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LEGISLATIVE ASSEMBLY OF MANITOBA
Tuesday, April 22, 2008

The House met at 10 a.m.

PRAYER

ORDERS OF THE DAY
PRIVATE MEMBERS' BUSINESS
SECOND READINGS–PUBLIC BILLS

Mr. Speaker: Bill 200, The Waste Reduction and Prevention Amendment Act. Are we dealing with this bill this morning?

Some Honourable Members: No.

Mr. Speaker: No. Okay.

Bill 202–The Health Services Amendment and Health Services Insurance Amendment Act

Hon. Jon Gerrard (River Heights): Mr. Speaker, I move, seconded by the MLA for Inkster, that Bill 202, The Health Services Amendment and Health Services Insurance Amendment Act; Loi modifiant la Loi sur les services de santé et la Loi sur l'assurance-maladie, be now read a second time and be referred to a committee of this House.

Motion presented.

Mr. Gerrard: Mr. Speaker, this bill confirms the five fundamental principles of the Canada Health Act apply in the delivery of health care in Manitoba and adds the principle of accountability as a fundamental principle to be recognized and used in the delivery of health-care services in Manitoba.

In about 2001, the then Prime Minister, Jean Chrétien, appointed Roy Romanow and a number of other distinguished Canadians to a commission looking at the future of medicare in Canada. Roy Romanow reported back in November 2002 and recommended that we include the principle of accountability in the Canada Health Act.

“Currently, there is no principle in the Canada Health Act that addresses accountability. During the consultation process, Canadians expressed their deep suspicions about the way governments have managed their health-care system and where the money goes.

As the owners, funders, and users of the health care system, Canadians have a right to know how their system is being administered, financed and delivered, and which order of government is responsible for which aspects of the health-care system. A new principle in the Canada Health Act should confirm the importance of accountability in the health-care system.”

This was one of the major recommendations of the Romanow commission. Mr. Speaker, I believe very strongly that we need to have the principle of accountability guiding the delivery of health-care services in Manitoba. That is why the MLA for Inkster (Mr. Lamoureux) and myself have brought forward Bill 202. I should add that this is not the first time that we've brought forth this bill. Indeed, we have brought it forward on five previous occasions for consideration of this Chamber and five times the NDP have rejected accountability in health care in Manitoba. Shame.

Accountability is fundamental because we are talking not only about how money is spent to deliver health care, we're also talking about accountability in terms of ensuring quality, and we are talking about accountability in ensuring that we are drastically reducing medical errors, and we are talking about accountability in terms of a system which actually delivers quick access to the quality care you need when you need it. Accountability is fundamental. That’s what we as Liberals believe and that's what we've been advocating year after year in this Chamber, but sadly we have not received much support from the NDP. We need to ensure our health-care system is of high quality.

It is of interest to note, as Michael Kirby and his group of distinguished Canadians reported, and I'll quote: Unless changes are made to the structure and functioning of the system, no amount of new money will make the current system sustainable over the long term. This is why accountability is so important.

I understand that one of the NDP MLAs wants to fire all the doctors. I'm not sure where he's getting this idea from, but I can–
An Honourable Member: The Member for Wolseley (Mr. Altemeyer)

Mr. Gerrard: Oh, is that the MLA for Wolseley?
That's a bizarre idea. We are talking about accountability, having a system which works for patients, having a system which works for the average citizen. We support the average citizen in Manitoba in getting good access to health care, but you also need a system which works for doctors and health-care providers because if doctors and health-care providers aren't happy providing, are not able to provide quality care, they're not going to be happy.

The NDP government as a whole have not decided on the merits of this bill. Some of the NDP MLAs have provided comments in previous sessions. In 2005, the MLA for Radisson (Mr. Jha) stood up and talked about his brother, a professor of sociology, who died very sadly waiting for his heart surgery. I'm very sad about what happened, and I certainly express my condolences and sympathy to the MLA for Radisson for what he and his family have been through. Certainly, the MLA for Radisson and the experience of his family is one of the reasons why we are introducing this bill, again, on accountability and wanting it to move forward. The health-care system, no matter which party is in government, needs to be accountable.

In 2007, the MLA for Fort Rouge (Ms. Howard) got up and spoke to say, and I quote: No one on this side of the House has any problem with the Canada Health Act, but, as Roy Romanow said in his report, the principles can be improved and we should not hesitate to act to improve the principles on which our health-care delivery system is based.

Let's pass this bill. Let's move it to committee. We want input from and to get input from Manitobans, let's not stonewall it, lets move it.

In 2007, the MLA for St. Norbert (Ms. Brick) suggested that this bill might possibly be redundant. Well, I would argue, and I think most people would appreciate that having accountability is not redundant; it is essential. Romanow and many others have recognized this, suggest it's time to get this bill to committee and have it heard at committee.

*(10:10)*

I should add that there has been one Conservative MLA, the former MLA for Emerson, who's commented on this bill at second reading, and he was very supportive.

Let me move on to some comments from the Premier (Mr. Doer) himself on this bill. In Estimates, September 27, 2007, and you can see the record, the Premier said, and I quote, "I've said before that both myself and the Minister of Health (Ms. Oswald) have looked at the private member's bill and support the principles in it." Well, that's what second reading is about, supporting the principles, and we take that as an endorsement to get this through second reading and hope that the MLAs and the NDP will both look at it in that context.

The Premier went on to add that he and the Minister of Health are doing some due diligence on the law, and that's fine. That was in September, and it's now about six months later. I presume the Minister of Health and the Premier have done their due diligence in six months, and I'm looking forward to their comments. In fact, I specifically gave them notice we were going to bring this forward today so that they would be able to bring forward the results of their due diligence.

An Honourable Member: I look forward to hearing it.

Mr. Gerrard: Yes, and we are looking forward. Indeed, the Premier went on to say, and I quote, "We're looking positively at his legislation," referring to this bill. Well, you know, I mean, hey, the Premier himself is supportive; we just hope the other NDP MLAs who are elected are also supportive. We are looking forward to the discussion and the debate, and we are looking forward to the results of the due diligence.

Mr. Gregory Dewar (Selkirk): The Leader of the Liberal Party just spoke about the need to be accountable, and we agree. We were accountable yesterday, Mr. Speaker, in this House around 4:30 when we all had the opportunity to support our budget or vote against our budget. It's regrettable that the Conservatives and the Liberals held hands, as they often do in this Chamber, because there's very little difference between the two, and they voted against a budget, a budget that is balanced, a budget that cuts taxes, a budget that invests in health care,
infrastructure and education, record levels of investment. They decided to vote against that budget that Manitobans want and Manitobans need, and they expect their elected officials to act in their best interests. Regrettably, the two opposition parties voted against that.

Mr. Speaker, I had a chance here, over the last eight days of debate, to listen to most of the debate whether it was Liberals or Conservatives talking about accountability in health care, accountability in government and accountability in economic management. I had a chance to listen to the Conservatives and the Liberals, especially the Conservatives. I never heard a single Conservative actually defend their poor record on economic management in the '90s, when they were in government, especially when it comes to accountability on health care. They weren't at all accountable when it comes to health care. They laid off, what was it, a thousand nurses; they fired 1,000 nurses. They brought in Connie Curran. That is the Conservatives record when it comes to accountability on health care.

The Liberal leader, of course, when he was in Ottawa, we all know how accountable he was when he was a Member of Parliament for Portage-Interlake, where he slashed millions of millions of dollars out of the health-care budget. So, I don't think his record when it comes to accountability is a very strong one.

We were in the House the other day and I listened to the Member for River Heights (Mr. Gerrard) when he had his speech on the budget. He condemned the government for about a half an hour for being incompetent. Then he forgot to bring forward his own amendment to the budget, and he's scrambling around. Oh, where's my amendment? So we had to, in fact, allow him to bring it in. I'm wondering about whether it was the best thing we could have done either, but we allowed him to bring it in. So we had the great honour of the great privilege of standing up and voting against it which we did just yesterday afternoon.

This is a good chance for us to talk about health care and what we've done in terms of bettering health care for the people here in the province. We know that there are more than 235 more doctors in Manitoba since 1999. There are more than 86 new doctors in rural Manitoba. In fact, the doctor that I go to in Selkirk, he's advertising for patients which is one of the first times, first times, I've seen that happen in our community.

So I think things are improving. I watched a show the other night on where they analyzed the health-care delivery models around the world. I don't know if anybody had a chance to see this. A fellow went to the States and he was in Britain. He went to Taiwan and he was in Japan and Sweden and our system—the Americans, of course, they cannot believe our system. The story was a fellow had his fingers cut off and he had the option of which finger he was going to get replaced. He had two fingers cut off. His middle finger was going to cost him $60,000 to re-attach and his ring finger was going to cost him $12,000 to re-attach. He took, of course, the ring finger because it was less money. So he now lives with one of his fingers shorter than the other, but they could not believe it that they could get that surgery done here in Canada for free.

They interviewed patients in a hospital or waiting room in Windsor and he's going, how much do you think you're going to pay for this? He goes, I don't think we pay anything for this, as far as I know. How are the waits? The waits are half an hour, an hour. Can you pick your doctor? They go, yeah, of course we can pick our doctor. It's amazing. What's your deductible? She says, I don't think we have a deductible.

