oligarchies do not do that.

Madam Speaker, I could outline more of what the minister said on May 6, and I will actually when we get into the actual elements of Bill 36. As I said in my opening comments, I will be talking about the structure of Bill 36 using the minister's own structure as a guide so that I do not stray over the line into debating the specifics of the piece of legislation.

Madam Speaker, let us talk a bit about the current situation in the city of Winnipeg. As I said in my opening comments, there are both positives and negative elements to the city of Winnipeg, as there is to every city, hamlet or village.

* (1600)

I think everybody knows here that I am an immigrant. I came to Winnipeg from California in September of 1975, came directly from California. I have lived all over the United States, and my home area is the upper midwest from Iowa to Minnesota to North Dakota, South Dakota and Nebraska. Good Democrat country, as my colleague says.

At the first opportunity, Madam Speaker, like many immigrants to this country, I chose to become a Canadian citizen. I have never, ever regretted that decision, and I do not regret it today, even though I see many negative things happening throughout the city, the province, and the country. But when I compare the problems that we have in Winnipeg, in Manitoba, in Canada, with the problems that face our brothers and sisters south of the 49th Parallel, I figuratively fall on my knees in thanks that we have—[interjection] Figuratively. One of the most positive things, I think, about the city of Winnipeg is its size. Its size is manageable. Here I am using the word that I chastised the minister for using, but I am using it in a different context.

An Honourable Member: Not managerial.

Ms. Barrett: Not managerial, as my colleague the member for Wolseley (Ms. Friesen) said, but manageable. What I mean by that is that we have every single one of the problems that face all urban centres in the world today. We may be on the cusp of this but, up until now, I have always felt that we had the ability and the will to work on those problems. I still think that potential is there. It is not realized in Bill 36, mind you, but the potential is there.

Winnipeg has lots of positives, and this is my point of view. The rivers in Winnipeg are just wonderful. I was at The Forks on the long weekend and could not walk along the riverwalk very far because of the water still up there. I walked across the railroad bridge to Southpoint and stood on that railroad bridge and looked at the confluence of the Red and the Assiniboine. I thought to myself, if you look toward the east, you can see the Southpoint with the trees when you look to the right. When you look to the left, you see St. Boniface, you see the cathedral, the shell of the cathedral and the

riverbank, and it is beautiful, and by and large certainly compared to other major cities, certainly compared to Toronto, for example, it is accessible to the public. Now, if we let some developers have their way, it might not be in the future. But I digress, Madam Speaker.

So the rivers are not only beautiful but they are accessible, and the history—and I will not begin to do the history, because my colleague for Wolseley (Ms. Friesen) could do it far better than I and may actually in her comments do that—but it has been a meeting place for 6,000 years. I have always been of the feeling that The Forks itself, unless we develop it to death, but part of the reason why The Forks has been such a positive feature in the city of Winnipeg is because there is something there. There is an aura there of 6,000 years of meeting place. I walk onto The Forks, and there is something there that speaks to me. I believe it speaks to others as well. We have, with exceptions and certainly have not done the best job in the world, but we do have our rivers, and they are far more accessible than many other rivers in North America.

As the member for St. Norbert (Mr. Laurendeau) pointed out, we need to ensure that those river systems remain ecologically uncontaminated. I would hope that the government would be a little more proactive in that regard than they have been over the past few days dealing with the potential devastating impact of the Devils Lake situation. I know, Madam Speaker, about the U.S. Army Corps of Engineers, and they are virtually unstoppable. Once they get an idea in their head, that is it. But again I digress. Well, no, I do not really digress because if we do not do something about that Devils Lake situation, we are going to have trouble with our rivers, and then one of the positives of the city of Winnipeg will have been diluted and perhaps polluted.

Our location is another positive, and I will give the current mayor of the City of Winnipeg credit for certainly publicizing that over her tenure. I do not think it is any secret that I have no deep abiding love for the current mayor of the City of Winnipeg. I think that she and I have differing views of the role of the mayor and of city government and a vision, and her views, parenthetically, Madam Speaker, are reflected in Bill 36. Consequently, we diverge; we do not converge in

most cases. But the mayor has been able to publicly speak to our location.

Historically, Madam Speaker—and, again, my history is very superficial, certainly in comparison to the member for Wolseley (Ms. Friesen) and probably many other members of this House, because I did not have Canadian history as a high school student. We came very close to having many of our students not have Canadian history, too. It was a close thing. However, we are located, and I believe the little sign is just east—[interjection] It is just west of Winnipeg. It may actually even be in the—is it in Headingley or is it the constituency of the member for Portage (Mr. Faurshou), the little cairn that says we are the central meridian? Right smack-dab east-west. Yes, it is east of Winnipeg? North-south, east-west. One is east and one is west of Winnipeg, but we are right smack-dab in the centre of the continent, both east-west and north-south, whichever one is which.

An Honourable Member: We got your message.

Ms. Barrett: Got the message. Historically, the important one was the east-west one, and, unfortunately, that is the one that is being erased. It is being erased along with that little boundary line on the maps at the 49th Parallel. Erase, erase, erase, we are losing that east-west connection, and that is having a devastating effect on our ability to function as a nation, but, again, that is another whole issue. But, historically, Winnipeg was right smack in the middle of the east-west corridor and was a grain and transportation hub and all of those things, still would be if it had not been for decisions of federal governments and longstanding federal decisions, free trade and North America free trade.

* (1610)

We are also right in the middle north-south, and that is the corridor that the mayor is talking about, that many of us are talking about, that Winnport is an expression of. That is, whether we like it or not, we are moving from an east-west to a north-south axis, so our location is very positive, has great potential. The whole concept of Winnport is very exciting and has great potential. Hopefully, that potential will be realized. I

think we are not out of the woods yet, and there is a long way to go, but the concept is there. It is positive, and it is something that we should be able to work on.

We do need to be sure that we do not lose our identity in this whole north-south axis. We need to be sure again, but then I am digressing to the problems that are inherent in the Free Trade Agreement and the North American Free Trade Agreement. Given our current situation, we are well positioned geographically.

Another wonderful aspect of the city of Winnipeg, and by extension I must say the province of Manitoba—and I would like to state for the public record here that while I am focusing my remarks on the city of Winnipeg because Bill 36 deals with the city of Winnipeg, I do not want to be accused by members opposite or members of the public as having Perimeter mentality or not being aware of what is happening outside the city of Winnipeg. The whole province shares many of the same positives and negatives, to an extent, that the city of Winnipeg does.

But the city of Winnipeg, in particular, has an enormous diversity of population. I believe—and this was when I was researching my last extended speech on the Manitoba Intercultural Council bill that destroyed that excellent organization—that there are over a hundred nationalities represented in the province of Manitoba, and I am convinced that virtually every single one of them is represented in the city of Winnipeg. That is an incredible amount of diversity in a city of the population size of Winnipeg. We are not a big city. We are the size of Dayton, Ohio. We are seventh in population in Canada, and Canada has virtually no population compared to its land mass, so we are a small urban centre, and yet we have people from over one hundred countries in this city.

It is an enormous positive for us to build on. In some ways, we have built on it well. I think Folklorama, everybody trots that out as a really marvellous example of how the diversity of the city of Winnipeg and the province of Manitoba showcases itself. I know members of our caucus, and I am sure members of government caucus, get invitations to multicultural events, and I know the Minister of Urban Affairs (Mr. Reimer) and I have attended numerous same events. It is always a pleasure to connect with various groups and

to realize how wonderfully diverse our province and our city is.

That is a positive. We do not always use it, and there are some concerns with that. I think one of the major problems with our population is the challenges that we face as a society in dealing with our first citizens, our aboriginal communities, who also are very diverse. Within the whole rubric of the aboriginal population, there is a wide variety of cultures and backgrounds and challenges that face us, but we have great potential there if we choose to use them.

Another area that is really very, very positive, I think, is the concept of neighbourhoods. As I said earlier, I come from the United States originally. I come from some small communities and some large communities. I have lived in Chicago; I have lived in Boston; I have lived in San Francisco; I have lived in Sioux City, Iowa; Mason City, Iowa; Des Moines, Iowa; Omaha, Nebraska; Minneapolis-St. Paul.

An Honourable Member: Who were you running from?

