Second Session - Thirty-Ninth Legislature

of the

Legislative Assembly of Manitoba

DEBATES

and

PROCEEDINGS

Official Report

(Hansard)

Published under the

authority of

The Honourable George Hickes

Speaker

Vol. LX  No. 47A – 10 a.m., Tuesday, May 27, 2008
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The House met at 10 a.m.

PRAYER

House Business

Mr. Speaker: The honourable Government House Leader, on House business?

Hon. Dave Chomiak (Government House Leader): Yes, Mr. Speaker, on House business.

It's an extraordinary day in the province of Manitoba insofar as the President of Ukraine will be attending both this building, the University of Winnipeg, and I believe the City of Winnipeg at Chambers today. Because of the significance of that, Mr. Speaker, I'm wondering if there might be leave of this House, insofar as we're sitting this morning from 10 till 11 in private members' business, if there is unanimous leave of the House to report back from committee Bill 217, the Ukrainian famine bill, and pass it through third reading of this Chamber this morning before 11 a.m., before the arrival of His Excellency the President of Ukraine.

I believe I have unanimous consent of all members of the House, and I have broached the unanimous consent in a fashion so that there may be activities required by staff to prepare the motion, etcetera. At the same time, we also know that members on the opposite side of the House have some matters that they wish to deal with, so I'm asking that before 11 a.m., if we could ensure that the bill is reported back from committee and we have an opportunity to vote on third reading of that bill so that it can be voted on. I believe you'll have unanimous consent both from members of this Chamber on the action and I suspect on the third reading of that particular bill.

Mr. Speaker: Okay, the problem we have is that all bills, they have to go to translation because all our papers have to be in both languages and 217 has been sent to translation, but they advised that it will not be back until noon. So, without it being translated, under our rules, we can't proceed with it until we get the copy.

ORDERS OF THE DAY

PRIVATE MEMBERS' BUSINESS

Point of Order

Mr. Speaker: The honourable Member for River Heights (Mr. Gerrard), on a point of order.

Hon. Jon Gerrard (River Heights): I believe there would be leave of the House to go straight to Bill 227.

Mr. Speaker: Is there leave of the House to go directly to Bill 227? [Agreed]

SECOND READINGS – PUBLIC BILLS

Bill 227–The Fetal Alcohol Spectrum Disorder Reporting Act

Hon. Jon Gerrard (River Heights): I move, seconded by the MLA for Inkster (Mr. Lamoureux), that Bill 227, The Fetal Alcohol Spectrum Disorder Reporting Act; Loi sur la déclaration obligatoire de l'ensemble des troubles causés par l'alcoolisation fœtale, be now read a second time and be referred to a committee of this House.

Motion presented.

Mr. Gerrard: Mr. Speaker, this bill is a bill which provides for the reporting of children with fetal alcohol spectrum disorder so that we can know the incidence and prevalence of FASD in Manitoba, so that there can be appropriate planning in relationship to schools and education, so that there can be appropriate planning in relationship to Child and Family Services, Health and, indeed, for Justice.

It is, in a sense, a historic day today, having the President of Ukraine visiting this Legislature. It is wonderful to have the President of Ukraine here, but it is sad to have to talk today about the awful, terrible record of this government with regard to FASD.

In eight and a half years, we have seen total inaction when it comes to reporting of the basic information on the incidence and prevalence of FASD in Manitoba. We still don't know what the incidence and prevalence is with any reliability. It is a government, with regard to FASD, that has been going blind and has really no idea where we are going because, in fact, they have failed in eight and a half years to make sure that the basic information
about the incidence and prevalence of this condition is known in Manitoba.

It is a government which has buried its head in the sand. It's a we-don't-want-to-know government. I've asked this government time and time again to stand up and be counted and make sure we know what's going on with FASD. Time and time again, one minister after another has said, oh, we can't do that. We don't want to know. That might be difficult for us to know exactly what the incidence and prevalence is.

* (10:10)

This is a government which has chosen to be blind. It is sad, it is awful, it is a story of wasted lives and huge wasted dollars in terms of what is happening in this province. They have pretended time and time again that the diagnosis of FASD is so difficult that it's impossible to do. This is absolute nonsense. Dr. Chudley and many others, not only here but around the world, have been making the diagnosis of FASD for several decades now, I think, since the early '70s.

You know, the Tories, sadly, are not any example here because they cancelled the original registry which had been present prior to 1993. The cost in lives and in dollars has been huge. You know, it is incredible. We can ask, how could the NDP so shockingly abandon some of the most vulnerable people in our province? How could the NDP so callously waste the lives of people because they haven't done the basic work that needs to be done in this province?

The children with FASD, as we now know, have a brain that works differently from the normal brain. I'll give you a very brief example given to me by a mother who was raising a child with FASD. This was a child who was learning in her tutelage and doing well in many respects but developed a problem. He started shoplifting. She tried everything she could in the regular way of preventing him shoplifting, but it didn't work. She realized that he was taking the things that he was shoplifting and putting them in a pillowcase. So one day she decided in desperation to take away the pillowcase, and all of a sudden, the shoplifting stopped just like that. She waited two weeks and there was no more shoplifting. Then she put the pillowcase back and it started again. Then she took it away and it stopped again. This went on through several cycles until he was completely cleared of the shoplifting problem.