So Canadians look at our system and they look at the American system and they know that our system is far superior. There's a good debate going on in the U.S. now about health care—[interjection]—there's a good debate going on in the United States right now as this is the presidential year. As I said, nobody will turn to our system because of the big control that the insurance companies have in the U.S. when it comes to—especially supporting all, I might add, all the presidential candidates, including Ms. Hillary Clinton. She receives millions; McCain receives millions and, of course, Obama. They all receive a substantial amount of money from the big insurance companies, and it's reflected regrettably in the way that they view accountability when it comes to health care in the United States.

As I said, there are more doctors now, the rural areas, 86 more doctors. Since we formed government, there's been a net gain of nurses. Now there are 1,700 nurses extra that are working in the province. We've turned around the shortage of nurses in the '90s where over 1,500 were out of the system. We've made a commitment in the last election to hire
an additional 700 nurses and as well by adding 100 new nursing stations over the next four years.

In this budget we've announced, we've committed to hiring an additional 60 technologists and we've currently hired 32.

We have some of the shortest waiting lists in Canada for radiation, cancer radiation therapy, and those which now are at one week and, when we came to office, they were dangerously long at six weeks. That is our government being accountable.

It was reported in The Globe and Mail that Manitoba is a provincial star in its bid to reduce health-care waiting lists. Hip and knee wait lists are down almost 60 percent when we formed government. They've cut the number of patients waiting in half, from 3,400 to just over 1,500 in the last number of years. The wait times for MRIs are down to seven weeks from 28 weeks, and we've added additional MRI machines in Brandon and in Boundary Trails Hospital.

I know, in my own community, we've installed a CT scanner. The machine has been well used. It's one that services the Selkirk area, the Interlake and northeastern region of the province. Now people are able to get this diagnostic service closer to home. As well, it takes stress off the Winnipeg-based machines because, now, individuals are able to get that service in their home communities. We have, as I said, a machine in Brandon, Steinbach, Thompson, The Pas, Selkirk, Morden-Winkler, Portage la Prairie.

Mr. Speaker, I see that my–already, and I just got going and I haven't even begun to talk about all the other major things that we've accomplished, but I see that my light is flashing so I'll yield the floor to another member. Thank you.

Mrs. Heather Stefanson (Tuxedo): I'm happy to get up and put a few words on the record with respect to this bill.

I find it somewhat interesting, Mr. Speaker, that members opposite are a little afraid of this bill because it talks about accountability. Certainly, we see in many aspects of what they do in their day-to-day lives in governing our province that there isn't a lot of accountability when it comes to members opposite. So it's no wonder why they would be afraid of a bill such as this that brings accountability into our health-care system.

Mr. Speaker, I don't think that we, as legislators, should be afraid of introducing accountability. It's really what we're supposed to be doing here is making sure that people are accountable in all aspects of the way we run our lives on a daily basis. Certainly, when it comes to this bill and affirming and putting into legislation accountability within our health-care system, I think we should embrace that.

Do we always need to be putting into legislation things? I think, essentially, what we've seen over the last little while is that we've seen a number of government bills, a number of bills brought forward by the member for the Liberal Party. There's a lot of legislation coming forward that, I often wonder, do we really need half the legislation that's coming forward. I think we need to ask ourselves, is this legislation coming forward because we're trying to get a headline in the newspaper, or why is this really coming forward?

But this, I don't believe, is one of those bills. I think this is one that, certainly, when we talk about accountability in the system, it should go without saying but, unfortunately, I think the Liberal leader is quite right in bringing this legislation forward because members opposite, with the NDP, do not embrace accountability when it comes to things, whether it's in our health-care field, our justice system or whatever it is. I think the Member for River Heights (Mr. Gerrard) is quite right in bringing this legislation forward. I think it's unfortunate that it has to come forward because we should just have accountability within our system, people should be accountable for their actions.

But having said those words, Mr. Speaker, I will sit down.

Hon. Andrew Swan (Minister of Competitiveness, Training and Trade): It's a pleasure to get up and speak on this bill. We now have the Member for River Heights and the Member for Tuxedo who've put their comments on the record. I want to follow the comments of my friend, the Member for Selkirk, who stood up and talked about the issue of accountability. I want to pursue that theme a little bit this morning.

We've just had a budget, budget 2008, which has had further unprecedented investments in our health-care system. In budget 2008, this government invested a further $7.2 million to educate and to hire more doctors, doctors that'll practise not just in the city of Winnipeg but across the length and breadth of
our province in every community, bringing better care closer to home.

This government has provided a further $3 million to increase the number of nurses, health-care aides and allied health-care workers for personal care homes in Manitoba so that our seniors in Manitoba can get the best possible care in their home communities.

In budget 2008, this government has increased nurse practitioner positions for emergency rooms, primary care clinics and acute care settings with a further $1.2 million in funding. I was quite pleased to be the government's representative on a committee of the College of Registered Nurses of Manitoba. I learned a lot more about nurse practitioners, what they can do, what they bring to the health-care system, and I'm quite excited that our government respects their work and is looking for ways, working with physicians not against physicians, with physicians and other health-care professionals, to find more places and more ways that nurse practitioners can fill important gaps in our health-care system.

I'm very pleased that our government is now going to be funding the unique physician assistants Masters program, again finding ways to put more innovative care in more centres across Manitoba, again providing better care closer to home for Manitobans.

I'm very pleased that our government's providing $9 million in new funding for our regional health authorities, for areas such as provincial laboratories, for rural diagnostic imaging, the control of sexually transmitted infections and HIV, for mental health programs and, indeed, for chronic disease prevention initiatives—whole wide range of areas in which our government is not the average, but we are the leaders in Canada at providing better and more innovative health care.

Of course, my friend from Selkirk was too humble, obviously, to admit it, but I'm very pleased that budget 2008 provides more resources for the Selkirk Mental Health Centre. I know the Member for Selkirk is always a very strong advocate for his community and certainly for mental health, and I'm very pleased that there will be more investments going into his community.

As well, budget 2008 has invested $1.8 million more for cancer screening to ensure earlier diagnosis and treatment, and, indeed, since 1999, this government has made tremendous strides at providing better care sooner for those who have cancer.

Our government has also invested a million dollars more to relieve pressures on emergency rooms across Winnipeg and across the province. We've provided $2.4 million for dialysis services in Berens River First Nations—that's in the north for members opposite—for Gimli and for the Percy E. Moore Hospital, which serves the community of Hodgson and Peguis First Nations.

Of course, we also want to work on the preventive side. I'm very pleased budget 2008 provides $2.1 million for physical education in grades 11 and 12. As someone who is a member of the Healthy Kids, Healthy Futures All-Party Task Force, I am very pleased this government is a leader in making sure that our young people learn the skills so they can continue with life sports and physical activity throughout their lives. That won't pay dividends next year or five years from now but certainly in the future will pay huge dividends, many times the cost that we're investing in those programs.

And, as well, we're investing $20 million in the beautiful city of Brandon for a Western Manitoba regional cancer centre, which would really be a beacon for those living in West-Man, too, to get better care sooner.

So my friend, the Member for Selkirk, raised this. It's a matter of accountability. Here are all these investments that our government is making, and yesterday, at 4:30, every member in this House had a chance to be accountable to their own constituents and to Manitobans in general. I'm very pleased New Democratic members stood up in this House and supported a budget that is accountable to the people of Manitoba by providing better care closer to home, sooner, and better, and, unfortunately, the Liberals and the Conservatives stood up and, for their own reasons, voted against it. They will certainly have to answer to their constituents. They will have to answer to people wondering why they voted against more doctors, more nurses and better care.

* (10:30)

Of course, health care has been a major theme of our government since 1999. There have been major capital investments. There have been major investments in health-care professionals, individuals that we truly do respect as government, and, of course, the theme of this government has been more
nurses, more doctors, more opportunities for nurse practitioners, more training opportunities, more care closer to home, innovative programs such as Telehealth.

I had the opportunity to watch Telehealth being demonstrated at the hospital in Ashern. Through that, our doctors who, understandably, may feel isolated if they're working in northern communities, have the chance to connect with each other. We can send diagnostic information at the speed of light from different hospitals and clinics around the province to centres where diagnostic imaging can take place. It's a tremendous move forward to bring this very, very large province much closer together on health-care issues.

Being an inner-city MLA, I'm also very proud that this government, unlike the previous government, actually put its money where its mouth was and made a tremendous expansion and renovation of the Health Sciences Centre. The $130-million expansion of the Health Sciences Centre provides greater care for everybody in the province, including those from northern communities who often do have to travel a long way to receive treatment here.

I'm very pleased, as my friend, the Member for Selkirk (Mr. Dewar) has mentioned, at diagnostic imaging increasing not only in Winnipeg, but across the province. We have CT scanners and MRIs which are going into many, many, many communities across the province. Indeed, again, there's many reasons to celebrate the steps which have been taken in health care by this government.

But let's take a step back and have another look at accountability. It was very good, I think, the Member for Tuxedo (Mrs. Stefanson) joined the debate to talk about accountability and I did some thinking about the regional health authorities and why they exist. We know the reason that regional health authorities came in. It was so Gary Filmon's government could deliver harsh and cruel cuts to the health-care system and have the regional health authorities at arms length so that Gary Filmon could say, well, that wasn't me, that was the health authority.