Ms. Barrett: Just ahead of the posse.

So I have lived in a range of size of communities, but one of the things that struck me about Winnipeg when I first came here was the neighbourhoods. I think this goes back partly to the fact that before Unicity, there were 13 individual communities there, but I came in '75, so, like, five years after Unicity.

Well, you would expect five years after Unicity, something as huge as the amalgamation of 13 municipalities into one whole, that you would retain your neighbourhood sense, but still, 25 years later, people still say they are from East Kildonan; they are from North Kildonan; they are from St. James; they are from Weston; they are from Brooklands; they are from the west end; they are from Point Douglas; they are from Fort Garry; they are from River Heights; and they are from Crescentwood.

Many of those names you will see on the electoral maps, but people do not talk about them from the electoral maps. They talk about them as neighbourhoods. This confused me when I first started working

in the political arena, because somebody would say they were from Fort Garry, and I would look on the map and say, no, no, you live in Crescentwood or Osborne. They would say, no, no, my neighbourhood is Fort Garry, North Kildonan, East Kildonan, Seven Oaks, the whole thing, Transcona.

Mr. Gerry McAlpine, Acting Speaker, in the Chair

Transcona is a quintessential example, from my view, of a community that still talks about going—people in Transcona still talk about going uptown to the city, to the city of Winnipeg. Geographically, if you look at the Regent Avenue strip, there is a real division there. It is not just crossing the street and there you are.

So this I think is a wonderful thing. Now, granted, sometimes that strength of neighbourhood gives you a certain insularity and isolation. I know some young people my daughter's age who lived in River Heights and had never been across the tracks, across the Salter bridge, across the Arlington Bridge. That to me is a negative to that concept of neighbourhood, where you get so connected into your own personal part of the city.

Geographically, the city allows for that because of the way the Red River runs north-south and the Assiniboine River runs more or less east-west, and the tracks, the CPR line in the north, that huge expanse of property and real estate that sits there just north of downtown, it is a very—I do not know how many government members have actually been across the Arlington Bridge or the Slaw Rebchuk Bridge recently, but if you look out, not if you are driving, but if you are a passenger in a car and you look out, it goes forever it seems like. It is a huge chunk of land, and then on the eastern part of the city there is Symington Yards. There are those sort of—at this point I guess you could call the CPR almost a natural thing because it has been there for so long, but it is not only the natural boundaries. It is also Main Street, Henderson Highway, Waverley, Kenaston now, King Edward. The major arterial regional streets also help divide the city into neighbourhoods.

But it is not just those geographical or physical characteristics, those capital projects that we have put in place over the years that have given us

neighbourhoods. It is also our history. It is the history of people coming to those wonderful, wonderful buildings, the CPR station on Higgins which is now the Aboriginal Centre and the VIA Rail station on Main and Broadway; millions, hundreds of thousands of people coming to Winnipeg for a new life in the last hundred, hundred and fifty years, coming through those stations, and before that they would come by the rivers or they would come overland.

But Winnipeg, historically by its physical location, was a gateway to a new life and a new land for many, many people, and they congregated, as always, in the downtown area. Then they gradually moved out, sort of like the spokes of a wheel moving out. Again, if you look at the elm trees in the city of Winnipeg and you move south—well, if you move south on Waverley from Academy where the trees arch and meet overhead, and you move south of Kingsway, they still arch, but if you move south of Corydon where nothing was built until after the Second World War, they do not arch, yet.

* (1620)

So you can see how the population, as it always happens, moves outward from the centre. Let me get back to the concept of neighbourhood again; those neighbourhoods still, in many ways, retain their unique characteristics. That is a very positive thing, because it is, again, as Winnipeg as a whole is manageable in comparison to New York or Toronto or Detroit or even Minneapolis-St. Paul, the neighbourhoods that make up the city of Winnipeg also provide a smaller universe within which people work and live and play. Now, that is historically; that is ideally. The reality is something different, and when I get to the negatives about the city of Winnipeg, I will discuss those.

Another positive about the city of Winnipeg, and I am saying this on a beautiful May day, and I know we all wish we were out enjoying it—I am not so sure I would say this necessarily if we were here in January or mid-December, but I think a positive about the city of Winnipeg is its four seasons. I am a creature of the upper Middle West. I admit to it; I love the four seasons. I think there are lots of people who do. I think the concept of Winnipeg as a winter city is something we should build on. I do not think we have taken advantage of the concept of being a winter city,

of having four seasons, to the extent that we could. But there are people, and I think we all know them, who have come to the city of Winnipeg in July, even with the mosquitoes, and have said what a beautiful community this is. Everything is in bloom as much as it is in a city this far north; everything is green. The light in the city of Winnipeg is just incredible. It is just remarkable what kind of light we have because we do not have the overwhelming air pollution problems that other major metropolises would have because we have most of our population here, and the rural areas are very close, geographically, to the city.

An Honourable Member: The odd pungent odour of the odd little hog here and there.

Ms. Barrett: Ah, yes, the Minister of Agriculture (Mr. Enns) does raise an interesting thing about not so much the light as the air and the pungent odour of our porcine friends, the odd occasion. But that is something that we should be working on.

In the middle of winter, right after a snowstorm, or a snow, when the trees are all covered, there is nothing more beautiful than to look at our elm trees in the middle of winter when they arch overhead and you see the snow covering them. There are not many cities in this world where we have elm trees.

An Honourable Member: That is why we increased the funding.

Ms. Barrett: The Minister of Urban Affairs (Mr. Reimer) said that is why they increased the funding, yes, but not to the level that it should be, but that again—oh, I have got plans for the elm trees—ooh, good plans. But at any rate, we have positives about Winnipeg in all four seasons, particularly being a river city. You can use the rivers all four seasons of the year, so that is a very positive thing about the city of Winnipeg. Another positive about the city of Winnipeg, and again every one of these positives has a negative attached to it—it is the yin that is positive and the yang that is negative—is the fact that we are the centre of Manitoba.

We are the business centre; we are the cultural centre; we are arguably the recreation centre; we are certainly the population centre; we are the educational centre

because of the way our geography works and the way our population works. We are the sports centre or we used to be the sports centre. Well, I guess we still are. We still have the Moose and we have the Goldeyes, and we have soccer teams and we have a basketball team.

We have world-class cultural events and world-class cultural organizations like the ballet, the symphony orchestra, the chamber orchestras, a number of excellent choirs, and an opera. If you did a list of what things you would want in a metropolitan area, in an urban centre, Winnipeg, arguably, has every one of those things. Now we do not have a major league baseball team and we do not have a National Hockey League team, but we have professional baseball, professional hockey, professional basketball, professional soccer, I believe, on a smaller scale. Again, as I said, the cultural stuff is really remarkable as well. So, again, our scale is small enough to be manageable, but it is large enough to have all of the things that anyone could really want to have in an urban centre.

Again, that is partly due historically to the fact, and geographically, that we are the largest centre between Windsor, maybe, well, eastern Ontario, that whole Golden Triangle and Calgary. That used to be Vancouver. We used to be No. 3 or something. We are not there anymore, but we have a huge geographical catchment area where we are No.1, not only in the province of Manitoba but the whole of from the Canadian Shield all the way practically to the foothills of the Rocky Mountains.

So we are a centre. Unfortunately, we are not as much of a centre in some of the economic spheres as we used to be, and that is due, in a large part, I think, to national and international areas beyond our control perhaps. I have alluded to some of those earlier, the erasure of the east-west line and the focus north-south, and the minute you focus north-south when you are a small-population country as Canada is, the minute you focus on that juggernaut to the south, the minute you really become the mosquito with the elephant.

So a juggernaut is a very, very large entity, the Titanic to a dinghy. So it is more difficult for us to be the centre of something when we are focused north-south and it is east-west. But we can be the northern

terminus of something, and I think that is what we are looking at with Winnport and the corridor, the name of which escapes me at the moment. We have those challenges, but we do have the natural ability or resources to deal with some of those challenges.

However, Mr. Acting Speaker, the reverse of those positives, as is always the case, is some negatives, and I will speak to those extensively. Our rivers, positives, but if we do not watch out, as was mentioned earlier, we have to always be on guard for the quality of our rivers, especially in the spring. We have to ensure that those rivers remain a positive, that they remain— if not the transportation focus that they were 150 years ago, they certainly are a cultural and an environmental resource that we have to ensure is maintained.