But it shows that these children need an approach which is different from the traditional approach. That is why it is so important to be able to identify them very early on, to provide them with the supports and the education so that they can grow up and have good, solid, productive, contributing lives and be happy with the people around them and be supported by the people around them. The tragedy of children who are not diagnosed early is that all too often they are being labelled as that terrible, awful kid. It starts a vicious cycle in which the kid goes from bad to worse because his self-esteem falls, and he can never perform and he can never meet the standards that his parents expect because they are expecting something from him which he can't do because he has FASD.

We know so much more about how to help these children, but because the effort has not been made to diagnose all the children, to report these children so we know what the incidence and prevalence is, there have been huge numbers of children who have fallen through the crack, who have had problems in their childhood, who have ended up in care, who have had problems in their schools, have had problems in society, all too often, sadly, become juvenile delinquents or criminals, and this is preventable. This is preventable and this government has not done the work which needs to be done. It is so sad and so awful to see this happening year after year that this government has held its head in the sand and has behaved in such an awful, terrible way with regard to children with FASD.

The legacy is in high crime rates and troubled communities and education problems and problems that we're talking about in Child and Family Services almost every day in this Chamber, because this government has not done the basic work that they should have done and made sure that we have a basic understanding of things like the incidence and prevalence. How can we plan for school divisions with not knowing how many children they have to deal with, with FASD? How can Child and Family Services operations agencies work effectively if they don't know the basic details of whether a child has FASD or not, and they are not provided with the tools to help these children grow and learn, hopefully, in their own family? It makes a huge difference to have a diagnosis early on because parents and the people around them change their attitude, become sensitive to, this is a child who is different, who has FASD. This is a child who we can help, but we don't help them in the way that we help
a normal child. We have to adapt and change and be sensitive that his brain works differently.

So there is so much to do and there is so much potential and so much possibility and that is why it is so sad. It is not just a waste of lives. It's incredible waste of dollars for every child who has FASD where we're not preventing, where we're not doing the work to make sure the child has an opportunity, even when it happens that that child is going to cost the province about $2 million over the lifetime of that child. That's the current estimate.

We don't know what the incidence is. We don't know exactly how much it's costing, but if there are a hundred children a year, and it's probably 200 or 300, we just don't know because this government hasn't done the work, but if it were a hundred, that's $200 million every year. Over eight and a half years, that's $1.7 billion that is spent on a condition that is preventable and which is preventable because this government didn't do the work.

It may not be $1.7 billion. It may be double or triple that. We just don't know because this government has not done the basic work. Mr. Speaker, a waste of hundreds of millions of dollars because this government hasn't been paying attention to the basic, very essential facts, and that's why this bill is so important because we need to know what is happening with FASD in our province. We need to know the distribution, the incidence, the prevalence.

We need to know this not just for the whole province, but we need to know it community by community so communities can have an action plan so we can change the way we approach FASD in this province, so we can make a big difference in the lives of children and families and communities and, indeed, in the life of the whole province.

So, Mr. Speaker, I call on the government and the Conservative MLAs to come forward and support this bill because it's far past time that we brought some basic sense to the approach to FASD in this province. I hope that, indeed, this issue being so critically important to the children of Manitoba, we will have the support that is fundamentally needed. That is my hope this morning. Thank you.

Hon. Kerri Irvin-Ross (Minister of Healthy Living): I need to put some facts on the record about this government's commitment around FASD programming. When we took office in 1999, Mr. Speaker, there was a measly $10,000 for FASD programs and services, and in budget 2007, $7.5 million was invested across departments, working with community groups to improve services. This is a government who has acknowledged the impact of FASD in our society through the education and justice systems. FASD is a preventable disability.

I had the opportunity of attending the national FASD conference in Alberta last week. There we heard from many presenters that talked about the impact of FASD on individuals, on families, on communities, and on services that we support as government and as community agencies. The one message that we heard loud and clear was, yes, FASD children and adults, they have what some call a brain injury, but more importantly, these are people with abilities, people that make contributions to our society every day, and that we need to celebrate.

* (10:20)

There were many people who spoke from Manitoba at this conference. We had eight sessions where people talked about the economic impact of diagnosing, of intervention, of prevention initiatives. Manitoba is considered one of leaders in Canada. As we worked together with all of the partners, we were able to share valuable information on what do we do to address this issue that is creating havoc for some individuals as well as communities, and by working together we can do that.

Some of the examples of the $7.5-million investment that was announced last year include four new FASD specialists; expanding of the Youth Justice Project to The Pas; a new community-based youth and adult resource centre called Spectrum Connections; further investment in research; expansion of diagnostic services and a provincial training strategy for professionals, as well as a public education component; and the expansion of the very important and evidence-based project called Stop FASD.

These services will continue to provide the supports that are necessary for families that are dealing with children with the diagnosis of FASD. There has been lots of information that talks about mentoring as one of the ideal ways to support families and also to support further pregnancies that are impacted by alcohol and drug use. I think, as we continue to develop with our partners and develop a strong ability to support these individuals and these families, we will make a difference.
The member talks about diagnosis. We need to put on the record about the current diagnosis that happens in Manitoba. We have two clinics. We have the clinic for alcohol and drug-exposed children, CADEC team that we call it, which is at the Children's Hospital, Mr. Speaker, but also provides support throughout Manitoba through Telehealth.