Well, we've kept the health authorities in place, but with our government, the authorities do a very, very different job. Through the existence of regional health authorities we are able to work on centres of excellence in different hospitals and in different clinics across Manitoba. We know that through those health authorities our government has been able to find efficiencies. I know last year, the theme of the year, I suppose, was, why are we hiring more staff in health authorities? Well, we're hiring more staff in health authorities to get through the wait lists, to make sure that wait lists for surgeries, such as hip surgeries and knee surgeries—[interjection]

Well, I know the Member for Inkster (Mr. Lamoureux) now is going to join the debate. He doesn't understand that investing in staff to help work through wait lists actually results in Manitobans getting better care sooner. I know the Member for Inkster doesn't understand that. I'm always an optimist. I always enjoy debating the Member for Inkster and I'm sure that, over time, he will be educated and he will learn more about these important measures.

I should also add, of course, that we provide much better services for people from the north. Indeed, the Winnipeg Regional Health Authority has put staff in place to make sure that those services are being co-ordinated. Because whether you live in Minto or you live in Inkster or you live in a northern community, you're entitled to a high quality of service and oftentimes that service is provided by the Health Sciences Centre.

So, when it comes to accountability, Mr. Speaker, I'm very pleased that we stand on the right side on all of the aspects of the Canada Health Act. New Democrats have always been supporters. Of course, we were the founders of medicare. It's something that we truly believe in. That's why accountability is something that we can truly say, as New Democrats, we've been able to show.

So, thank you for the opportunity to put my comments on the record, Mr. Speaker.

Mr. Kevin Lamoureux (Inkster): Mr. Speaker, it's with pleasure that I have afforded the opportunity to speak on this bill because it's a bill in which has been here in the past. It really highlights what I believe is an important issue to all Manitobans. Many would argue that our health-care system is the No. 1 issue for all Manitobans. They want to feel that the government of the day is meeting the demands that are necessary in order to provide good quality health care to all Manitobans.

Mr. Speaker, one of things that I do on a regular basis is I like to canvass opinions through surveys, through providing questionnaires and so forth to my constituents. They in turn then return it. One of the
questions that I always ask is: What do you believe today in terms of the quality of health care compared to 1999? Is our health-care quality getting better or is it getting worse? Mr. Speaker, you will find that if you canvass Manitobans that you will get a majority of Manitobans saying that health care today is worse in terms of quality of service—

An Honourable Member: No way. That's not true. Kevin, that's not true.

Mr. Lamoureux: It is true, and, to the Member for Elmwood (Mr. Maloway), I'll even provide him some of the results.

You will find the majority of Manitobans today believe that the health-care system is no better today than it was in 1999 when this Premier (Mr. Doer) stood in front of the cameras and said, we are going to get rid of hallway medicine.

Yet you've got to look at what this government has actually done. I can tell you the most significant thing that this government has done in regard to health care is spend money. This government has no problem in terms of demonstrating that it has the ability to spend money, but, like I said the other day in question period, where this government is mentally challenged is being able to spend smarter.

Mr. Speaker, we just heard the Member for Minto (Mr. Swan) talk about the regional health care authorities. I remember when they were in opposition and the NDP back then opposed regional health care authorities and felt that it was going to be nothing but an excuse to blame the regional health care authorities for all the problems in health care. That was the official position of the NDP when they were in opposition, but I would argue, and I've argued in the past, today's NDP are not NDP. They have shown very clearly that they can abuse the tax dollars. How effective have they really been in terms of reforming our health-care system?

What does this bill want to do? It wants to ensure that there's more transparency. It wants to show financial accountability. In principle, the Premier and others talk a wonderful line, but when it comes to reality, when it comes to actual action, they shy away from it.

You know, the Leader of the Liberal Party provided a wonderful quote and dialogue that he had with the Premier. This is a quote right from the Premier in regard to this particular bill. It says, and I quote, from our Premier: I've said before that both myself and the Minister of Health, which happens to be the same Minister of Health today, have looked at the private member's bill and support the principle of it.

It goes on: that we're doing our due diligence on it.

It goes on: We're looking positively at this legislation.

Well, Mr. Speaker, this is a no-brainer in terms of legislation in the sense that it's either you support financial accountability and bringing it in, in terms of our fundamental principles of health care, or you don't. How long does the government need to study an issue, or to look at the whole issue of due diligence? I would suggest to you that, given the brain power on the other side, or at least maybe if you go beyond the ministers, you will find that there are civil servants who would be able to provide you that due diligence, who would be able to provide you the assurance that it is indeed quite practical, and the bill does make sense, that they're not going to bankrupt the province by accepting this bill, that what you're really going to do is you're going to be more transparent, that you're going to share with Manitobans the reality of where the money is going and how that money is being spent. That's the principle of this bill.

So one has to ask the question, then: Why does the government not support this legislation? It's not like this is the first time that it's appeared here. As the Leader of the Liberal Party has clearly demonstrated, we have brought this bill four, five times?

An Honourable Member: Five times.

Mr. Lamoureux: Five times before this Legislature, Mr. Speaker. Yet the government has not even allowed the bill to be voted on. At least to have—you know, if you don't support the bill, then stand up and vote against the bill. Stop speaking on the bill. Allow for the question to be called to see if it will go into committee and then vote against it. At least have the internal fortitude, the guts, if I can put it in that form, to allow for the bill to be voted on, so you can—

Mr. Speaker: Order. Having the guts has been ruled out of order by many Speakers. I ask the honourable member to withdraw that comment.

* (10:40)

Mr. Lamoureux: Mr. Speaker, I apologize, unqualifiably, and go back to intestinal fortitude. That's what's being recommended to me, but I would
suggest to you that the government of the day should, at the very least, allow the bill to come to a vote. I suspect they won't do that.

Let me speculate as to why the government won't do that. Because this government knows full well what Manitobans want to hear and they want to tell them what they want to hear. They want to tell the public that they're in favour of accountability, financial accountability, especially when you spend billions of dollars every year on health care. They want to tell Manitobans that they support that. It sure wouldn't look very good if it appeared that they voted against financial accountability inside the Legislature, only to go publicly and say that they support financial accountability.

So what alternative does the government have? It has the status quo, what they've been doing for the last five or six years, and that is: If we don't say anything, we'll let the Liberals bring in the bill, don't say much, just don't allow it to come to a vote; this way we don't actually have to act on what it is that we're talking about and allow it just to kind of die on the order paper.

That is the strategy of this government.

I'll suggest to you that this Premier (Mr. Doer) has learned well from his experiences when he was in opposition. I can cite so many examples of how this Premier knows how to manipulate or to give a perception of being effective, being accountable and, in reality, being the absolute and total opposite. Never before have I seen so many MLAs cater to what is being dictated to them from the Premier's Office. The amount of control that this Premier and the Premier's Office has, Mr. Speaker, is fairly–well, in one sense, someone could say impressive. In another sense, from my perspective, I would say it's depressing. It's not healthy for democracy. It's not healthy for issues like a private member's bill or free thought. Heaven forbid, NDP MLAs having free thought inside this Legislature, because if that were to happen, we would be seeing a lot more ideas being debated, let alone seeing bills in legislation being passed.

It's only the Member for Elmwood (Mr. Maloway) and periodically the Member for Selkirk (Mr. Dewar) that will stand up and actually say what it is that they really think or, more importantly, to share with us what their constituents would think.

On that note, Mr. Speaker, I would ask members of this Chamber to consult with their constituents, and they will find that a vast majority feel that the quality of health care has not improved since 1999, and the vast majority of Manitobans want to see more financial accountability in health care. Until the government backbenchers and even some of those ministers realize what Manitobans want to see, unfortunately, in all likelihood, we will not see this particular bill pass, which would be sad.

I ask the Premier (Mr. Doer) to act on his words that he said back on September 27, recognize that this is a good bill and allow this bill to be voted on, allow this bill to become law of our province. Thank you, Mr. Speaker.

Mr. Doug Martindale (Burrows): Once again we are speaking on Bill 202, The Health Services Amendment and Health Services Insurance Amendment Act introduced by the MLA for River Heights (Mr. Gerrard). The purpose of this act is to bring the elements of the Canada Health Act into provincial legislation.

I would argue that this isn't necessary since it's already federal legislation and we support it. All provincial governments support the Canada Health Act and all provincial governments must function under this act which would supersede any provincial legislation.

I think the real problem is that the federal government, both the current party in power and the previous party, of which the member who sponsored this bill was a part of in federal parliament, aren't enforcing the Canada Health Act. We wouldn't need bills like this provincially if the federal government would do what it's supposed to do and enforce their own legislation.

The member talks a lot about accountability. We do have lots of accountability, but one more point on the Canada Health Act, and that is that our Regional Health Authorities Act says, and I quote: "This act shall be administered in a manner that complies with section 7 of the Canada Health Act, which sets out the criteria of comprehensiveness, universality, portability, accessibility and public administration in relation to the operation of the Manitoba Health Services Insurance Plan."

Now, it's very interesting when one travels, especially to the United States, and compares what
happens in a country that doesn't have a universal medicare system with the Canadian experience. So, for example, in March of this year, I was in Georgia visiting my wife's relatives, and, of course, we often got talking about health care. One of the really instructive things for Canadians is how much people pay for health insurance in the United States, and what it covers and what it doesn't.

So, for example, my wife's cousin, Harry, was telling me that they couldn't afford their health-care premiums which, I believe, were in the range of about $7,000 a year. So, they switched to another company in order to get lower monthly premiums. They found a company that would sell them their insurance product for $300 a month, or $3,600 a year, so it looks like an up-front saving a lot of money. But you have to look at the fine print, and that is that their deductible was $5,000 per person in their family, a family of four. So, each person would have to use up $5,000 before their health insurance would kick in.