Again, we have challenges facing us with those rivers, some of which are not under our control, some of which are. NAFTA, Free Trade Agreement, sale of water, which is the next thing that may be happening, all those extra-provincial challenges, we have to be very vigilant about as members of the Winnipeg community and as members of the Manitoba community.

* (1630)

But there are some challenges, some threats to our rivers that are much more local and much more homegrown, and I speak specifically of the challenges—and this is only one example, and that is the potential for overdevelopment along our riverbanks, not only in the city of Winnipeg—and I referenced The Forks-North Portage, in particular. I am very, very concerned that we are at the cusp with The Forks-North Portage. Right now, we have a balance between open space, green space and development of all kinds whether it is commercial or social like the Children's Museum and the Manitoba Theatre for Young People and The Forks Market which I think has both a cultural and an economic thing, but if we go too far, and we are on the verge of potentially going too far, we are going to see that Forks lose some of its charm and some of its inherent positive stuff, and the rivers around that.

We also outside the city of Winnipeg—and here, again, we get into the whole issue of urban sprawl and regional development—need to monitor how we use our

rivers outside the city of Winnipeg. I think here, again, is where the City of Winnipeg has an important role to play, and the political parts of the City of Winnipeg, and we will get into that, the potential for disaster there as a result of Bill 36 later.

Again, our location is positive, but there are some challenges facing us, as I said, because it is easier to be a centre of a population of 29 million than it is to be part of a population of close to 300 million, but I think we understand that kind of a challenge, and I think we have the possibility and the potential to deal with that.

Our neighbourhoods, as I said, have been in the past a hugely positive thing for the city of Winnipeg because of the diversity found in the neighbourhoods, because of the connection people have had to their neighbourhoods, and not just people who have lived here for generation upon generation. As someone who moved every year and a half for the first 25 years of her life, it was a remarkable thing to me to see people growing up in one house and going to university or graduating from high school and getting a job and getting married or moving out of that house as a young person and moving next door or on the next street by choice. I mean, this was just mind-blowing for me, and that has some very positive parts to it, but the negatives—[interjection]

The member for River Heights (Mr. Radcliffe) says he has the same phone number he was born with. I do not think he was actually born with a phone number, but the phone number—[interjection] We talk about being born with a silver spoon. This is the first time I have heard of someone being born with a phone number.

But the member for River Heights makes an interesting point. I do not know that he means to make it, but I am going to make it for him, and that is that he says he has virtually lived in the same very small geographical area for his entire life, and for someone coming from my background who moved around a lot, if there is a negative to that, it is that there sometimes becomes a certain degree of insularity, that you must get out and see the broader world. [interjection] The member for River Heights says, well, you handle that by travelling.

An Honourable Member: Or reading.

Ms. Barrett: Well, or reading.

The Acting Speaker (Mr. McAlpine): Order, please. The honourable member for Wellington has the floor, and we would ask that all honourable members give her the courtesy of putting the remarks on the floor.

The honourable member for Wellington, to continue.

Ms. Barrett: The whole concept of neighbourhoods is very positive, and I am not going to get into whether you should travel or this kind of stuff, but the negative part of what is happening in the city of Winnipeg is that there are some neighbourhoods that are haves and there are some neighbourhoods that are have-nots. Every single one of us, certainly those of us who represent the older parts of the city of Winnipeg know this is true.

The older parts of downtown are very interesting because, and I will use my constituency as an example. I represent the west end and the communities of Weston and Brooklands, a very diverse set of neighbourhoods, but there are changes happening. There are changes happening within those wonderful neighbourhoods and not all of those changes are good. Those are the kinds of changes that we are dealing with in the city of Winnipeg that have a direct impact on the elements of Bill 36 and why Bill 36, if it is passed, is so frightening to many of us.

We have been talking in this Legislature as long as I have been here and I know longer than that about the challenges facing urban centres. Those challenges have never, I would posit, Mr. Acting Speaker, been more difficult. We have the challenge of poverty. We have the challenge to our education system. We have the challenge facing our justice system. We have the challenges facing our family services system, our community system. We have the challenges facing us in our neighbourhoods, in our long-standing community resources like wading pools, swimming pools, community centres, community recreation facilities. These changes, these challenges have all had detrimental effects on, I would say, every single one of the neighbourhoods in the city of Winnipeg, some more and some less.

The neighbourhoods that we on this side of the House represent in the city of Winnipeg have seen huge

changes and huge challenges at the same time that we have seen a reduction in the resources necessary to meet those challenges. We have seen, as a corollary or as a reason for the reduction in resources, a reduction in the will of the people who have control over these resources to put them into those neighbourhoods, and this gets back to the composition of City Hall as it will be, of City Council, if Bill 36 goes through.

We are, as we have been made very painfully aware of recently, the child poverty capital of Canada; 205,000 people in the province of Manitoba are poor; 69,000 children in the province of Manitoba are poor. The majority of those kids and those families live in the city of Winnipeg, and the majority of those kids and families are two-parent families. A huge percentage are two-parent families and a big percentage of those two-parent families are working two-parent families. The face of poverty in Manitoba has changed; 13 percent of the people on social assistance have some university training—13 percent. It does not sound like what we used to think of as people who are on welfare or social assistance.

Interesting, we can get into a discussion about the language here of social assistance versus welfare, but we have huge problems with poverty, child poverty in particular. They are focused on the inner city, on the older parts of the city, because that is where the housing is that people can afford. In many cases, poor people cannot even afford housing, so they take money out of their food budgets. They have absolutely no recreation budgets, so they are poor in many areas, in many ways, not just poor financially, but they are poor as a result of not having enough money in what they can do.

* (1640)

The member for River Heights (Mr. Radcliffe) was saying the way you counteract having lived in the same neighbourhood for most of your life is to travel. Well, I mean, that is so classic, Mr. Acting Speaker. It is so simple, right? You live in a neighbourhood. The way you expand your horizons, the way you broaden your horizons is you travel. People, poor people in the city of Winnipeg cannot even travel these days within the city of Winnipeg because of the change that the City Council put forward for bus transfers and bus passes.

I can make an argument that part of that is due to the fact the City of Winnipeg is being starved by the Province of Manitoba.

Just parenthetically, two of the people, the city councillors—and this is not the responsibility of the provincial government—two of the city councillors in the City of Winnipeg who represent the poorest people in the city of Winnipeg and two of the poorest neighbourhoods in the country voted in support of the bus pass changes.

An Honourable Member: Who were they?

Ms. Barrett: Councillor Amaro Silva and Councillor John Prystanski.

Mr. Acting Speaker, the bus transfer situation is an example of how important it is to have—how important city councillors are in—[interjection]

The Acting Speaker (Mr. McAlpine): Order, please. The honourable member for Wellington is speaking to Bill 36, The City of Winnipeg Amendment and Consequential Amendments Act. There are members in the Chamber that are making contributions to this debate that have not been recognized by the Chair, and I would ask those members to refrain from making their comments at this time and ask the honourable member for Wellington to continue.

Ms. Barrett: I do think that a lot of the time the dialogue that goes back and forth in the Chamber that is not always caught on Hansard helps facilitate the discussion, but there are times on both sides of the House where the dialogue is not necessarily conducive. I have been heckled by my own caucus colleagues on numerous occasions.

Back to the problem with neighbourhoods today, the poverty statistics are outrageous. We all know, whether we believe it or not, I think we all in our heart of hearts know that the whole concept, the whole reality of poverty has huge implications and ramifications throughout our society. One of those is the whole problem with gangs. It is a problem of resources, the need for resources for public schools. It is the need for community resources to be in place.

Back to what the member for River Heights (Mr. Radcliffe) was saying, you broaden your horizons by travelling, you broaden your horizons by reading. I am sure you would say you also broaden your horizons by going to the cottage in the summer and by going skiing in the winter and by heading south during those awful months that we sometimes have in January and February.

Well, Mr. Acting Speaker, that sense of reality permeates, that vision permeates Bill 36, which is that people have the ability to do these things. Well, some people do have the ability to do these things, and for them travel, reading, recreation are accessible, and they do make for an educated, aware citizen. There are many people in the city of Winnipeg and the province of Manitoba for whom those avenues are closed. That is why the elements in Bill 36 are so essential to our discussion. I will be getting to that at a later date.