We know that diagnosis is important and best done by a co-ordinated diagnostic team, which consists of a social worker, a physician trained in FASD, psychologists, occupational therapists and speech and language pathologists. Any physician that feels capable of making a FASD diagnosis can do so; however, almost all FASD diagnosis is done by the CADEC team.

It's reported that approximately 200 children a year are diagnosed in Manitoba. We need to ensure that the referrals are received from a number of sources: from physicians, from hospitals, from community professionals, child welfare staff, in schools and parents for children. Our increased diagnostic capacity will help support diagnosis and early identification which will continually enhance and encourage intervention strategies that are needed to support the children.

It's noted that we need to ensure that we learn from the child with FASD or the adult about how do they learn best. Our challenge is to adapt our current practices, whether they're in education as far as parenting, to best support the children. We know that, by working together, we can make a difference.

Ms. Bonnie Korzeniowski, Deputy Speaker, in the Chair

When we were at the conference last week, there was a talk about the importance of universally screening pregnancies. I'm proud to say that in Manitoba we're the leader. We are getting that information directly from moms as they are going through their pregnancy, asking that important question to help identify and provide the necessary supports.

One of the challenges that we have with FASD is the stigma. We need to make sure that we are not creating a hostile environment where women are afraid to come and identify alcohol usage during their pregnancy, that they're afraid to identify the addictions. We need to make sure that we provide them with an environment, a welcoming way for them to identify if they have an issue, so we can provide them with the necessary supports to try and prevent any problems to their unborn children, but also provide them with the necessary supports that they need to parent their children, so that their children can thrive.

Prevention is paramount. We know that education around alcohol use during pregnancy has shown to prove a reduction, but we need to keep getting that message out. We need to work with all of our partners. In Manitoba, the Manitoba Liquor Commission is one of those partners where they have developed different initiatives and have contributed funds to different campaigns. With Child Without Alcohol is one of those.

We continue to work on awareness campaigns with the FAS interagency group. We have also developed the FASD toll-free line, in partnership with Health Canada, to provide people with information that they need about the supports.

As we continue to work on prevention, it's important that we do provide the appropriate services for people with the diagnosis, make sure that we provide an environment where women are not feeling punished, an environment where women can step forward and acknowledge an addiction, if they have it, so we can provide them with the necessary supports.

We'll continue to work with our partners across Canada and learn from their best practices as we develop important services. There is not just one solution when we're talking about FASD. FASD, as I've said before, is preventable; we need to be providing that education.

There was talk at the conference about when does this education need to start. We don't have that answer right now. We need to make sure that it becomes part of societal value, if at all possible, make sure that we're getting that information to people.

There was one researcher who said, do we start when children are five years old, talking about that? They don't have that answer yet. What they do say is that we need to make sure that we're getting that message out, make sure that we're providing the necessary addiction services in the country to provide those supports.

I think this is a really good time for me to talk about what we've done around addiction services in Manitoba. There was an announcement that we made where we have made an additional investment of
$2.8 million for mental health professionals across the province of Manitoba. We also made an announcement about the reforming of the adult addiction system where we will see an expansion of services for women, for seniors, for individuals that have been diagnosed with FASD.

We provided that information out to the public. We'll continue to be working with them as we continue to develop these services.

Mr. Speaker in the Chair

I see that my time is almost up, but I want to really stress the fact that, as we work on this issue of FASD, we work together. Thank you.

Mr. Kevin Lamoureux (Inkster): Mr. Speaker, it's interesting to hear the last words of the Minister of Healthy Living (Ms. Irvin-Ross) when she says that we should be working together.

I would suggest to you, based on her last statement and how she emphasized the importance of education and then poses the question in terms of where do we start, there is so much the government can do.

One of the things I would like to recommend to the government is that we actually have a bill—it's Bill 203, The Liquor Control Amendment Act—that would be a great starting point for the minister, if she meant anything that she has just put on the record. I would suggest, Mr. Speaker, that she should get behind Bill 203 and Bill 227.

Mr. Speaker, she emphasized the issue of education. Let's stop and think about that. When it came to education in regard to tobacco and cigarette smoke, one of the things that came to the surface and received all parties' support was the idea of labelling cigarette containers or boxes. We see those warnings that are on the cigarette packages.

One of these suggestions, and it's here in the form of a private member's bill, is that we should do the same thing with regards to alcohol, that there should be warning labels on alcoholic beverages or containers, Mr. Speaker, that would clearly show that drinking while you are pregnant does, in fact, put at risk the child. You know, it's interesting. Last week the Premier (Mr. Doer) accepted the bill that we are proposing, albeit somewhat modified possibly, in terms of second-hand smoke. I would look to the government to recognize yet another good idea that would be good for the children of our province.

It's interesting, within 24 hours of some media reports about the second-hand smoke bill, I had received an e-mail from a police officer—and I don't want to cite the name of the police officer—but it was interesting in reading the e-mail. He appreciated the fact that we were doing something on second-hand smoke, but he felt very frustrated that we were ignoring the issue of fetal alcohol syndrome. After expressing some frustration, he concluded, and he somewhat apologized by saying, you know, please excuse me, I just had to arrest or I was with an expectant mother that was obviously drunk and I felt that something should be done on FASD, and, Mr. Speaker, it should be done. Much like the second-hand smoke bill, we have another bill inside this Legislature that deals—

An Honourable Member: Why hasn't the NDP supported this bill?