Now, my honourable friend from Pembina says, what about taxes? Well, it's true that Americans pay lower taxes, but what would happen if they had a universal health-care system? Well, for starters, everyone would be covered, and the cost would actually be lower because the administration of a publicly funded system with one administrator is much cheaper than the American system where there are 2,000 private insurance companies, where the administrative cost is much, much higher. The benefits of the Canadian system, of a universal system, are much, much better.

But going on to the Canada Health Act, which Manitoba supports, and we're happy to see the Manitoba Liberals doing so too, although they had a chance, when they were the federal government, to do something about provinces that weren't following the act, and failed to act. It's unfortunate that federal political parties in government lack the political will to put a stop to violations of the Canada Health Act. Manitobans and Canadians interpret the Canada Health Act as the guarantor of our public medicare system.

Since taking office, we have repatriated services to the public system. The Pan Am Clinic is a shining example of this and was called innovative by Roy Romanow. There are numerous other examples. In fact, I think I would like to talk about all the good things that we're doing in the health-care system.

Now, if memory serves me correctly, it was Bill Blaikie, a Member of Parliament, who got the federal Liberal government of the day—I believe it was 1984—to introduce the Canada Health Act and to enshrine in legislation the principles of our health-care system. I'm not sure whether the Member for River Heights (Mr. Gerrard) was there or not; I think that was before his time in Parliament. But I know that Bill Blaikie has received a lot of credit for pressuring. I think it was Monique Bégin was the Minister of Health at the time. I see people nodding their heads, so I think I have the right member of Parliament and the right Minister of Health and the right government and the right year. It's to the credit of Bill Blaikie and the NDP that the federal Liberal government of the day was pushed to enact the Canada Health Act—very important federal legislation.

Now, since I talked about the Pan Am Clinic, I think it's only fair to talk about all the good things that we're doing. I know I'm going to run out of time before I get through this list, but we are doing many, many good things. For example, the College of Physicians and Surgeons in their 2007 annual report shows Manitoba's gained 235 more doctors since 1999, and we remember what happened in the 1990s where the enrolment in medical school was cut and so we had fewer doctors graduating. We have 86 more doctors practising in rural Manitoba, which should be gaining applause and cheers from the opposition and their many rural constituencies, but I don't hear anything.

This year saw a record increase of 54 more doctors in one year. This record increase, quote: "... has occurred at a time of intense international competition for physician resources", according to Dr. Dean Sandham, Dean of the Faculty of Medicine at the University of Manitoba.

The most recent figures from the nursing college show that over the past year there has been a net gain of 200 more nurses working in Manitoba. That brings the net gain of nurses since 1999 to 1,789. We have turned around the nursing shortage created by the Tories in the 1990s when they drove 1,573 nurses out of the system.

* (10:50)

We've committed to hiring an additional 700 nurses and expanding training by adding 100 new nursing spaces over the next four years. This election we committed to hiring an additional 60...
technologists, and we've already hired 32 of these individuals.

We are reducing wait lists and wait times. Manitoba continues to have the shortest wait time for cancer radiation therapy along with British Columbia at one week. When we came into office, cancer waits were dangerously long at six weeks.

Mr. Speaker, while other provinces have made progress, Manitoba is a provincial star in its bid to reduce health-care queues, The Globe and Mail, November 21, 2006.

Hip and knee wait times are down almost 60 percent from 44 weeks, when we announced our plan to increase hip and knee surgeries, to 18 weeks today. We have cut the number of patients waiting in half since 2005 from 3,400 to 1,510. I believe one of the reasons that this has happened is that we're using foreign-trained doctors as doctors' assistants in the ORs. We're doing more surgeries and cutting into waiting lists as a result.

The wait time for MRIs is down to seven weeks from 28 weeks in 1998. We've added five MRIs since 1999, including two MRIs outside of Winnipeg, in Brandon and at Boundary Trails. Once again, we should hear the Member for Pembina (Mr. Dyck) and others cheering for these new technologies in their constituencies.

CT wait times are down from 18 weeks in 1998 to six weeks today. In 1999, most patients had to travel to Winnipeg to get a CT scan. Now they can get the care they need in Brandon, Steinbach, Thompson, The Pas, Selkirk, Morden-Winkler and Portage la Prairie.

What about capital investments and access to facilities? Well, I don't have time; I predicted I would run out and, indeed, I have. I have much more to put on the record of this list of progressive things that we are doing as a government. I have two minutes, but I would rather give one of my colleagues some time at the end to speak and I'm very anxious to hear what the official opposition has to say on Bill 202.

Ms. Jennifer Howard (Fort Rouge): Mr. Speaker, I wanted to just speak a little bit today about this bill and about the principle of accountability in health care and some of the things that we have done to make the health-care system more accountable to patients and to the people who pay for the system, the taxpayers.

I wanted to start by talking a bit about the information that's now available on the health-care system to patients and particularly with respect to wait lists for different procedures. We know that wait lists are a problem in all jurisdictions when it comes to health care, and a problem that demands many solutions. One of those solutions has been to find ways to make wait lists more transparent to patients, to make sure that patients are getting the care they need when they need it.

Mr. Speaker, one of the most telling differences, I think, between this government and the former government—I'm reminded of a FIPPA request under the previous government where a researcher for our caucus had asked for the wait list numbers for some procedures. When we took government in '99, we found the response to that request. It was very informative because the response from the government at the time was that that information did not exist. There was no information on wait lists; there was no information to be provided. Now you can go on the Web and find that information. Anyone in Manitoba, anyone in the country can go and find the information on the wait lists in this province.

We're making progress on those wait lists. We're making progress because we've invested in capital equipment and facilities; we've modernized facilities and purchased new technologies that can do more tests and can do it faster. It's been a very important part of our response to wait lists, and we've made progress because we've hired more people to do those tests. It's not a complicated equation, Mr. Speaker, but it is one that, unfortunately, the former government was incapable of putting into place.

The Member for Inkster (Mr. Lamoureux) was talking about his work. I think we all go out and talk to constituents and talk to Manitobans. I certainly also talk to my constituents and people that I meet who have recent experiences with the health-care system, because I want to know what people's experiences are in the system. I make sure to ask them when I hear that they've recently had surgery or undergone some kind of diagnostic testing or other procedures. I ask them, how did it go? How long did you wait? What was your experience?

Recently, I had a discussion with someone who had a recent hip replacement who waited a total of two weeks for that procedure. I know that we're not going to read that in any headline in any newspaper.
I'm pretty sure that that is not going to be a question in this House. I'm fairly confident that that person is not going to appear in the gallery to talk about their experience with the health-care system, but it was good to hear that he had not only had a positive experience but an extremely timely experience, and that he was now well on his way to recovery. In fact, he's recently been able to return to work, which, I think, is exactly what we want out of our health-care system: timely access to people who need it so people can go on and live healthy and productive lives in Manitoba.

I think another way that we have strengthened accountability in the health-care system is in respect of patient safety. I don't think that you can overestimate the progress that's been made in Manitoba with respect to patient safety. I think it's important to think back to the culture that existed in health care at the time when there was this tragic, tragic deaths of young infants undergoing cardiac surgery, when the culture very much in this province in health care was to blame—was certainly not to speak about issues that were going on, was certainly not to raise concerns and have those listened to and learn from past mistakes. I applaud the courage of people who work in health care and the leaders in health care who have done great work in turning that culture around. It is not easy for any of us, ever, to admit when we've made mistakes. It takes a tremendous amount of maturity and integrity, I think, to admit when you've been wrong, to apologize for that and to see it as an opportunity to learn.

I think it's even more difficult when you work in a field where mistakes can lead to terrible tragedies, to terrible injury and to death. So I applaud the courage of those health-care workers who are turning the culture of health-care facilities around and creating an environment where mistakes occur less frequently, where, when they occur, there's an opportunity to learn from them and to change the system so they don't occur again.

I want to speak, also, you know, the fact that this is a Liberal bill and certainly we passed a Liberal bill, The Apology Act, that I think was a good piece of legislation. I think it was an important addition to the health-care system to make it very clear that when things go wrong there is a need for health-care practitioners and facilities to apologize to families who are harmed by that mistake. Certainly we, on this side of the House, are not closed to good ideas from wherever they come, but I think we also want to consider them carefully and make sure that we are looking at legislation in a responsible way, in a diligent way, and considering it. I think that's our job in this House.

I also wanted to talk a bit about the accountability of governments for past decisions, and certainly, I think, one of the past policy decisions made in health care, that we continue to deal with the results of today, was a decision in the '90s, made under a federal Liberal government and a provincial Conservative government and made in all provinces, to cut back significantly the training of doctors and nurses. That has meant that we are now missing, literally, a generation of doctors and nurses in this country that were not trained. We see the results of that daily. We are now missing those doctors and nurses who would be leaders in their field, who would be innovators in their field, who would be mentoring new students who are coming into health care. I think that that decision made in the '90s is one of the most short-sighted public policy decisions when it comes to health care, and it's something that we continue to address today.

I'm very proud that one of the first things we did when coming into government was to increase the training and education of nurses, was to increase the training and education of doctors, and we've continued to make progress on that front because we cannot run a health-care system, we cannot achieve accountability in a health-care system when we don't have the bodies that we need and the talent that we need working in that system. That is the first ingredient in any kind of accountable health-care system that works for Manitobans. I'm very proud of the accomplishments that we have had in training and educating health-care professionals.