But when you have whole neighbourhoods, whole wards in some cases, the majority of the residents of which do not have access to cars, do not have access to enough money to be able to even go to a movie, who certainly do not have access to the ability to travel, as I have stated, even within the city of Winnipeg, but never outside, who have never gone to the Fort Whyte Centre, many of whom—and I mentioned this in my grievance yesterday—kids who used to be able to go on field trips with their schools to the Children's Museum cannot do that anymore because the schools have been cut back, funding has been cut back.

That may not be such a terrible thing for kids in affluent sections of the city, but it is a terrible, terrible tragedy for those children and those families in neighbourhoods in the city who cannot, who do not have the personal resources to be able to engage in travel and recreation and reading.

Reading, libraries—people who are poor need public libraries. In my community, a community of 2,500-3,000 souls bounded by a geographical community where the vast majority of the residents are lower income, many of whom do not have—[interjection] Libraries, something that I, and I think most of us, grew up thinking was a right of every neighbourhood to have. It is one of those things that lead us to having an

educated citizenry. Neighbourhood after neighbourhood after neighbourhood in the city of Winnipeg have had their libraries closed.

Those neighbourhoods are losing those resources. They are losing the ability to provide the resources that kids and families should have in order to be educated, in order to be good citizens of the city of Winnipeg and the province of Manitoba and their country.

Madam Speaker in the Chair

There are other neighbourhoods where the City of Winnipeg is saying: you run your own community centres and your own arenas. Some of these situations are in communities where, again, the parents and the adults in these communities have a hard enough time putting food on the table for their kids, or they have two incomes or two people in the family working, or they are working three or four part-time jobs. This is the challenge facing the neighbourhoods in the city of Winnipeg, and one of the challenges, one of the most important challenges, and one of the reasons why we need a City Council that is accountable, transparent and democratic. If we are going to meet the challenge of our neighbourhoods and access the potential of our neighbourhoods, we have to have accountable, open city government.

Urban sprawl, I am not going to get into that whole issue, because that again is another two or three hours. I am not going to rampage, I am not going to highjack, I am not going to run over or roll over, but one of the challenges, actually I am going to go back a bit to the neighbourhoods and the challenges facing the neighbourhoods before I get to urban sprawl or the challenges facing the Capital Region and Winnipeg's part of it.

I do not know if people saw this but Tuesday of this week in the Winnipeg Free Press in the Focus section there was a wonderful letter or article actually by a gentleman named Brian Mackinnon who was a teacher in the city of Winnipeg. He was talking about the location of the gym for the Pan Am Games, which he was saying was perhaps better focused not at the University of Manitoba but in the inner city.

* (1650)

But some of the comments, some of the reasons, some of his ideas I think bear repeating here, and I am going to quote.

This talks about the current situation in the city of Winnipeg and I am beginning my quotes by saying: "Winnipeg's inner city is one of the nation's worst human centres of poverty and it is dangerously inhabited with angry underprivileged youth, humiliated by poverty." Again, "one of the crucial problems with inner city poverty is that it creates inactivity and murderous boredom that inevitably lead inner city youth to drugs, gangs, violence, even murder—all criminal behaviour in quest of self-esteem and human empowerment."

He goes on to say, and again this relates back to my concerns raised at the beginning of this discussion about the vision thing, that there is a corporate vision that is—[interjection]

Madam Speaker: Order, please. Only one member has been identified to be debating, and that is the honourable member for Wellington.

Ms. Barrett: Mr. Mackinnon goes on to talk about the corporate agenda and, as I referenced in my comments earlier today, the vision involved and embedded in Bill 36 is a corporate vision, and Mr. Mackinnon says: "With the corporate agenda always busy in its narrow self-congratulatory world, it's not much wonder that, as John Ralston Saul suggests, Canadian civilization is in serious decay and that our liberal social conscience is all but buried under the corporate agenda. After all, the corporate agenda and corporate greatness is hardly the sole measure of civilization. The way that we treat our disempowered is a far greater, more critical, measure of how we conduct ourselves as a civilized nation."

I spoke earlier about the words that the minister used in talking about Bill 36, when he is talking about managing performance and using corporate language. I think Mr. Mackinnon, beautifully put, says what I have been trying to say and what we have been trying to say for many years in this House, that poverty is a scourge in and of itself, but even more, it leads to huge problems, and if we do not have an inner city, if we do not have a city as a whole that has all of its parts functioning, then we will not be able to come close to

achieving our potential. As I said earlier, there are many, many positive potential things, positive elements about the city of Winnipeg. We are right, we are this close to losing all that. We are right balanced on the fulcrum and which way is the teeter-totter going to go. Bill 36 is not going to help maintain that fulcrum or is not going to help us balance towards a more positive city of Winnipeg. Bill 36, if enacted, is going to send us down the slippery slope to, as I stated before, an oligarchy, and oligarchies historically have never paid attention to the dispossessed.

Madam Speaker, if we have learned anything—and I think the two meetings that I attended with the minister last week, one was sponsored by a number of organizations, the Council of Women of Winnipeg, the Winnipeg Free Press, the Winnipeg Chamber of Commerce, that had about 150 people attend for a couple of hours to talk about vision for the Capital Region of the city of Winnipeg was an excellent, excellent meeting, lots of wonderful ideas and that meeting and the event the next day, which was a housing forum sponsored by CentrePlan which brought together over 250 people to talk about housing needs in the city of Winnipeg, ostensibly, was another example of people getting together generating ideas and having a wonderful discussion about far more than housing.

Those two events say to me that people in the city of Winnipeg and outside the city of Winnipeg are starting to realize that we are balanced. The future of the city of Winnipeg, and by extension, the province of Manitoba, literally hangs in the balance. We are on the cusp. If we do not make some changes and meet those challenges that we have been talking about today, we are not going to be a first-rate capital city.

What I am saying here today, and what I will continue to say throughout my speech on Bill 36, is that the elements of Bill 36, the vision of Bill 36, the ideology of Bill 36, the process that engendered Bill 36, everything about Bill 36 pushes us closer to the abyss. I know I am using quite apocalyptic language, and I do not think it is because the Titanic has been part of our culture, well, for decades, but for six months since the movie came out, or the Godzilla is coming out this weekend, or Deep Impact was out, or Armageddon is coming, I mean, all of that is happening in our cultural situation.

But what I am saying is that if we do not address these critical issues that face us as a city, and because of our unique position in the province of Manitoba, face all of us as Manitobans, then we will not be able to achieve the potential, the great potential, the almost unlimited potential that Winnipeg has. Bill 36 does not address those challenges. Bill 36 addresses the structures, the political structures, the administrative structures that are going to have to address those challenges. The elements of Bill 36 that titularly address those challenges do not. They are going to, in fact, make the city of Winnipeg a poorer place in which to live, not a better place in which to live.

Madam Speaker, when I continue my remarks next, I will be talking again about a summary of the situation that has led up to Bill 36 from Unicity, and actually prior to Unicity a little bit, and I look forward to being able to begin that part of my speech the next time I have the floor.

Madam Speaker: Order, please. The hour being 5 p.m., this matter will remain standing in the name of the honourable member for Wellington (Ms. Barrett) and the honourable member for Selkirk (Mr. Dewar).

* (1700)

PRIVATE MEMBERS' BUSINESS

Madam Speaker: The hour being 5 p.m., time for private members' hour.

PROPOSED RESOLUTIONS

Res. 32—Health Recap - Where We Are, Where We Are Going

Mr. Gerry McAlpine (Sturgeon Creek): Madam Speaker, I move, seconded by the honourable member for Charleswood (Mrs. Driedger),

“WHEREAS the people of Manitoba have identified health care as a public priority; and

“WHEREAS the Government of Manitoba spends more than one third of the provincial balanced budget on health care—one of only two provinces to devote as much to health care; and

“WHEREAS Manitobans deserve and have come to expect quality health care services in our province; and

“WHEREAS with the reduction of federal funding and advances in medical technology there is an escalating need to re-position the health care system to serve both present and future needs of Manitobans.