Mr. Lamoureux: Well, Mr. Speaker, it is a good question. Why has the NDP not supported Bill 203? This is the second time it's been brought before the Chamber. What does this bill, Bill 203, actually do? It does exactly what it is that the Minister of Health (Ms. Oswald) or the Minister of Healthy Living (Ms. Irvin-Ross) is wanting this Chamber to do: talk about education.

Mr. Speaker, we even have New Democrats in Ottawa, Judy Wasylycia-Leis, a Member of Parliament that sat inside this Chamber, the Member for Burrows (Mr. Martindale), the Member for The Maples (Mr. Saran), the Member for St. Johns (Mr. Mackintosh), MLA or Member of Parliament, that is, saying that we should have warning labels on alcohol containers. Their MP is advocating for it. I don't understand why a New Democratic Party inside this Legislature does not see the merit of what it is that Liberals inside this Legislature are advocating and the New Democratic Party is advocating in Ottawa. I would suggest to you that if the Minister of Healthy Living has any belief in what she has just said, she should be approaching members of the Liberal Party inside this Chamber, or at the very least bringing in or indicating that this government will introduce legislation that will put labels and warning labels on alcohol containers. If there is an ounce of credibility to this government in the dealing with FASD, why will they not do that?

It is indeed about children. I listened to what the Minister of Healthy Living had to say. It's interesting when she talks about, well, we have to do what it is that we can, and she talks about education, and she
identified—I believe she said 200 people have been diagnosed. Two hundred children every year in the province of Manitoba being diagnosed.

Well, Mr. Speaker, the passing of this bill will assist in the recording, in the providing or ensuring that there's a better provision that would allow for appropriate services in specialized children with this disorder. So she stands in her place and she talks about the legislation in the sense of how important the issue is to the government, but why doesn't she allow or why doesn't she say clearly whether or not she supports this bill? Does the government support Bill 227? If you listen to what it is that the government is saying, one could conclude that not only would they support Bill 227 but they would also support Bill 203.

So, if they genuinely talk positively about these bills, then one has to ask the question: Why are they not then prepared to allow them to come to a vote and be voted on and ultimately go to committee? Well, I'm going to speculate a little bit on that particular point, Mr. Speaker. I believe that the government of the day is more interested in giving platitudes than it is terms of doing real action, taking real action.

The Member for Southdale (Ms. Selby) introduces a bill, and she is very optimistic about the passage of her bill, and you know what, Mr. Speaker? Just because the member happens to be in the party where there's a majority inside the Chamber, chances are it'll pass, but you know what—[interjection]

The arrogance that the Member for Wolseley (Mr. Altemeyer) brings to the Chamber—you know, last night there was a fairly dominant individual in the NDP when they weren't quite as arrogant and he talked about fairness. I would suggest that the Member for Wolseley should read what it is that took place in committee last night and maybe he could learn something, Mr. Speaker, in terms of ideas and the sense of fairness, that, at one point in time, the NDP were not a party of governance. One should acknowledge that ideas that come out of this Chamber, whether it's coming from a backbencher, from the New Democratic Party, or from an opposition member in the Conservative or Liberal caucuses, all bills warrant attention, debate and, I would argue, the opportunity to be voted on.

For those of you that believe that that is not the case, I would suggest to you that maybe you might want to revisit the whole idea of democratic principles, Mr. Speaker. I, for one, believe that there are bills that are before this Chamber that are in need of being voted on and would ask that the Minister of Healthy Living (Ms. Irvin-Ross) review the bills that are before us that could have a real positive impact on fighting FASD.

This is a disorder that affects hundreds of children every year and there are some initiatives that the government could be taking that would be virtually at no cost to the taxpayer. If, in fact, government wants to be proactive at dealing with FASD, then they should be acting on those initiatives.

Bill 227 does incur a cost if it's ultimately implemented, but, Mr. Speaker, there is a huge cost if we don't. Even if you use the minister's numbers of 200 incidents a year, if you multiply that over an eight-year period you're talking somewhere in the neighbourhood of 1,700, and then if you factor in the costs that have been established—

Mr. Speaker: Order.

Mr. Lamoureux: I appreciate the opportunity to have put those few words on the record. Thank you.

Ms. Erin Selby (Southdale): Mr. Speaker, children who are born with fetal alcohol spectrum disorder face a lot of challenges in their lives in the way they learn, in the way they work, even the way they play.

My daughters went to preschool when they were four years old with a young boy who had fetal alcohol spectrum disorder. He was a lovely child. He was smart. He was engaging. He was vibrant. He was bright, always laughing. He was a delightful child to be around and was always eager to hug everybody, not that the girls liked that as much because at that age they're not quite as crazy about the boys hugging them, but he was really a lovely little person but he had a hard time even in preschool paying attention.

Things were difficult for him and luckily he had a great support system around him. He had parents that were educated on how to best support their son and were really very involved in his education, and I have no doubt that he will probably grow up to be a very productive member of our society. I hope that he maintains that wonderful distribution that he had, the outgoing, friendly lifestyle that he had.