Certainly, we have not only trained and educated doctors and nurses, but we have seen all the people that work in health care as important members of that team.

* (11:00)

Mr. Speaker: Order. When this matter is again before the House, the honourable member will have two minutes remaining.

RESOLUTIONS

Res. 3—Trafficking in Human Beings

Mr. Speaker: The hour being 11 a.m., we will now move on to resolutions, and we'll deal with the resolution brought forward by the honourable Member for Burrows, Trafficking in Human Beings.
Mr. Doug Martindale (Burrows): Mr. Speaker, I move, seconded by the MLA for Lac du Bonnet (Mr. Hawranik),

WHEREAS all people and persons irrespective of differences possess a fundamental right to self-determination–

An Honourable Member: Point of order, Mr. Speaker.

Mr. Speaker: Order.

Point of Order

Mr. Speaker: The honourable Member for Lac du Bonnet, on a point of order.

Mr. Gerald Hawranik (Lac du Bonnet): Yes, Mr. Speaker, I didn't—I just noticed that the Member for Burrows indicated that I was seconding this resolution, and I don't consent to seconding the resolution.

Mr. Speaker: The honourable Member for Burrows will have to find another seconder.

Mr. Martindale: I will change the seconder to the MLA for Southdale (Ms. Selby).

Mr. Speaker: The honourable Member for Burrows will have to find another seconder.

* * *

Mr. Martindale: I will change the seconder to the MLA for Southdale (Ms. Selby).

Mr. Speaker: Would you just mind doing it all over? "I move—"

Mr. Martindale: I move, seconded by the MLA for Southdale,

WHEREAS all people and persons irrespective of differences possess a fundamental right to self-determination, and this right and the exercise of it are essential to any democratic society; and

WHEREAS slavery, torture, and imprisonment are perhaps the most heinous violation of this fundamental right; and

WHEREAS over 95 percent of people who are trafficked are women and children, and approximately 80 percent of victims are trafficked for the purpose of sexual exploitation where class, race, and gender oppression come together to create the worst possible exploitation; and

WHEREAS many of the women being trafficked are from eastern Europe; and

WHEREAS many of the women lured into the global sex trade experience dire poverty in their countries of origin and are attracted by the prospect of a well-paid job as a domestic servant, waitress, or factory worker in industrialized countries; and

WHEREAS upon arrival at their destination these women are stripped of their material belongings, their passports and identification documents are stolen, and they are immediately exploited by being forced to work as prostitutes in brothels, massage parlours, or in private homes, all under deplorable conditions; and

WHEREAS HIV-AIDS, unwanted pregnancies, drug addiction, physical and psychological trauma, and the daily ravaging of their person by so-called clients are all the consequences of the forced confinement and torture of these women and children; and

WHEREAS, in Canada, human trafficking is covered by a wide range of Criminal Code offences, including kidnapping, forcible confinement, extortion, assault, sexual assault, prostitution-related offences, and organized crime offences, as well as a new human trafficking offence in the Immigration and Refugee Protection Act that attracts severe penalties of up to life imprisonment and/or a $1-million fine; and

WHEREAS this traffic in women and children is a global issue that transcends national boundaries and necessitates a co-ordinated response on the part of the world's governments in terms of monitoring, investigating and prosecuting of this type of criminal activity in order to end this brutal exploitation.

THEREFORE BE IT RESOLVED that the Legislative Assembly of Manitoba urge the federal government to work with all interested parties, be it government, non-governmental, business, or otherwise, in order to develop an international strategy to collectively combat this phenomenon of international exploitation; and

BE IT FURTHER RESOLVED that this Assembly urge the provincial government to consider working in concert with other jurisdictions in order to raise the profile of this issue.

Mr. Speaker: It has been moved by the honourable Member for Burrows, seconded by the honourable Member for Southdale (Ms. Selby),

WHEREAS all people—

An Honourable Member: Dispense.

Mr. Speaker: Dispense.
Mr. Martindale: Mr. Speaker, this is a very important issue for all Canadians, but it's of particular concern in some communities because of the exploitation of women from their country of origin, especially in the Ukrainian community. Eastern Europe, including Ukraine, is a major source of trafficking in women.

I think we are familiar with slavery and the campaign to abolish slavery, which was popularized by the movie Amazing Grace, and 2007 was the 200th anniversary of the abolition of the Atlantic slave trade. Trafficking in women is modern-day slavery, and, therefore, we need a modern campaign including legislators around the world to unite with legislative action and programs to abolish trafficking in human beings, especially of women for the sex trade.

Many non-government organizations are involved in lobbying and in public education. One called Help Us Help the Children Anti-Trafficking Initiative is a project of the Chernobyl Canadian fund, and I am grateful to Irena Soltys of Toronto for information for my resolution.

Another major source of information is a book called The Natashas: Inside the New Global Sex Trade by Victor Malarek. It's probably the saddest book I've ever read. It details the export of women from Ukraine for the purpose of sexual exploitation.

What is the problem? Well, I believe the problem is not just the exploiting of women and children for money because certainly this is a large international issue where a considerable amount of money stands to be made and is made from trafficking women and children from one country to another, but it's also a problem of human nature, particularly lust and, I'm sorry to say, the lust of men.

It's a problem of supply and demand. If there was no demand for the exploitation of women, there would be no supply of women to meet this demand. So it's a problem of misogyny and sexism, and we need to combat that as well.

We are urging the federal government to work with all interested parties and certainly the government of Manitoba wants to work co-operatively and is working co-operatively with the federal government, including non-government organizations and businesses and others, to develop an international strategy to collectively combat international exploitation. We urge the provincial government to consider working in concert with other jurisdictions in order to raise the profile of this issue. We are doing that.

For example, human trafficking was addressed at the federal-provincial territorial meeting of ministers responsible for justice, hosted by the Manitoba Minister of Justice which took place in Winnipeg last November.

Ministers are considering current prevention, protection and prosecution responses to address the problem and stress the importance of continued collaboration and sharing of best practices in areas such as training and awareness-raising to ensure that traffickers are held accountable and that appropriate steps are being taken to protect and assist trafficking victims.

In Manitoba, we are particularly proud of Bill 22, The Worker Recruitment and Protection Act. I'm not going to go into any detail about this because my colleague from Southdale, I believe, will address what we are doing as a province under Bill 22.

What is human trafficking? The United Nations defines human trafficking as the recruitment, transportation, transfer, harbouring, or receipt of persons by means of a threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abusive power, or of a position of vulnerability, or the giving or receiving of benefits for the purpose of exploitation.

So we know that it is women in poor countries and developing countries that are particularly vulnerable to being trafficked. They are lured to other countries with the prospects of jobs. They really don't know what they're getting into, but once they get to that country they are usually forcibly confined and forced into prostitution. Victims are often lured into vulnerable positions through traffickers posing as legitimate businesses such as modelling agencies, travel agencies, employment companies, au pair babysitting services, international matchmaking services and massage parlours.

Traffickers will promise a job, education or marriage and will offer to handle and pay for the cost of a passport, work permit and transportation for their victims. Once their victims have been lured away from home and are completely vulnerable they are often placed in unsafe or illegal living and working conditions. Far from home, traffickers or employers force these women and children into prostitution, sweatshop labour or other illegal activities through taking away their victims' identity.
documents such as passports and birth certificates, through debt bondage, isolation, or physical, emotional or psychological abuse.

How widespread is trafficking? Well, human trafficking affects virtually every region of the world. Human trafficking is a worldwide problem. It happens to people who are exactly like us all over the world every day. Trafficking in men, women and children occurs internationally and right here at home, and there is some evidence that the exploitation of sexually exploited youth in Manitoba is part of the trafficking problem.

* (11:10)

According to the United Nations Office on Drugs and Crime, people from 127 countries of origin are exploited in 137 destination countries, and, sadly, Canada is one of those destination countries. Many developing nations are involved as countries of origin or countries of transit while many of the world's developed nations, Canada included, are involved as destinations for human trafficking.

In an April 2006 UN report, the United States was ranked very high, and Canada was rated high as a destination of the victims of human trafficking. Sexual exploitation was listed as the main purpose of the trafficking to these two countries. So we should, maybe, make a distinction between trafficking for sexual exploitation and other kinds of trafficking, where people are usually going to jobs but low-paying jobs with no rights, no benefits, probably being paid in cash and basically don't know their rights, being held against their will, and trafficking for the purpose of sexual exploitation. They are both part of the same problem. Both exist; both are widespread, but I'm talking, mainly, today, about trafficking for the purpose of sexual exploitation.

An estimated 2.4 million people are currently in forced labour, including sexual exploitation, as a result of trafficking. Who is involved in human trafficking? Traffickers are not always strangers. Oftentimes, they are people the victim knows personally like a relative, neighbour, or acquaintance. Traffickers use every imaginable disguise to lure their victims, sometimes even holding job fairs at high schools and universities offering exciting employment opportunities abroad. Sadly, sometimes some traffickers are, themselves, victims of trafficking who've been told that if they can bring in two or three fresh people, they will be set free. Traffickers are also often tied to criminal groups involved in the lucrative business of buying and selling their victims into the worldwide sex trade.

In September 2007, the New Internationalist magazine reported that, in many cases, traffickers stand to receive anywhere between $250 to $5,000 by luring and selling just one person to pimps and brothel owners across the globe. In some cases, the very people who are there to protect victims are also involved in trafficking, either directly, or through turning a blind eye in return for monetary bribes or other rewards, for example, brothel owners offering officials free sex with young girls.