“THEREFORE BE IT RESOLVED that this Assembly support the Provincial Government's continuing efforts to preserve and protect health care while spending taxpayers' money wisely.”

Motion presented.

Mr. McAlpine: Madam Speaker, I do want to put a few comments on the record with regard to our resolution that has been put forward today. Health care is a very important aspect of our society today, and it is one that has to be addressed very seriously.

You know, I joined these ranks in 1990 and have seen three Health ministers who have done a very commendable job, very dedicated ministers. Each one of them recognized that this was a very important issue in terms of what this government had to address, not only in putting money into the health care funding, but also to try to do something that was going to improve the lifestyles of all Manitobans and also to be leaders in the health care aspect of all people across this country and be a model for around the world.

Madam Speaker, my concern when I came in here was that—and I used to talk to the Minister of Health on several occasions about this very particular issue. My contention was that none of these ministers were Ministers of Health, they were ministers of disease in terms of treating disease. That is really the approach that we have taken. Certainly, we could not blame Health ministers for that, because I think that what we have been doing up until now is that we have been holding certain people and certain professions as the supreme authority and knowledge when it comes to health care.

What happens, Madam Speaker, is that these people, well-intentioned people, have been trained a certain way and studied many years and put a lot of effort and

invested a lot of money into doing this, but they have not been taught how to create health, and that really has concerned me from the first time that I set foot in this Chamber, because, as a government, we have increased our health care budget year after year after year. We recognized, and this government and the Health ministers under their direction recognized this as well, that we cannot continue just to put more money into the health care budget because it will be spent, not necessarily frivolously but it will not be in the best interests of the patient, which I think is one of the things that we have to address as members of this Legislature in terms of addressing the serious issues that we have as far as serving the health care patients and the health care needs of this province.

Madam Speaker, as early as this year with our budget, a province with just over a million population, this government spends \$1.93 billion allocated to health care, and that represents \$1,700 for every man, woman and child in this province. Almost 35 percent of the budget is spent on health care. Since we came into government, we have spent an additional \$600 million on health care, just to support the argument that I am offering with regard to putting more money in and continuing to put more money into this. That is what we are losing on.

We are not creating the health that should go along with that, and that is the sad part of it, Madam Speaker. That \$600 million represents 45 percent more, and when you consider that the federal government has reduced their spending on health care by 35 percent, those are significant dollars. We talk about, you know, the significant dollars from last year, and to show you where our heart is as far as health care and the people of Manitoba, there is an additional \$100 million that went into health care in the interests of making things better.

Madam Speaker, I come back to what I said initially. We are not winning on that. We are not going to win as a society in fighting the disease, because the disease is going to win. My position is, as a member who has considerable interest and spent some 15 years with that aspect in dealing with treating health, not only for myself but for my family, I have learned a considerable amount when it comes to creating health which I did not know 20 years ago.

I know that today I am in better health and in better condition than I was 20 years ago only because of the fact that I have an understanding of how to create health. Madam Speaker, it is not a matter of putting more money in, as the member for St. James (Ms. Mihychuk) would have me want to believe. The honourable member for St. James has a lot to say, but she is not saying a lot that makes a lot of sense. From the aspect of creating health, I think those are the important issues that I think that we as members should be looking at and not just putting money into this.

Madam Speaker, another thing that I wanted to address was, today, when the honourable minister made the announcement along with the Winnipeg Health Authority, I participated and attended both of those functions, and it involved the CEOs and the chairpeople of the boards of all the hospitals throughout Winnipeg. These are people who have a vested interest in the health care within the city of Winnipeg. After this presentation was made, with the exception of a few questions in terms of what is going to happen in this situation and that situation and just looking at this from their perspective, I had a very strong feeling that they were very satisfied with what the minister and the Winnipeg Health Authority had to say and what they are recommending, because they too recognize that we cannot function the way we did as an administrative body throughout the city of Winnipeg with the USSC and those aspects to deal with this in an individual way.

* (1710)

Years ago, before this minister came along and the Winnipeg Health Authority, we had seven hospitals that were vying for the health care dollars. There were competitions. I do not think when you have got a competition that is taking place that it is in the best interests of the patient, and this minister and this government recognized that. The CEOs and the chairpeople recognized that, too, because they are buying into this. What we are going to do, Madam Speaker, as a government is that we are going to create, in the smaller sense, centres of excellence. We have a population in this city of some 600,000 people, and I daresay that we have got basically seven hospitals serving 600,000 people. That is less than 100,000 for one hospital, and these hospitals are significant capital expenditures year after year.

After this aspect of the presentation to the boards and the CEOs, we had a meeting with a press conference, and it was introduced to the media. I was there, the official opposition critic was there. I did not hear what he had to say, but, I could tell as I was leaving, he was in a bit of an interview that it was not really kind. He was taking an approach that was not indicative of what was intended here as far as the real issues in terms of what we are dealing with and trying to make things better for the patient so that the dollars that we are spending day after day through these administrations can filter through to the patient. That is the bottom line.

It was interesting to listen to the media and listen to the Winnipeg Health Authority again make their presentation because the CEO, Mr. Webster, of the Winnipeg Health Authority and his board have done a tremendous job in terms of what their vision as far as serving the health care patients of this province, well, at least this city. I think that what he did was he asked the people who had input into this whole process.

These are the people who are doctors, they are nurses and they are health care providers. He asked them to stand up because all of these people—and maybe they were not all there, but there was representation there, Madam Speaker, that really had an impact on what I saw. Some 30 to 35 people stood up and took responsibility, and had input in terms of the way this plan was going to work. I think that is really important to come to this with the information. These people are on the front lines. They are the people that deal with this every day. They are the professionals in the health care industry. Although we all have our own visions and views as far as health care is concerned, we can by no means consider ourselves professionals in terms of what we are doing.

Madam Speaker, I think this resolution, although it is not specific in terms of what I am addressing here, there is a message here that all members of the this Legislature should support. They should support it with enthusiasm, dedication and commitment. It is a commitment not only to their constituents, but to all people in Manitoba because that is what we are talking about. So I would ask all members to support this resolution, take the high road in terms of serving Manitobans, and let us work together on this because

throwing money into this, as the honourable members across the way have demonstrated to me, is not going to work.

So, Madam Speaker, I want to thank you for the opportunity to place this resolution on the floor today, and ask for the support of all honourable members. Thank you.

Ms. Diane McGifford (Osborne): Madam Speaker, I found the remarks of the member for Sturgeon Creek (Mr. McAlpine) rather curious. He has rather a pessimistic view, I think, of health care. I think he told us that disease was going to win, and I do not share his sense that disease is going to win. I am not sure what disease is going to win, but anyway he seemed to be very concerned with this, and I found it curious. It is not something that I really support.

I notice that the resolution talks about continuing efforts to preserve and protect health care. It would seem to me if the current efforts to preserve and protect continue, we are in dire straits indeed, so I certainly could not support that part of the resolution. The majority of Manitobans, I think, agree with me, judging from the phone calls that come to my office, the phone calls that came to the 1-800 line we had set up, and the phone calls that come to my colleagues on this side of the House. So "preserve and protect," I do not think so.

I also found this resolution to say—

Point of Order

Mr. McAlpine: Madam Speaker, I think it is expected that, when honourable members are referencing any comments that they are making, they do so with the greatest accuracy. The honourable member has suggested that there are many phone calls. I think that maybe the honourable member would like to make a suggestion in terms of actually how many calls she has had because she seems to—I think that is misleading, and that you should call her to order, and maybe suggest that she be given the opportunity to tell how many calls she actually has received.

Madam Speaker: Order, please. The honourable member for Sturgeon Creek did not have a point of order.

* * *

Ms. McGifford: Well, I will not speak on the same point of order, but I would like to point out to the member opposite that people probably do not phone him or his colleagues because they are doing such a poor job. Most of the calls come to this side of the Legislature, so if the member opposite is not getting calls, I think there is quite a logical explanation.

But to proceed, I notice that in the Order Paper this resolution was described as Where We Are, Where We Are Going, and one of my colleague's remarks that it would make sense to us if there were questions marks after each of those statements, because we are not sure where we are with this minister as regards the health care, and we are not sure where we are going, so I admire the courage and the temerity of the member opposite for even putting forward this resolution.