* (10:40)

The sad thing about FASD is that it's preventable. It is a difficult thing for children to
grow up with, but it is preventable, which says to me that the most important thing we can do is, well, obviously, prevent FASD. The way to do that is through education.

I think that it doesn't help to make a mother feel bad once a child is born with FASD because the reasons why a mother may have been drinking during her pregnancy are very complex and not so quick to judge, I hope. The most important thing we can do is to educate those people.

Manitoba Liquor Control Commission makes an annual commitment With Child Without Alcohol that began in 2002. It's an awareness campaign that first teaches people, don't drink when you're pregnant.

I know it seems pretty obvious to most of us that you shouldn't drink when you are pregnant. I had my daughters in the year 2000, and I had several books to read through on pregnancy: what to expect when you're pregnant and many, many other ones, including some specialty books for multiple families. Well, I had one book that actually, in the last chapter, said it's okay to have a glass of wine in the last couple of weeks before you give birth. It will relax you. It will help you get through those last uncomfortable weeks. It actually said this in a book that was published and sold in bookstores and not little small ones, big chains, across Canada. Well, I knew better. I knew better than that, and I didn't drink at all during my pregnancy because I was educated, but it's actually in a book out there. I would hope it's not on bookshelves any longer. That's why it's so important for parents to know and for people, who are in their case where they may get pregnant, to understand that not drinking is the most important part.

The With Child Without Alcohol program was developed with a lot of experts in the community. With the assistance of Healthy Child Manitoba, the FAS group, Health Canada and, of course, the folks at Addictions Foundation of Manitoba, the Coalition on Alcohol and Pregnancy, the Fetal Alcohol Family Association of Manitoba, New Directions agency and the Manitoba College of Physicians and Surgeons.

Well, these are certainly the people that I would trust to give us information on how to best prevent FASD in the first place. As I was saying earlier, people who may have issues with drinking or drugs or other substance abuse, it's not as easy as just saying don't drink in your pregnancy, which is why we're taking advice from folks at the Addictions Foundation of Manitoba. They know better certainly than I do on how to best reach people who may be living with a lifelong substance abuse problem.

I think it's also important to talk to people in the Fetal Alcohol Family Association of Manitoba about the supports that families will need if they do have a child who is FASD.

The child that my children went to school with in preschool was adopted, and the parents recognized that there may be some issues there, had a diagnosis and were able to work with their pediatrician and with their educational professionals to get the best help.

There's also information kits available for families and also for people who are working with families who may come across FASD.

The With Child Without Alcohol program includes information kits. It's got a Web site. There are pamphlets that you can pick up at your liquor mart. There are also messages, of course, on the liquor mart bags and messages when you go into the liquor mart, posters and lots of signage telling you that this is not a safe thing to be doing.

I think it's important that we educate people, of course, before we get to that point, before someone's walking into a liquor store. That's why you'll see those posters in many places in the community in terms of health places like doctors' clinics, regional health authorities and wellness centres, that sort of thing. You'll see those posters up of, If You're Pregnant, Don't Drink. Hopefully, people will get that message long before walking into a liquor store.

The signs warning people have been up in liquor stores since 1999. That's a good way to start educating people. It's also important to educate people who might be serving somebody. That's a tough one, but it certainly is important to educate people on the dangers of selling alcohol and that sort of thing.

I've also done things to help children who might already be diagnosed because it is important, of course, the most important thing being prevention, but after that, Mr. Speaker, if you have children who, unfortunately, have been diagnosed with FASD, families need support systems. Educators need support systems.
Four FASD specialists have been hired by Child and Family Services to support those families who are impacted by FASD.

Healthy Child Manitoba also has several services, including the Stop FASD program. It's a mentoring program that works with women who are pregnant. It's easy for me to stand here and say don't drink when you're pregnant; it wasn't so difficult for me. I was pregnant, I didn't drink, but I don't have some of the issues that possibly some people are facing when they get pregnant. This is a mentoring group that supports women who are pregnant and supports them not to drink even if they may have a problem and may have a substance abuse problem. The program has been extended now to include Thompson and The Pas.

There's also an FASD education pamphlet that's in rotation and in mail-outs that goes out to folks in prenatal benefits, so that they will be reminded as well with the prenatal benefits that, remember, drinking can be not just a minor thing; it can leave your child with lifelong difficulties.

There's an FASD toll line that is free for anybody—this is joint with Health Canada—that anybody can call in and get information, get support, another important thing.

Reclaiming Our Voices is a west region CFS program that helps women who did drink during pregnancies; perhaps someone with a substance abuse problem or alcoholic problem drank in a previous pregnancy and realizes that she wants to make things different and, in subsequent pregnancies, wants to go into it with more healthy choices, but that takes a lot of support. That's not something that you can just read about and change overnight. Thankfully, there are people there who will support people into their next pregnancies to try to make sure that they have safe pregnancies that time.

It's also important for doctors to be educated on this, which is why the clinical practice guidelines for physicians which were developed in partnership with the College of Physicians and Surgeons, and for doctors to support both women who are pregnant and their families—it's not just women going through it alone; it's important for their partner and their families to support them through pregnancy as well—and also to support families who may have a diagnosis of FASD. Who knows better than those folks in the community who work with this all the time?