Human trafficking is modern-day slavery, and traffickers rely on threats, intimidation, and beatings to control their victims. They will not hesitate to harm their victims and their victims' families in order to keep their victims under control. According to the International Labour Organization, 43 percent of victims are trafficked for the purpose of sexual exploitation. A further 32 percent are trafficked for other means of economic exploitation.

Women and girls are more vulnerable to trafficking of all kinds, but especially that involving sex, than men or boys are. Ninety-eight percent of victims of forced, commercial sexual exploitation are women. Traffickers often prey on the poorest and most vulnerable people coming from poor countries. Women and young girls living in dire poverty and struggling to make ends meet in the world's developing nations are often the targets of trafficking.

People living in conflict zones are especially vulnerable to sexual exploitation through human trafficking. According to Victor Malarek, author of The Natashas: Inside the New Global Sex Trade, rates of trafficking and sexual exploitation often increase due to the surrounding social instability and an increased demand for prostitutes. For example, in war-ravaged Bosnia, the local criminal networks worked to fill the demand for prostitutes by trafficking young girls and women for prostitution from Romania, Moldova, and Ukraine.

In 2006, during the armed conflict in Lebanon, United Nations Office on Drugs–

Mr. Speaker: Order. The honourable member's time has expired.

Mrs. Myrna Driedger (Charleswood): I certainly agree with the member that brought forward the private member's resolution that we need to do more in terms of addressing this issue. I think we've
spoken to it on a number of occasions. I would like to indicate to the member, though, that brought forward the resolution, that the NDP have had many opportunities in almost 10 years to address the issue locally, and I think they've dropped the ball on a number of occasions and haven't done near what needs to be done here, because it's not just happening in other parts of the world. It's happening right here in our own backyard, right here in Manitoba, and right here in Canada.

I hope that, with this government putting forward this resolution, I think the content within the resolution is important and more needs to be done in that and more of those issues need to be brought forward. I sincerely hope this isn't just this government looking for a sound bite on the issue; that, in fact, they are prepared to look at this more substantively. I know in past instances where we have promoted a safe house for child prostitutes, this government dragged its heels on setting that up in Manitoba and we had to push and push for a year or two before there was even any action there.

We've seen increasing gang activity in the province and a sideline of gangs is prostitution. I would urge this government to try to substantively then take what they're putting on the record today and move this issue forward because I'm very concerned that they haven't taken the full opportunity to do what they need to do about this.

This is an issue, Mr. Speaker, that I have spoken to on a number of occasions. From the days in Child Find, this was an area that we worked on, looking at what was happening in child prostitution here in Manitoba and across Canada. It was something that we worked very hard to fight against. I can recall meeting with some child prostitutes who were here from British Columbia. I can remember taking a retired prostitute to a missing children's conference in Saskatoon and spending time with her, talking about the issue and talking about the sex trade and the many misconceptions that there are around it.

I don't think there's any little girl that ever dreams of being a prostitute, let alone a child prostitute. Little girls dream about becoming princesses or nurses or doctors or cowgirls or whatever, but never do little children dream of becoming a child prostitute, or little boys for that matter, because there are boys in this business too. An eight-year-old girl should not be forced to have to go out on the street and sell herself or be given over to family members for that same activity. We know it's happening here in Manitoba. I think there's a lot of work that can and should be done in our own backyard to address this issue, because no matter what age the child, whether it's our eight- or 10-year-olds that are working on a kiddie strip in Winnipeg, we shouldn't be tolerating that. We need to be talking about it more and doing more but it is happening on our streets here. We don't have to leave the province to find it.

Another thing that I think would help in moving forward more of this debate is to look at the language around it. I think maybe it was from the amount of opportunities I've had to speak with prostitutes or child prostitutes that I find the word "hooker" very, very offensive. I think that's something that needs to change because I think it puts out the wrong impression to people about what that sex trade then is all about. Hooker, teen prostitutes, sex trade worker—these are some of the terms that are used in the media everyday. I'd like to see them banned because some of that language is used for children that are eight years old, ten years old. I think it's really inappropriate because, when you think of that, it conjures up the impression that these kids are bad girls, they want to be out there, they want to be in this business.

We know anybody that spends time with these children know that that is not, in fact, the case. These are not kids that are running wild and ruining their life on purpose. I don't think we should be condoning the use of that and taking every opportunity as a public to say to the media when they're using that language or when we hear that language anywhere, I think we should be encouraging them to change that language because as we change the language, we may then move beyond the impression that so many people in the public have, that this is something that children want to be in. When child prostitutes are telling me that people from the suburbs are driving around in the inner city of Winnipeg, making derogatory comments from their cars or throwing coins out the window, it is a very demeaning experience for some of these young girls. I think there is a real lack of understanding that child prostitution is child abuse, and I think we've got to work harder as a society to move that whole issue forward.

* (11:20)

I'd like to credit Roz Prober as somebody here in Manitoba that has probably taken charge of this issue in many ways in Canada to move this forward. I can
remember when Roz got involved with us in Child Find. She was nervous about how to go about doing what she felt needed to be done. I can remember sitting with her many times, encouraging her, Roz, you can do this. You can take this issue. You feel passionately about it. You know what you're talking about. You can make a difference.

I am so glad to see that she has done what she's done. She has set up Beyond Borders, which is a Canadian entity now. They have been doing very, very good work. Certainly, we need to acknowledge what they've been doing, because they've certainly been working at many levels to take this issue forward. They certainly pressured the federal government into raising the age of consent.

I can remember helping distribute these postcards that they were doing. I think that is one of the steps that needed to be taken to raise the age of consent, so that we could ensure that we don't acknowledge that it's okay for older men to have sex with 14-year-old girls. A lot of commendation as far as I'm concerned to Roz Prober who has done a lot on this in this province.

Child Find is another organization that I think has pushed this issue in many ways, whether it has been child prostitution or child pornography, and their establishment of the cyber tip line. I have to give the federal government credit for the amount of money that they have put into that to make it happen. I appreciate that the provincial government here has given some space for that, or did at one time contribute, in a smaller way, but they did help a bit. Certainly, the federal government has been stepping up to the table with their legislation on this and with their support of Child Find and the cyber tip line. I know that the federal government has looked at it from all angles.

I would like to acknowledge at this time the federal Conservative member of Parliament for Kildonan-St. Paul and vice-chair of the parliamentary committee on the status of women, Joy Smith, who has been out there at many levels speaking about this and has been recognized as a leading anti-trafficking activist. I think she is working with her government from within to push this issue forward. I know she has worked with models who have been duped into taking contracts in Europe and ended up in the sex trade.

I think there is a lot that is happening at the federal level. I would like to see more happening here at the provincial level in the abilities that we could take forward here in Manitoba and strengthen what we're doing here and talk about it more, as this resolution brings it forward.

Again, I would end by saying, let's look in our own backyard first and do more to what we can do to fix this in our own province and country. There are a lot of Aboriginal girls and women who are unaccounted for and missing in Manitoba and Canada. How many of them are forced into something like this? We need to have a stronger approach. I would urge this government, there are a lot of things they can be doing to look at getting tougher on crime here, getting our gangs under control here. Deal with child poverty in this province. Strengthen our child and family system here so that kids don't fall through the cracks and end up, in some instances, as child prostitutes. I think we need to work very hard to protect our children from what is becoming a global playground for predators.

Mr. Speaker: Order.

Mrs. Driedger: Thank you, Mr. Speaker.

Ms. Erin Selby (Southdale): I'm really proud of the work that Manitoba is doing to protect children, particularly young girls in the modeling industry. I would urge the member opposite to read Bill 22, The Worker Recruitment and Protection Act, because it is leading the way, not only in Canada but around the world, to talk about protection for young women. Really, using the word "women" is generous. It's young girls who are in the modeling agency.

I want to talk a little bit about human trafficking. We think of human trafficking as something that doesn't happen in Canada, or perhaps it doesn't happen in the suburbs or in wealthy neighbourhoods. Human trafficking is something we think of that happens in places where people maybe are economically challenged, but I would argue that, as the member opposite was saying, many girls dream of being princesses, while many, many more dream of being models, unfortunately, and many of those girls will be taken advantage of. Many of those girls come from the suburbs, from good families, from, quote, wealthy families, and you would think that they would be protected. But up until Manitoba put in Bill 22, unfortunately most people were looking the opposite way when it came to the modelling industry.

Mr. Daryl Reid, Acting Speaker, in the Chair

There are two different types of agencies basically in the modelling industry. There are some
that people would consider legitimate and others that people would know are definitely unscrupulous. You may remember, back in 2006, there was a story that was very common in the media, where a former Winnipeg Police Service officer was charged with 33 sex-related offences. The alleged victims were all former clients, many of whom were minors, of his modelling and talent agency. Well, that I would offer as an example of a completely unscrupulous modelling agency with questionable experience in the modelling industry. Sadly, there are too many people, such as this example, that are exploiting young girls who dream of being models. It's all too easy to get young girls to sign up when you're talking about the dream of a glamorous career: fame, attention and possibly lots of money.

But, Bill 22 is working towards protecting young women from unscrupulous agents by ensuring that people will have a way to check out who is a legitimate agent, who is a licensed agent, who is not.