*(1720)

Now, where are we? Quite clearly, we are in a mess; we are in trouble. If anyone wants corroboration on this, ask people living with hepatitis C in this province, ask people who are not getting compensation, ask people who have been able to take advantage of the breast care clinic at the Misericordia Hospital and no longer will be able to do that.

An Honourable Member: Ask those going down to Grafton to get a test done.

Ms. McGifford: Exactly. As to where we are going? Who knows? As far as we have been able to discern, as far as we heard the Minister of Health (Mr. Praznik) describe in this House, there are not any plans for where we are going. We know that Manitobans are going to Grafton, North Dakota; we know they are going to the Mayo Clinic; we know some are going to Alberta from time to time; and some are going, as the member for St. James (Ms. Mihychuk) tells me—I should not say going—some are in the hallways of Manitoba hospitals—enormous numbers are in the hallways of Manitoba hospitals.

Madam Speaker, during Question Period today, I think some very interesting statistics emerged, and I would just like to bring them to the attention of

members opposite. We learned that, since the 1990s, 1,500 hospital beds have closed. That is a lot of hospital beds, but it is all right because today the Minister of Health announced that he is going to open 28 new ones. It will not really put a dent in the thousands that have closed.

We have also heard today that, I believe it was, 1,500 health care workers had been laid off, including 1,000 nurses. I think it was in 1993 when the health care in the province was in such a shambles that the member opposite, the member for Brandon West (Mr. McCrae) was called in to take over that ministry. Unfortunately, he got himself into a bit of hot water over emergency wards and one thing and another, and so we have another new Health minister, kind of the same rotation that we see taking place in Education, the revolving door Health minister syndrome in the Province of Manitoba.

Madam Speaker, today we heard that there are 8,000 Manitobans waiting for ultrasound, that this is the highest waiting list in all of Canada. We learned today that there were 4,500 Manitobans waiting for a CAT scan. Now, despite these statistics, we have a minister who takes no responsibility. He today blamed this situation on the Winnipeg Hospital Authority. This, of course, was absolutely predictable. When we discussed the bill last year that created hospital authorities, we predicted again and again that what the minister would do would be to pass the buck; and, when the health care system was in a state of chaos, he would simply blame these hospital authorities or regional authorities, which is what he did today.

Now, I understand that at the press conference where the Winnipeg Hospital Authority announced its priorities, the Minister of Health (Mr. Praznik) made sure he was on the platform and got his face on the news for tonight, but, yet, when it comes to accepting responsibility, it is somebody else's problem. So, as I said, the minister said today that he was not responsible. He also said today, and I thought this was interesting, that he would not trust the member for Osborne to look after the breast care centre in Misericordia Hospital, and I would like to tell the minister, in return, that we do not trust the member for Lac du Bonnet (Mr. Praznik) with our health care system.

The statistics that I quoted simply are just glaring testimony to the fact that this is a minister who is not really doing his job. The worst waiting lists in Canada, people lining our hospital hallways, this is not our idea of quality health care—hiring private nurses, getting less care, a terrible situation.

Let us just take a look at some of the other losses since the early '90s, some of the other drastic changes in health care, Madam Speaker. Think of the changes in Pharmacare. Drug after drug has either been dropped or is not part of the formulary. This is particularly a hardship for the chronically ill, for those who are in acute pain, for the dying. It is particularly a problem for the elderly who simply cannot afford the medications that they need. It is a terrible situation—diabetics, as I said, particularly stressful for the chronically ill.

One of the other innovations was the \$50 charge for eye care applying, I believe, to those between 18 and 65. This, of course, means not only a hardship for families. The working poor, I think, will particularly suffer here, and it means, I think, Madam Speaker, it is bad news for women because mothers will forgo the care and treatment they need in order to leave the \$50 in the family coffers so that this money can be used to buy their children clothing, food, school supplies, whatever. So free eye examinations for all Manitobans was an excellent idea, and I am very distressed to see that that has been changed.

Of course, some of the other problems in our health care are long waiting lists for surgery, major delays for all kinds of surgery, including life-threatening surgery. Earlier this year I delivered a member's statement concerning a woman who had cervical cancer. The wait went on and on and on, and eventually this woman died before she was able to have the surgery that she so desperately needed.

Now, Madam Speaker, I know that I do not have too much time left, but I did want to turn my attention briefly to Misericordia Hospital, because it is the Misericordia Hospital which is—for a while it will be the Misericordia Hospital—but it is this hospital that has been decimated by the announcements today. The Misericordia Hospital recently put out a pamphlet. I know the member for Sturgeon Creek (Mr. McAlpine)

will be very pleased to know or not so pleased to know that this particular pamphlet has engendered many, many calls to my constituency office. If he wants a head count, I can supply it to him at a later date.

One of the sections in this pamphlet is titled What We Will Lose, and what we will lose includes the province's only comprehensive breast cancer care program, that program gone; second, Manitoba's busiest plastic surgery department, which is home to seven out of 12 Manitoba plastic surgeons; third, a world-renowned skin diseases research unit. [interjection] Well, the member for River Heights is speaking about Misericordia Hospital. I do not think his constituents would be very pleased to know his position on the closure of all these very valued services in the Misericordia Hospital. I think some of his constituents use that hospital on a very regular basis.

But anyway, to continue, Madam Speaker, what else will we lose? A centrally located acute care facility for Winnipeg, leaving the city centre unserved.

Fifthly, emergency patients will be forced to go to other hospitals, which are already overloaded. In other words, the emergency room.

Last, 224 acute care beds will be gone from an already overcrowded system. We did note earlier that the minister is putting 28 beds back into the system, and here he is taking out another 225.

Madam Speaker, in closing, I do want to say once more that I cannot support the "efforts to preserve and protect health care" because I think the efforts to preserve and protect health care have been absolutely disastrous and have only harmed health care in this province. With that, I will allow one of my other colleagues to address the resolution.

* (1730)

Mr. Peter Dyck (Pembina): Madam Speaker, I guess I am somewhat dismayed, but I thought the members opposite would fully support this resolution. I know the point that we want to make is the most efficient use of existing resources while maintaining our high quality of care makes good sense to me. So I would think that this would be the best way to go in supporting this resolution—

An Honourable Member: Like having people in the hallways. They like it out there, do they not?

Mr. Dyck: Yes, the member for Concordia (Mr. Doer) was talking about people in the hallways. I am pleased that he is giving me this opportunity to speak on that issue, because absolutely right, when I was out there and I was visiting some people there—in fact, it was my father-in-law who had had his hip replaced—the staff was just very courteous to them. [interjection] Oh, I have to answer that question later; I want to finish first on this issue.

Certainly, the people that I talked to were in the halls because they chose to be there. They want to have a different view. After all, the four square corners in the room become a little monotonous after a while, and so the staff was very accommodating and helped them to move out into the hallways. I think the member for Concordia does not get around enough, that he knows what is taking place. So I do not think he is in touch with what is happening out in his own community.

Madam Speaker, I would like to talk about some of the good things that are happening in the Pembina constituency. I know I have an opportunity to do this on a daily basis, but somehow never run out of all the good things that are taking place out there. Today I would like to mention just a few of them.

This coming Sunday, in fact, we are having another ribbon-cutting. It is taking place at the Eden Health Care facilities. They have just completed a renovation. This is in Winkler, yes, the Eden Health Care facilities. [interjection] The Garden of Eden, as one member has very appropriately said. Certainly, it is a very, very lovely facility. They have remodelled it; they have refitted it. So we are going to be doing the official opening on Sunday.

Also, Madam Speaker, because the use that is out there for the facility, the community, the Eden Health Care facilities have expanded. They have, in fact, opened up a brand-new office area. This will be something where they can accommodate more of the staff who are looking after the needs of the community.

Eden Health Care facilities, the health unit, service a wide area. There are people who come from across the

southern part of Manitoba and come to the facility and are helped there. In fact, good friends of ours, their daughter came out from the Boissevain area and received care. Certainly, they were very appreciative of the work that the facility is doing.