What Doctors Need to Know About FASD is a CD that's available to every family doctor, obstetrician, gynecologist and all graduating medical students in Manitoba. This means that everybody who's practising medicine here in Manitoba, any doctor who's going to be in contact with children and with pregnant women is well-versed on how to help women and how to educate them on the dangers of drinking while pregnant.

It's also important for our correctional officers to know because we know that there are higher incidents of children with FASD who may come in contact with the correctional institutions, Mr. Speaker. It's important for our correctional officers to understand how to best communicate with these children as well.

Another difficult thing is for educators because, as we know, many children with FASD are also ADHD and can be a little bit more difficult in the classroom. They can be, absolutely, children who are just as smart as the child next to them, but they may have some attention problems. That requires a different way of teaching them.

So we are supporting educators and early educators, in particular, with different programs so that they can learn to best reach those children. I think the most important thing is to reach them through early education, Mr. Speaker, which is why we are also supporting early education and putting unprecedented amounts into day care in this province, so that we can make sure that our children not only have a safe place to go for day care, but that they're getting an early childhood education, that there is a curriculum for children and that does nothing except support any child, but particularly those with FASD who can benefit from an earlier start into education and that sort of consistency.

SMART Guide: Motivational Approaches Within the Stages for Changes for Pregnant Women Who Use Alcohol is also a program that's out that can explain to people more about how to get through the different stages and how to support women who may have already come into pregnancy with a drinking problem.

Unique to Canada, universal screening for alcohol use is here in Manitoba during pregnancy. It was implemented in 2003 to help measure the success of preventive efforts and assist in new targets. Again, Mr. Speaker, I think we need to focus on preventative—preventative is not about judging. It's not about making people feel like they have no
hope; it's about supporting people. It's about educating people, and it's about getting at the roots of the problems that may have led to the situation in the first place.

I think it's really important to know that our teachers are getting support through different materials in the health curriculum for grades kindergarten to 12, not only our teachers, but our students, because it's important to talk to your children about the dangers of drinking during pregnancy. It's important that, while our kids are learning about how to be healthy and how to eat healthy food and make sure that they exercise, it's not too soon to talk to them about the dangers of drinking during pregnancy as well.

There's a lot of support in intervention services through Healthy Child. Healthy Child supports two specialized classrooms for children with FASD at David Livingstone School because, as we know, children with FASD learn differently. They can learn. They're very bright children, but they learn differently and need different support. That is why we have two classrooms for them to learn the way that they will best absorb the material.

We've also got funding to the Fetal Alcohol Family Association of Manitoba which provides support--

* (10:50)

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

House Business

Mr. Speaker: The honourable Government House Leader, on House Business.

Hon. Dave Chomiak (Government House Leader): I want to thank all members of the Chamber, yourself, and particularly the table staff, the Clerks and Translation Services for doing a superb job of extraordinary efforts because today's an extraordinary day, and we are very, very grateful to the staff, to yourself, Mr. Speaker, and to the Chamber that we're able to, in this system, accomplish something which is not only symbolic but of tremendous importance to millions of people.

Mr. Speaker, we have asked that the House adjourn at 11 o'clock, and I'm just asking that perhaps you not see the clock at 11 until we have had the opportunity to have all of the speakers who are going to speak. I believe Mr. Derkach of Russell, a member of the Liberal Party's going to speak, and the co-sponsor of the bill's going to speak.

Mr. Speaker: I'm going to deal with it right away.

Mr. Chomiak: And so I'm asking, if we're not totally complete by 11 o'clock that perhaps you might not see the clock at 11 o'clock in order to allow us to complete these matters as the Ukrainian president is arriving shortly at the Legislature. Thank you, Mr. Speaker, and I thank all members of the House.

Mr. Speaker: Is there agreement that we will leave the debate on Bill 27 remaining open, and we will deal with this other issue. Is that the agreement of the House? [Agreed]

When the matter is again before the House, the bill will remain open.

COMMITTEE REPORTS

Standing Committee on Social and Economic Development
Second Report

Ms. Erna Braun (Chairperson): Mr. Speaker, I wish to present the Second Report of the Standing Committee on Social and Economic Development.

Mr. Speaker: For all these motions, we will require leave of the House. Okay, is there leave to move the motion? [Agreed]

Madam Clerk (Patricia Chaychuk): Your Standing Committee on Social and Economic Development presents the following as its Second Report.

Some Honourable Members: Dispense.

Mr. Speaker: Dispense.

Meetings

Your committee met on Monday May 26, 2008, at 4 p.m. in Room 254 of the Legislative Building.