But, what is even more scary, I think, is that those so-called legitimate agencies can also lead to exploitation of young children. I would point out that many members here, perhaps in the House, may not realize how young the girls are in the magazines that we see. When you pick up *Vogue* or *Glamour* or *Cosmo* and see a young girl in a perfume ad or perhaps in a fashion spread, you might guess that her age is 22, 25. Well, most likely, she's between 12 and 16 years old because that is the trend that the industry is going for. We're not talking about exploiting young women in the modelling industry, we're talking about exploiting 13-and 14-year-old girls.

The legitimate modelling industry has been working behind closed doors for a long time, and although the advertisements are right there in front of you, there's no information on how old is that young girl. They're starting to talk about how much do they weigh, but we aren't talking about the life of even a successful model--a young model, maybe coming from Winnipeg and get picked up by a legitimate agency here in Winnipeg. There is at least one legitimate agency. They may have good intentions, and the girl may have potential to earn a lot of money.

You can understand why her parents might be eager for her to see the world and be told that how about this summer instead of going away to summer camp, you go to Japan, spend two months in Japan, you'll be well taken care of, somebody will be there with you at all times, and you can make $20-, $30-, $40-, $50,000 during the summer. That's a good start to your university plan and perhaps even a down payment on a house someday. But, unfortunately, what happens when a young girl heads over to another country unescorted, unprotected and with no guardian around can be, well, up to whatever happens in that other country.

Mr. Acting Speaker, perhaps the girl will go on to make a lot of money, but what do you consider sexual exploitation? It's not always prostitution--certainly that does happen when young girls are lured to another country and there, vulnerably by themselves, possibly without any money, and very often without a passport or a plane ticket because the agency likes to hang on to that after they've paid for a young girl to come over. Perhaps, then, maybe they won't become a prostitute. That's the far side of what can happen.

What else can happen is just sexual exploitation in terms of the photos that are taken. The compromising situations--a young girl may feel vulnerable and unable to say that she's uncomfortable with that. Throughout this process of working on The Worker Recruitment and Protection Act which I may say again is leading the way in Canada; nobody else has thought about protection for models except for Manitoba so far.

Ms. Liz Crawford was very, very important in helping put this legislation together. Ms. Crawford was an international model and began modelling when she was young, in her teens, and now is running a wonderful modelling agency with a lot of plans in place that not a lot of other agencies have. Ms. Crawford expects girls to be of age and doesn't send them over without someone with them in high school and would much prefer to send somebody over when they're of age and probably better able to look out for themselves.

* (11:30)

But she also shared with the Minister of Labour (Ms. Allan) and myself, as we were looking at this bill, some horrible stories of things that happened to both her and her friends. One of her friends made a lot of money in the modelling industry and was not exploited in the way that we think of in terms of child prostitution. But, she tells of stories where she was expected to be nude on the runway in front of thousands of people, at 15 years old. Well, I would argue that that's sexual exploitation. She talks about
having her picture taken nude, which is very common for models in Europe, in Asia, to do nudity, not seen so much in Canada, but as soon as a girl is brought to another country that's pretty much expected. Well, here in Canada, if you take a nude photo of a young girl, we consider that child pornography.

Why is it when we see it in a magazine, or we see it for an ad, that we consider that fashion or art? That same photo done in a different context would be child exploitation, would be pornography, and I don't think that we should allow the legitimate modeling agency to get away with exploiting young girls in such a way.

The RCMP Human Trafficking National Coordination Centre Web site lists modeling studios as among the most likely places to find victims of trafficking for sexual exploitation. Well, I talked a little bit about what can happen when a girl heads over to Europe, or when a girl heads over to Milan. Maybe you think that that's something that doesn't happen very often. How many girls get a chance to actually model in another country? You may be surprised that, while people think of Canada as being an exporter of, perhaps, lumber or some of our natural resources, Canada is probably the leading exporter of young models as well. Modeling agencies from all over the world come to Canada to recruit, quite frankly, because of our immigration policies. You can see a wide variety of faces when you come to Canada. Some countries where there may be a more homogenous look you may only be able to pick up a certain type of girl, if you scout that country, but when you scout Canada you can pick up girls from all colours, all races, all hair types, all sizes. Although, let's face it, the modeling industry is looking for one particular small size.

Mr. Speaker in the Chair

So Manitoba, and Canada in general, do have to pay attention to this issue, because, as I said, Canada is leading the way in sending young women over to various parts of the world, including the United States, where they may be victim of something more insidious, such as child prostitution, or perhaps they will just be victims of what's considered the legitimate modeling industry.

I see I only have a little bit left, but I do want to say that I am so proud that Manitoba is leading the way, that we're looking at how women can first decide if this is a legitimate agency. We're looking at measures to protect young girls from going to other countries, to make sure that they have protection both here in Canada and when they leave the country. But this is something that we have to look at across Canada. We can protect girls from Manitoba, but, by working together with the federal government and non-governmental businesses and agencies, we can protect all young women, and perhaps change the industry so that we have different standards expected across the world.

Thank you so much.

Mr. Ron Schuler (Springfield): Mr. Speaker, I, too, wish to put a few comments on the record in regard to this motion, something that is very important. I guess I would start my comments by saying, if I were to introduce this motion, I would probably have renamed it, and I would rename it: The fight against trafficking in human beings, by Member of Parliament Joy Smith.

I want to spend some time speaking about the fight that Member of Parliament Joy Smith has made on this issue, and how she is the one who has probably raised the issue, not just within Canada but internationally, to bring it to all of our attention.

In fact, if I had the opportunity to change a little bit of something, it would be in the last paragraph:

"THEREFORE BE IT RESOLVED that, in retrospect, the Legislative Assembly of Manitoba urge the federal government," because this is something that has been done and is currently being done by the federal government.

I would like to point out to this House motion M-153, which was tabled in the House of Commons of Canada on May 3, 2006, by Member of Parliament Joy Smith for Kildonan-St. Paul, and the motion read:

THAT, in the opinion of the House, the trafficking of women and children across international borders for the purposes of sexual exploitation should be condemned; and

THAT the House call on the government to immediately adopt a comprehensive strategy to combat the trafficking of persons worldwide.

I don't know if the House knows this, but I think we should all be very, very pleased that the House of Commons passed that unanimously on February 22, 2007. I commend the member for bringing in the resolution urging the government to move on it. I would say we should commend the federal government for actually having done so.
This is a very serious issue. Again, I would like to thank Member of Parliament Joy Smith, for Kildonan-St. Paul for actually having driven this issue. It's an issue she's been championing for over eight years. We've heard comments in this House that these are not just issues of international proportions. It's not just an issue that faces Canada; it's also an issue that faces Manitoba, whether it be in our communities or in our big cities like Winnipeg. It is an unbelievably horrible crime to traffic in human beings. It strips them of any dignity, of any self-worth and the way that they are handled is in such a brutal, brutal fashion.

I want to just quote for this House the kind of serious issue that we're dealing with, and I'm going to just quote out of this so I'm not accused of plagiarizing. It comes from the Standing Committee on the Status of Women, turning outrage into action to address trafficking for the purpose of sexual exploitation in Canada. This comes from the committee mandate: "Between 700,000 and 4 million people a year are affected by trafficking in persons. The vast majority of people who are trafficked are women and children, and 92% of victims are trafficked for the purpose of sexual exploitation. While the Standing Committee on the Status of Women acknowledges that Canada has taken steps to combat trafficking, both within and outside of its borders, the Committee's attention was drawn to the urgency of the situation," in regard to the victimization of innocent women and children, and that was within Canada.

I have spoken to Joy Smith, the Member of Parliament from Kildonan-St. Paul, and she has relayed to me that she has travelled the world and she has seen first-hand. We had a comment from one of the members about 12-year-old girls; actually it goes much younger than that. It goes as young as eight-year-olds. I'm not at liberty to say which country, but she actually saw what was going on on a street corner and saw girls as young eight years old being forced into prostitution. She stood there absolutely horrified, knowing that to intervene would only bring further problems. She was powerless because she was someone from another country. She was powerless to do anything about it.

I know that she has been on the streets with the RCMP in Montréal and seen the kind of human trafficking, trafficking individuals into prostitution on the streets of Montréal. I know she's been on the streets here in Winnipeg and she's seen the kinds of things that are taking place here.

I would like to mention to this House I happened to be in Thailand in February and saw for my own eyes. I know there are those who herald prostitution or, as it's called in Thailand, the sex trade, as being something very enlightened, that it's something that we should be looking to because it's monitored and there are licences handed out. I'd like to point out to those, and there was an article recently in the Winnipeg Sun that that is absolute nonsense. I saw with my own eyes how there were women that were trafficked in. In this case, it happened to be several young women from Russia who have been trafficked in. They get a three-month permit and they are forced into prostitution. They're supposed to be coming as dancers and end up in prostitution. The money is big. It is an enormous amount of money that is generated out of this heinous crime.

So I would like to say to this House, it's important for us to have had this debate. I appreciate the member having brought this issue forward because it impacts all of our communities, because no child, no woman is safe if we don't stand up and say, this is absolutely intolerable. We have to do that; we have to do that as legislators; we have to do that whether it's in the law enforcement agencies. At no point in time can we turn our back on this issue, and say, well, that's fine for other countries but it doesn't exist here, because it does exist here. It comes from the finest of countries. We've heard here examples being given of individuals, young girls who want to get involved in the fashion industry and find out with unbelievable horror that somehow they've been tricked into a prostitution ring.