So that is one of the areas that I would like to talk about. Another one is Boundary Trails. The member for Concordia (Mr. Doer) asked me about where we were at with our new facility, Boundary Trails. We expect that we will be starting to put concrete in the ground in November and—[interjection] Madam Speaker, I could not hear myself talking, so I needed to talk and stop momentarily. Boundary Trails we expect we will be doing the sod turning in the very latest in November. So this facility is going to be a 94-bed hospital. It is going to be a regional hospital. What is taking place is that we are closing down two hospitals, the one in Morden and the one in Winkler, and we are going to have one regional hospital. Again, this is a facility that serves a wide area. It is not only those two communities, but we have people coming from further west, and, of course, north and east are serviced there as well.

It is going to be exciting to see something new. I guess the members opposite are very afraid of change. They want everything to stay the way it is. At least that is the impression that I was getting from the member for Osborne (Ms. McGifford). You know, keep everything the way it is and then all will be well. Well, I would suggest to you that in southern Manitoba we are open to change. Certainly the change needs to be monitored, it needs to be regulated, and that, in fact, is taking place. So we are looking forward to what this new facility is going to be able to offer to the community. We hope that within the near future we will be building and, of course, as quickly as possible that we will be able to open that facility up as well.

Madam Speaker, I just want to touch briefly upon the contribution policy. I think this is something that we are looking at when we talk about maintaining our facilities and also the communities' input. I think it is a very workable policy that we have established where 20 percent is put in by the communities, but certainly the modification that has been made on this is where the money is put up front that only 10 percent needs to be put in. So in our case it is going to be a \$6-million

contribution from the community. Just talking to the municipalities, it looks as though the amount that they will be putting in will be \$3 million right at the outset, and so therefore their contribution is in place.

Madam Speaker, at the end of the day I suspect that if the communities are going to be using that avenue of putting money into their projects that, in fact, it will be less than it was originally, but I also feel that this is a way where the communities—it is a much more defined approach where it is 20-80. You are not looking at all the little different areas that used to be involved when Manitoba Health was involved in setting up a project. So I support the move that our government has taken, and I believe it is something that is very workable.

Also, the fact is that for a 10-year period, once the \$6 million, that cap has been reached, for a 10-year period the communities will then have to put in their contribution. As will be in our case, we need to continue to build personal care homes. Our contribution will have been in place. So I believe that this is definitely the right move for the area.

Talking about using the resources within the area, I would like to touch on another one of our facilities, and that is found in Manitou. Several years ago the community, together with the health boards, made a very good change where they, in fact, built or they added a hospital to the personal care home, and now they are able to share the staff within the personal care home and in the hospital. Being a small community, this is a very, very workable situation.

So I believe that they are using their staff wisely. They are being resourceful in what they are doing and something also that the community is very appreciative of. Being a small community, they realize that they cannot have all the services. There, again, this is what I see taking place within the province, where we are defining areas. You know, not every town and not every municipality can have a hospital or can have a health care facility, but we are defining them and we are watching to see where people travel to, and, with that, the RHAs are then determining where the facilities should be located.

In the southern area, I believe it is working well. Certainly it is not without concerns, but I believe it is

working well and, within time, I expect that we will see the systems there available to all the people.

I did want to mention my honourable colleague here for Sturgeon Creek. This is just reverting to some of the things that the member for St. James (Ms. Mihychuk) was saying, and also the member for Osborne (Ms. McGifford), regarding the comments that the member for Sturgeon Creek (Mr. McAlpine) made regarding the health and a person keeping healthy. I know, and the member shares this with me occasionally, in fact he was telling me that this week he has already run 20 miles. He runs five miles a day, and I would challenge the member for St. James to try and keep up with him. She was challenging and wondering about his physical fitness and certainly—

An Honourable Member: I am running in the marathon.

* (1740)

Mr. Dyck: Oh, the member for St. James (Ms. Mihychuk) is running in the marathon. That is admirable, absolutely.

I believe that our member for Sturgeon Creek, fondly known as Dr. McAlpine, you know, certainly is a physically fit person. So I just want to commend him for the work that he is doing.

So, Madam Speaker, just in support of this resolution, I believe that we need to continue to be efficient in our use of our health care dollars. As the member mentioned, we are going to be spending \$1.9 billion, \$1,700 for every man, woman, and child within this province, an awful lot of money. Certainly we want to spend money on health care, but I believe there are also better ways that we can spend it in the sense that it would be—I think we have another resolution on the floor which says we should do away with all health care facilities if every person would keep himself healthy.

An Honourable Member: My family does not spend \$1,700.

Mr. Dyck: See, the member for Sturgeon Creek (Mr. McAlpine) mentions that his family does not spend those dollars. We should have them available for those

who need it, but if we would all look after ourselves in a proper way, I believe that we could spend fewer dollars, and then our health care would not be taxed to the limit that it is taxed today.

Madam Speaker, I support this resolution. I certainly want us to have quality health care within the province but also want us to be resourceful in our spending and to spend our dollars wisely. The dollars that we are spending are hard-earned dollars. These are tax dollars and I think that we need to be good stewards of that.

So with those few words, Madam Speaker, I want to thank you for the opportunity to put these comments on record.

Ms. Rosann Wowchuk (Swan River): Madam Speaker, I, too, want to put a few comments on the record as far as this resolution goes, and I have to say that in listening to what the two members from the opposite side have said about what this government is doing with health care, you would think that everything was running along smoothly, but if they would actually get out and listen to what people are saying and listen to the public, they would realize that there are very serious concerns about the way our health care system is being handled in this province, and people are very upset with what the government is doing.

The member who just spoke said we cannot keep things the way they were. Of course, New Democrats realize that you cannot keep things the way they were, but how can we possibly support changes this government is making that rather than being positive changes are negative changes. The changes that have been made, the reductions in services in health care are not in the best interests of people. So it is very difficult. Nobody wants things to stand still, but what we want are improvements, not have services taken away.

It was with interest that I listened to the comments from the member for Sturgeon Creek (Mr. McAlpine) saying that disease is going to win and the other member also talked about our having to keep ourselves healthy. I believe that we do have to keep ourselves healthy. We have to look towards preventative health care and things, but you know, Madam Speaker, not everybody has the good fortune to be able to spend the

resources that some people may have to keep themselves healthy.

What we have to look at is how do we keep a community healthy. How do we address this fact that there are poor children in this province who are not eating properly? If you are not eating properly, you are not going to be healthy. How do you address the fact that there are hungry children? They go to school without having had breakfast. Those children are not going to be healthy. How do you address the fact that there are many children in northern and remote communities that do not have the services that they need to keep themselves healthy?

The government has to take a lot of steps to address those things and work towards building a healthy community. If you have healthy people, then you start taking the steps towards preventing the diseases. [interjection] The member talks about giving everybody a job. I know many people in rural Manitoba and in northern Manitoba who would want to be working but do not have that opportunity, but it is much more than that. There are children, whether their parents are working or not, if they had a job they would be able to buy food, but Manitoba has a very bad record. We have some of the poorest children in the province. Those are the things we have to address.

We have programs that could have been improved on, but instead of improving them, the government took them away. We had the rural Children's Dental Health Program, a program that was preventative health and was a very successful program in having young people have healthy teeth and talked to them about good hygiene, but the Conservatives took that program away. We had free eye examinations for all children. Again, if you find the problem early enough, you can take preventative measures. That program was taken away.

The member, by putting this resolution forward, is saying that he supports those kinds of things, the things that would keep people healthy. He supports the actions of this government. The Pharmacare program, now we do not want everybody on high doses of medication, but there are people who do need medication who cannot afford it. [interjection] Now the member wants us to talk about the good things. I would love to talk about the good things that have been

happening, and I have to say that when I look at my constituency I am not sure where the good things are. I remember the one issue of the children's ward in the hospital being closed and moved into a very small area. It has been renovated now, but again the services for young children in hospitals have been reduced.

So, Madam Speaker, I would have to say that, when I look at the record of what has happened in the last 10 years under this government's administration, there are not improvements to health care. We have seen losses of beds, cutbacks in beds, nurses who are burnt out because they cannot keep up with the workload that is being imposed on them, waiting lists for testing worse than in any in the country for diagnostic services, 8,000 people waiting for ultrasound, over 4,000 people waiting for CAT scans. Surely a government can do better than that. Surely, by doing some planning, better services can be provided. But a government as this one has cannot make promises and then change their minds after the elections, and that is what we have had under this government.

A few things that they did, Madam Speaker, as I say, that cause us concern are their announcement in 1995—

Point of Order

Mr. McAlpine: Madam Speaker, I am really having difficulty with what the honourable member is putting on the record. Maybe the honourable member could take a little bit of advice. The start of a good health care program and treating health within oneself starts with a good attitude, and the honourable member does not appear to be getting that message. I think she might want to address that issue.

Madam Speaker: Order, please. The honourable member for Sturgeon Creek does not have a point of order. It is clearly a dispute over the facts.

* * *

Ms. Wowchuk: Madam Speaker, I am surprised that the member from Sturgeon Creek would even get up and make such comments trying to educate people on this side of the House about being healthy. I think that if he was really interested in the health of the community, he would make an effort to encourage his

government to get its blinders off and look at some of the poor people that we have in this province, in the core area, in the North, and right under our noses we have many poor people.

Maybe he would take the opportunity to start encouraging his government to put forward programs that would help people understand that they have to be healthy, and maybe he would also think about encouraging his government to do some positive things that would allow these people to get to have a job and have the opportunity to provide for their families.

These are the kinds of things he should think about rather than getting on some high horse that he is the healthy one here, and he knows all about it, and he is going to educate people. Well, if you really believe in keeping people healthy, then do something positive for them and provide them with the needs that they have. Provide them with dental service, with eye care. Do not make them have to worry if every night whether there is food on their table or not.

This government should be ashamed of their record that they have of having some of the poorest poor people and having the worst record, as far as I am concerned, about destroying health care in this province. It is not a good record, and he should not try to defend a government that is responsible for some of the worst waiting lists, a government that is responsible for people having to lie in the hallways. To defend a government that has not lived up to its promises on personal care homes is absolutely disgraceful, and I would be ashamed to put forward a resolution that says that what they are doing in this province is good, because what they are doing is a disgrace, and he should go back and start thinking about what he really wants to say about how we should be building a healthy society.

* (1750)

There are people all across the province that need help. There are people all across the province that need medical services, and not all diseases can be controlled by taking herbs and medicines. There are people who unfortunately have diseases. There are people who have cancer. [interjection] Yes, that is right. We talk about herbal treatments. Not everybody can afford

them. We do not have that. That is not a covered service. So, you know, I wish the member for Sturgeon Creek (Mr. McAlpine) would just put his actions on the record. That is a very sophisticated action by someone who is supposed to be representing the people.

But, you know, Madam Speaker, this government was quite prepared to spend millions of dollars to bring an American into Manitoba to tell us how to save our health care system and, although they spent \$4 million of taxpayers dollars to have this study done, it has done nothing to improve our health care system. Although they make all kinds of promises pre-election, they certainly have not lived up to those promises.

There are many things that they have done, so I am just quite surprised that the member would put forward a resolution like this and make those kinds of comments that disease is going to win if we do not start to look after ourselves. Disease is going to win for those people who have diseases but are not getting the services. Disease is going to win in those people who have to wait for ultrasound, people who have to wait for CAT scans. Disease is going to win in women with breast cancer because this government is dismantling breast screening and dismantling early diagnosis.

So this government has a lot to reckon with. They are responsible for a lot of very difficult things that people have to face because of what they have done within the health care system. There are things that you can do much better. There are much more preventative steps that we can take, but help the people do it.

Madam Speaker, this member's government is not doing it. They have not done a good job, and there is no way that we can support a motion that would say the government has been doing a good job. Thank you.

Ms. MaryAnn Mihychuk (St. James): I appreciate the few minutes that I have to put a few words on the record on the motion presented by the member for Sturgeon Creek (Mr. McAlpine), an individual who should actually understand and appreciate the seriousness of health care, because there are more seniors who reside in his riding and the west side of mine than any other place in Manitoba. What they are telling me and what they presumably are telling him is that our health care system is in a deplorable situation,

and they have never seen a darker day and are looking for a future with a new government and a new vision.

Madam Speaker, I would like to go into exactly what this resolution is about. Where are we and where are we going?

Point of Order

Mr. McAlpine: Madam Speaker, the honourable member for St. James has put incorrect information on the record. Anybody who comes in here and has been here as long as the honourable member for St. James knows that when you put something on the record, it is at least supposed to be accurate. What the honourable member is putting on the record is not accurate, and I would ask you to bring her to order.

Madam Speaker: Order, please. The honourable member for Sturgeon Creek does not have a point of order.

* * *

Ms. Mihychuk: Madam Speaker, I thank you for your guidance. The member for Sturgeon Creek (Mr. McAlpine) had his opportunity to put his words on the record. I only have a few moments, and I do want to go through and reflect on this government's mismanagement, which has been clear from the start, when it comes to health care.

In 1995, this government ran on promises, promises, promises, which were broken, broken, broken, in particular, their promises to build numerous personal health care facilities, which caused total incompetence in the health care system, resulting in people having to get care in the hallways, resulting in extreme line-ups for diagnosis, resulting in a number of poor, poor decisions by this government.

Madam Speaker, another example of mismanagement and poor judgment by this government is the decision to close the Misericordia Hospital. The decision to, No. 1, renovate part of the hospital for the tune of a million dollars, that might seem like a pittance to the members on that side, but to the people in my riding, to the people who are in the hallway, to the people that need care, that is an important and significant amount of money that should have been put back into the health

care system. What they have decided—renovate one year, close it down the next year—you talk about mismanagement, that is a perfect example.

Another example of mismanagement, in my opinion, Madam Speaker, is the decision to dismantle the comprehensive Breast Screening Program at Misericordia Hospital—a program recognized as a national example of—an international recognition of a comprehensive program that was there for the women of Manitoba. It is shameful that they have now decided to close that program.

Madam Speaker, where are we? I tell you where we are. I had an example of a young woman who was on her way to Grafton, North Dakota. Why? Because she had such serious pain that the surgeon would not conduct the operation until she received a MRI. The waiting list for the MRI was over six months. With a newborn baby, whom she was not even able to lift, she was forced to go to Grafton, North Dakota, to get the test, which she was able to do. At her own expense, she went down there. That is where Manitobans are going.

Do you know who was operating the MRI? A Winnipegger who could not get employment at our own hospitals because the machines are turned off on weekends and the machines are turned off in the evening and are not providing services to Manitobans. So Manitobans have to drive to North Dakota to get service from a Winnipegger who cannot get employment here where there is the need, where the need is identified, and where this person could find full-time employment if this government looked at a comprehensive and reasonable approach to health care.

Are Manitobans concerned about health care? Overwhelmingly. This government knows it and is desperately trying to put band-aids on a system which they have created to the verge of collapse. Unfortunately, Madam Speaker, it is not sufficient. When you are moving a system that is so important to Manitobans and so extensive and so large, you cannot take out such significant supports and expect it to come around the corner quickly.

Manitobans expect and deserve quality health care, and what they receive from this government is deceit

and betrayal and broken promises, less health care, fewer services for the people of Manitoba.

That is why there is absolutely no way that I or this side could support a resolution which actually that side of the House has the nerve to present to Manitobans. Manitobans know they have had a pitiful record in terms of their management of the health care system. Their management in terms of most issues, including the recent announcement on hospitals, has not been endorsed by the public, has not been endorsed by Manitobans, so for them to come forward with the idea that they have somehow preserved health care—hardly.

What we have seen is a deterioration of our health care system, which has hurt Manitobans in our own families, in our own homes, and probably personally. Many of you, whether you have gone to the hospital yourself or your family has gone, you have seen less

nursing care, less facilities, less diagnosis available, and you know personally that health care has suffered under the Filmon Conservative government.

Your record stands and the people of Manitoba know it, and there is no way that they or our side of the house will endorse a resolution that suggests in any way that there has been a betterment or an improvement in health care for Manitobans. It is absolutely unreasonable that the government has presented this motion and that we would endorse it.

Madam Speaker: Order, please. When this matter is again before the House, the honourable member for St. James will have eight minutes remaining.

The hour being 6 p.m., this House is adjourned and stands adjourned until 10 a.m. tomorrow (Thursday).

LEGISLATIVE ASSEMBLY OF MANITOBA

Wednesday, May 20, 1998

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