Matters under Consideration

Bill No. 10 – The Legislative Library Act/Loi sur la Bibliothèque de l'Assemblée législative

Bill No. 13 – The Highway Traffic Amendment Act (Damage to Infrastructure)/Loi modifiant le Code de la route (dommages causés à l'infrastructure)

Bill No. 15 – The Climate Change and Emissions Reductions Act/Loi sur les changements climatiques et la réduction des émissions de gaz à effet de serre
Bill No. 16 – The Child Care Safety Charter (Community Child Care Standards Act Amended)/Charte sur la sécurité des enfants en garderie (modification de la Loi sur la garde d'enfants)

Bill No. 19 – The Liquor Control Amendment Act/Loi modifiant la Loi sur la réglementation des alcools

Bill No. 21 – The Advisory Council on Workforce Development Act/Loi sur le Conseil consultatif du développement de la main-d'œuvre

Bill No. 22 – The Worker Recruitment and Protection Act/Loi sur le recrutement et la protection des travailleurs

Bill No. 23 – The International Labour Cooperation Agreements Implementation Act/Loi sur la mise en œuvre des accords internationaux de coopération dans le domaine du travail

Bill No. 27 – The Shellmouth Dam and Other Water Control Works Management and Compensation Act (Water Resources Administration Act Amended)/Loi sur la gestion du barrage Shellmouth et d'autres ouvrages d'aménagement hydraulique et sur l'indemnisation découvrant de leur fonctionnement (modification de la Loi sur l'aménagement hydraulique)

Bill No. 31 – The Freedom of Information and Protection of Privacy Amendment Act/Loi modifiant la Loi sur l'accès à l'information et la protection de la vie privée

Bill No. 32 – The Personal Health Information Amendment Act/Loi modifiant la Loi sur les renseignements médicaux personnels

Bill No. 33 – The Salvation Army Grace General Hospital Incorporation Amendment Act/Loi modifiant la Loi constituant en corporation « The Salvation Army Grace General Hospital »

Bill No. 34 – The Child and Family Services Amendment and Child and Family Services Authorities Amendment Act (Safety of Children)/Loi modifiant la Loi sur les services à l'enfant et à la famille et la Loi sur les régies de services à l'enfant et à la famille (sécurité des enfants)

Bill No. 36 – The Municipal Assessment Amendment Act/Loi modifiant la Loi sur l'évaluation municipale

Bill No. 217 – The Ukrainian Famine and Genocide Memorial Day Act/Loi sur le Jour commémoratif de la famine et du génocide ukrainiens

Committee Membership

Committee Membership for the meeting:
Mr. Altemeyer
Ms. Braun (Chairperson)
Mr. Derkach
Hon. Mr. Lemieux
Hon. Ms. Oswald
Mr. Pedersen
Hon. Mr. Robinson
Hon. Mr. Rondeau
Mrs. Stefanson
Hon. Mr. Struthers
Mrs. Taillieu

Your committee elected Mr. Altemeyer as the Vice-Chairperson.

Substitutions received during committee proceedings:
Hon. Ms. Melnick for Hon. Mr. Struthers

Bills Considered and Reported

Bill No. 217 – The Ukrainian Famine and Genocide Memorial Day Act/Loi sur le Jour commémoratif de la famine et du génocide ukrainiens

Your Committee agreed to report this Bill, with the following amendments:

THAT Clause 1 of the Bill be amended in the section heading and in the section by adding “(Holodomor)” after “Genocide”.

THAT the title be amended by adding “(HOLODOMOR)” after “GENOCIDE”.

Bills Considered and not Reported

Bill No. 10 – The Legislative Library Act/Loi sur la Bibliothèque de l'Assemblée législative

Bill No. 13 – The Highway Traffic Amendment Act (Damage to Infrastructure)/Loi modifiant le Code de la route (dommages causés à l'infrastructure)

Bill No. 15 – The Climate Change and Emissions Reductions Act/Loi sur les changements climatiques et la réduction des émissions de gaz à effet de serre

Bill No. 16 – The Child Care Safety Charter (Community Child Care Standards Act Amended)/Charte sur la sécurité des enfants en garderie (modification de la Loi sur la garde d'enfants)

Bill No. 19 – The Liquor Control Amendment Act/Loi modifiant la Loi sur la réglementation des alcools
Bill No. 21 – The Advisory Council on Workforce Development Act/Loi sur le Conseil consultatif du développement de la main-d’œuvre

Bill No. 22 – The Worker Recruitment and Protection Act/Loi sur le recrutement et la protection des travailleurs

Bill No. 23 – The International Labour Cooperation Agreements Implementation Act/Loi sur la mise en œuvre des accords internationaux de coopération dans le domaine du travail

Bill No. 27 – The Shellmouth Dam and Other Water Control Works Management and Compensation Act (Water Resources Administration Act Amended)/Loi sur la gestion du barrage Shellmouth et d'autres ouvrages d'aménagement hydraulique et sur l'indemnisation découlant de leur fonctionnement (modification de la Loi sur l'aménagement hydraulique)

Bill No. 31 – The Freedom of Information and Protection of Privacy Amendment Act/Loi modifiant la Loi sur l'accès à l'information et la protection de la vie privée

Bill No. 32 – The Personal Health Information Amendment Act/Loi modifiant la Loi sur les renseignements médicaux personnels

Bill No. 33 – The Salvation Army Grace General Hospital Incorporation Amendment Act/Loi modifiant la Loi constituant en corporation « The Salvation Army Grace General Hospital »

Bill No. 34 – The Child and Family Services Amendment and Child and Family Services Authorities Amendment Act (Safety of Children)/Loi modifiant la Loi sur les services à l'enfant et à la famille et la Loi sur les régies de services à l'enfant et à la famille (sécurité des enfants)

Bill No. 36 – The Municipal Assessment Amendment Act/Loi modifiant la Loi sur l'évaluation municipale

Ms. Braun: Mr. Speaker, I move, seconded by the honourable Member for Burrows (Mr. Martindale), that the report of the committee be received.