* (11:40)

So I would like to thank the member for having brought this motion forward. I would like to point out to this House that work has been done on it. I would like to take this opportunity to, one more time, commend the individual who has worked so long and hard on this. She has now received national and international awards for her work. I would encourage Member of Parliament Joy Smith for Kildonan-St. Paul to please keep up the fight on the national level. Congratulations on bringing legislation forward that all political parties in the House of Commons could support and had voted for.

I would encourage all members to stand up and fight against this heinous crime. I am pleased that it is becoming more and more of an issue because, although it's always been there, it's sort of been one
of those dirty secrets that have not been discussed. And with that, I would like to thank this Legislature for the opportunity to address the motion.

Ms. Flor Marcelino (Wellington): Mr. Speaker, I wish to speak on the importance of this resolution brought forth by the honourable Member for Burrows (Mr. Martindale). I thank the honourable member for the PMR. I support this PMR and its enactment as it will considerably curtail the activities of greedy and unconscionable individuals who prey on vulnerable children and women with no regard for their welfare and their basic human rights as these people intentionally and knowingly place women and children in harm's way.

Mr. Speaker, I would like to share real stories regarding this horrible, horrible practice of these individuals who are involved in the exploitation of these women and children. In August 2000, I attended a conference here in Winnipeg on migrant workers. In attendance were over one hundred Filipino Canadians from several Canadian cities as well as women who are here on temporary working permits. Most of them were live-in caregivers in various cities in Canada.

One of the participants from the Toronto area reported at the plenary on how their organization was able to help several women in the Toronto area who were working as guest relations officers, which is but a euphemism for being a sex worker in one of the nightclubs there.

Ms. Bonnie Korzeniowski, Deputy Speaker, in the Chair.

They found out that this woman whom they were able to get out of that situation was recruited by an agency from the Philippines along with several other young women from the rural areas or the provinces of the country. They paid a substantial sum. Unfortunately for them, they had to sell whatever possessions the family had to be able to afford the cost or the fee that the agency had exacted from them. They were promised to work for supermarkets as sales clerks. That was fine; it's an easy job for them to do. They are very hardworking girls or young women, and they could work long hours if need be because that was one of the stipulations of the contract, that they could be required to work for long hours and may even be in the evenings. So, for women from countries such as the Philippines who, unfortunately, are not well looked after by the government in terms of providing education or opportunities for employment, they would grab at anything that will bring them out of the country.

So these women were brought to Toronto and, lo and behold, instead of a supermarket as their place of employment, they were quartered in the basement of a building that looks like a warehouse building and they were fed there, they were given nice clothes, and they found out that they had to work in nightclubs. They don't have their passports with them. They don't have money with them. They don't know anyone from the area, and they are not allowed to leave the premises, so they are left with no recourse but to do the bidding of whoever was in charge in that facility.

Mr. Speaker in the Chair.

They were asked to be workers for a nightclub, and if you are working in a nightclub environment, you are not only serving wine or liquor or beer, but you're also entertaining men and whatever will come up after that.

Also this woman told a person from that Toronto organization that if they do not act properly or efficiently, which is being good to the patrons of the nightclub, they will be physically and verbally abused by their handlers. That's only one story, and that's not an isolated story.

In that same conference, there was this woman from an organization in British Columbia who shared the incident one time when she was in a supermarket. A Filipino woman came to her. The woman was pale and looking distraught and totally—even though she was not known to the woman, the woman blurted out her story and told her that she was a mail-order bride.

Apparently there are organizations in Canada who recruit women from the Philippines, as well Asian countries, as mail-order brides. For this particular woman, again, the same story of poverty and lack of employment opportunities back home led her to take this opportunity to leave the country, even as a bride of someone whom she may not learn to love, someone whom she hasn't even seen except a photo. Although she saw that this was an old man, she said that's fine with her, if it will mean her passport or her ticket out of the country and out of the poverty that she is experiencing. She dreamt that, in Canada, she will eventually, with the help of this old man, be able to work outside the home, earn a living and be able to help her siblings and her
parents, and possibly uplift them from the condition that they find themselves in.

When she arrived in Canada, she was brought to a far-away place, and she recalled they travelled for long hours from the airport. Then she was brought to this farmhouse, an isolated place, and in the farmhouse was an old man, much, much older than the photo of an old man that was shown to him. This old man is disabled, and this old man is to be the husband.

Well, that's not too bad, according to her, if this old man is good to her, maybe she will be allowed to work during the day and she doesn't know yet how it is possible for her to work outside that area since it is so remote. But anyway, she found out that what she will do is care for this old man who is now her husband, and she'll be feeding the man, bathing the man, cleaning the farmhouse, feeding the farm animals, and there is no pay being the housewife or being the wife. So her dream of earning a living, earning some money to be sent home became a nightmare since it's not happening.

Mr. Speaker, it's unfortunate that there are these unconscionable people who may be part of organizations that may be involved in some other nefarious activities, and so this bill when enacted will certainly–

Mr. Speaker: Order. The honourable member's time has expired.

Mr. Kevin Lamoureux (Inkster): Mr. Speaker, I truly appreciate the opportunity to be able to address this resolution. I think that it's one of those resolutions which all members of the Legislative Assembly would indeed support.

It's an issue that has been there for many, many years. I was afforded the opportunity a couple of years back—the Member for Springfield (Mr. Schuler), I think, was with me when we went down to Kansas and the state legislature there in one of its committee rooms had a presentation that was being made on human trafficking.

You have our national government. You could talk about individuals, whether the Joy Smiths or others, who have tried to raise the profile of this very serious issue. You know one could ultimately argue that exploitation of our children in the area of especially sexual exploitation is very damaging to society and, through the years, whether say it's today or 2,000 years ago, there were many different forms of exploitation that have occurred.

I suspect it's one of those issues that will always sadly be there, but at times there are things that we can do that could make a difference, that could prevent a child from being exploited, whether it's an 8-year-old girl or a 12-year-old boy. We're talking about the welfare of our children and recognize that there are people in society that are prepared to exploit our children.

So what do we do as a Legislature? One of the things that's been brought forward is a resolution talking about the principle of exploitation and expressing something that we could send a message, in essence, to Ottawa, calling Ottawa to further recognize the issue. There could even be things that we could be doing here in the province of Manitoba.

When we talk, and I listened very closely to the Member for Wellington (Ms. Marcelino), as I did for all of the speakers on this particular resolution, but when I listened to the Member for Wellington, in particular, I think of the issue of immigration. Our immigration is structured in such a way that it doesn't necessarily allow for individuals that the Member for Wellington refers to to be able to come to Canada through a normal process. Sadly, it does occur where we see what they call marriages of convenience as a direct result or, sadly, as other members made reference to, women that would be attracted because of modelling or some other form of work. It ends up resulting in them coming here under working visas only to be brought into the sex trade.

So there are some things that we could be doing that would at least save some people. You'll never cure the entire problem, but I think that we can take steps towards saving as many children as we can from that form of exploitation. But there are also things that we can be doing at the provincial level, Mr. Speaker.

As the Member for Burrows (Mr. Martindale), and others, even yourself, Mr. Speaker, there are a number of us that drive through, whether it's inner-city, North End of Winnipeg, on virtually a daily basis, and we can talk about the type of exploitation that is there.

I must say, one of the biggest frustrations that I have is dealing with the issue of Marymound as an alternative facility that helps a lot of young women, young girls that are in fact sexually exploited. What I have found is that quite often we will get a young
child that has been sexually exploited, finally, into Marymound as an institution, and as the person is finally getting on or getting the supports that are necessary in order to assist that young girl to get on the right track, the individual has to leave the centre.

Quite often when they're leaving the centre, obviously, the supports that the centre provides are not the same and they end up being back in the very same environment that they were pulled out to prior to going into the centre. The reason why I say that is because we need to recognize that human trafficking and the whole issue of sexual exploitation is an issue in the province of Manitoba, and all of us can play a role in minimizing the number of children that are being exploited through human trafficking and child prostitution.

What we need to do is to be creative and thinking outside of the box in terms of what it is, at the local level, that we could be doing that could make a difference. Yes, there are some areas in which the government has moved forward on, that have assisted, and I would applaud the government in those areas, but there are equally other areas that I think that we need to be more aggressive on. I know that there are some members that would maybe be a little bit more familiar with what it is that I am referring to because we witness it or we see it virtually every other day.

So, in conclusion, I would suggest that this is a resolution, as I say, that all members of the Legislature can approve, but all members of this Legislature, I'm sure, acknowledge the need that we do more where we can, even at the provincial level where we can make a difference for these children that are being exploited.

Thank you, Mr. Speaker.

Mr. Speaker: Is the House ready for the question?

Some Honourable Members: Yes.

Mr. Speaker: The question before the House is the resolution brought forward by the honourable Member for Burrows (Mr. Martindale), Trafficking in Human Beings.

Is it the pleasure of the House to adopt the resolution? [Agreed]

Mr. Gerald Hawranik (Official Opposition House Leader): Is it the will of the House to call it 12 o'clock?

Mr. Speaker: Is it the will of the House to call it 12 o'clock? [Agreed]

The hour being 12 noon, we will recess and we will reconvene at 1:30 p.m.
ORDERS OF THE DAY

PRIVATE MEMBERS' BUSINESS

Second Readings–Public Bills
Bill 202–The Health Services Amendment and Health Services Insurance Amendment Act

Martindale 818
Howard 820

Resolutions
Res. 3–Trafficking in Human Beings

Martindale 822
Driedger 824
Selby 826
Schuler 828
Marcelino 830
Lamoureux 831
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