Motion agreed to.

Mr. Leonard Derkach (Russell): Mr. Speaker--

Mr. Speaker: Order. The honourable member is speaking to the--

Mr. Derkach: I'm moving a bill.

Mr. Speaker: Okay. You're moving a bill. Okay, by leave, please.

CONCURRENCE AND THIRD READINGS–PUBLIC BILLS

Bill 217–The Ukrainian Famine and Genocide Memorial Day Act

Mr. Leonard Derkach (Russell): Yes. By leave, Mr. Speaker, I move, seconded by the Member for Burrows (Mr. Martindale), that Bill 217, The Ukrainian Famine and Genocide Memorial Day Act, as amended and reported from the Standing Committee on Social and Economic Development, be concurred in and be now read for a third time and passed.

Motion presented.

Mr. Derkach: Mr. Speaker, this is indeed a special day for Manitobans and for this Legislature. Today the Premier (Mr. Doer) and his government, and all of us in the Legislature indeed are involved in it, hosting the President of Ukraine, His Excellency President Yushchenko.

Mr. Speaker, I know that we have only a few minutes here left before the House will rise, but I do want to put a few comments on the record with regard to this bill. First of all, I want to thank the members of this Legislature for giving this bill the kind of support that I think an act of this kind deserves. I want to thank the Member for Burrows (Mr. Martindale) who supported and seconded the bill and, of course, the House leader who, I think, has a personal passion for things of this kind because indeed he, like me, are both of Ukrainian descent and we have a close connection to the community, and to this country, for that matter.

Mr. Speaker, I want to also mention that yesterday, the Ukrainian Professional and Business Club of Winnipeg filled a second container of medical supplies as a humanitarian gesture of aid to Ukraine, and this is the second container that is going to Ukraine to the region of Sumy. It is actually the region that the president's mother lives in.

So today is another special day in that we, as Manitobans, are showing the humanitarian side of this province and of the people within this province by sending this container of medical supplies to Ukraine. So, Mr. Speaker, I know there are a couple of other people who want to speak to this bill. I'm just very pleased to be the sponsor of this bill and I
thank the House for giving me leave, as a member of the opposition, to bring this private member's bill in and to have it passed in such timely nature. Thank you.

Hon. Jon Gerrard (River Heights): Mr. Speaker, I rise in support of Bill 217. It is important that we remember the Holodomor, the genocide that happened in 1933. I've heard personal stories first-hand but second-hand, third-hand stories of the awful things that happened, the forced famine, the people who starved and died. These are stories which need to be told. They need to be told because they were so awful, so unthinkable that we need to be reminded of what happened, but we also need to make sure that we are doing everything we possibly can to prevent these sorts of awful happenings from ever happening again.

It is tragic that in places like Darfur there are still terrible things going on, but that is one of the reasons why we must remember what happened and know and understand what happened in the Ukraine in around 1933 so that we can be alert and we can do what we can to speak out and to prevent such terrible occurrences from every happening again.

Mr. Doug Martindale (Burrows): Mr. Speaker, it has been my pleasure to be the second for Bill 217, The Ukrainian Famine and Genocide Memorial Day Act and I would like to congratulate the Member for Russell (Mr. Derkach) for introducing this and getting it through the Legislature which doesn't happen very often with private members' bills, but today we have all-party support and that's important.

The Ukrainian famine and genocide is a very important issue for Ukrainians in Ukraine and in the diaspora around the world. It's also important for everyone concerned about human rights because this famine saw the death of an estimated 7 million to 10 million Ukrainians between 1932 and 1933 and this in itself was a terrible abrogation of human rights, namely, the basic right: the right to live.

Winnipeg will be the home of the Canadian Museum for Human Rights and the Ukrainian community in Canada is actively raising money and advocating for a permanent exhibit on the Ukrainian famine. I hope they will be successful in that endeavour and we look forward to this bill being passed at third reading this morning. Thank you.

*(11:00)*

An Honourable Member: Question.

Mr. Speaker: Before putting the question, I just want to thank our table officers and the translators for giving the extra effort for this to be happening this morning.

Is the House ready for the question?

Some Honourable Members: Question.

Mr. Speaker: The question before the House is third reading of Bill 217.

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

An Honourable Member: Unanimous.

Mr. Speaker: Unanimously? [Agreed]

As previously agreed, the hour being 11 a.m., we will now recess and we will reconvene at 1:30 p.m.
ORDERS OF THE DAY

PRIVATE MEMBERS’ BUSINESS

Second Readings–Public Bills

Bill 227–The Fetal Alcohol Spectrum Disorder Reporting Act

Gerrard 2417
Irvin-Ross 2419
Lamoureux 2421
Selby 2422

Committee Reports

Standing Committee on Social and Economic Development
Second Report
Braun 2425

Concurrence and Third Readings–Public Bills

Bill 217–The Ukrainian Famine and Genocide Memorial Day Act
Derkach 2427
Gerrard 2428
Martindale 2428
The Legislative Assembly of Manitoba Debates and Proceedings are also available on the Internet at the following address: