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Mr. Speaker: O Eternal and Almighty God, from Whom all power and wisdom come, we are assembled here before Thee to frame such laws as may tend to the welfare and prosperity of our province. Grant, O merciful God, we pray Thee, that we may desire only that which is in accordance with Thy will, that we may seek it with wisdom, know it with certainty and accomplish it perfectly for the glory and honour of Thy name and for the welfare of all our people. Amen.

ORDERS OF THE DAY
PRIVATE MEMBERS' BUSINESS
House Business
Hon. Dave Chomiak (Government House Leader): Mr. Speaker, I believe there's an agreement to go to Bill No. 240, The Public Schools Amendment Act, and also at 11 a.m., to deal with the resolution on the Order Paper provided today, Resolution No. 20. Thank you.

Mr. Speaker: Is there agreement to go directly to second reading of Bill No. 240, The Public Schools Amendment Act (Diabetes Protocol)? Is there agreement? [Agreed]

SECOND READINGS–PUBLIC BILLS
Bill 240–The Public Schools Amendment Act (Diabetes Protocol)

Hon. Jon Gerrard (River Heights): Mr. Speaker, I move, seconded by the MLA for Inkster, that Bill No. 240, The Public Schools Amendment Act (Diabetes Protocol); Loi modifiant la Loi sur les écoles publiques (protocole d'intervention portant sur le diabète), be now read a second time and referred to a committee of this House.

Motion presented.

Mr. Gerrard: Mr. Speaker, this bill, the diabetes—presents a diabetes protocol, is put forward today for several reasons.

First of all, we've recently passed a bill which deals with the addressing the issue of schools, ensuring they have an approach to anaphylaxes and that looking at health-care emergencies, that one of these is related to diabetes and would be hypoglycemic episodes as a result of diabetes and making sure that schools are not only aware but are prepared to deal with this adequately and appropriately.

But there is also, of course, a larger issue and that is that we have in Manitoba an epidemic of diabetes at the moment and we need to make sure that we're taking every possible occasion to highlight the nature of the epidemic and doing what we can to have a better understanding of the epidemic, treat it as an epidemic, and make sure that there is information in the schools about what is happening and about this disease.

Now, of course, the disease in children is primarily type 1 diabetes, and the disease which is epidemic is primarily the type 2 form of diabetes. But, because these are related and that they are similar problems in the handling of blood sugar, it is helpful therefore, and in fact, because there are children now who are developing type 2 diabetes, that it is helpful to be able to talk about diabetes in schools and making sure that there is a consistent approach throughout Manitoba.

Now, this bill would build upon work that has been done in quite a number of schools and, indeed, in a fair number of school divisions already, where schools are making sure that there are health-care plans for children with diabetes and that what we're trying to do here is highlight the positive things that have already been done but search at the same time to have a standard that would be available and used province-wide, and that is why you would have this diabetes protocol for public schools.

It is an important condition. It is an opportunity to ensure not only that each child is well looked after, has the appropriate information on file and so on, but it is also an opportunity to ensure that the school staff have the training provided on not only the causes of diabetes, information on diabetes prevention, management and treatment, as well as the steps which are needed in terms of dealing with a health emergency related to diabetes so that this bill will address an important issue in terms of managing health-care emergencies in schools, but it will also address a very important issue in terms of dealing with diabetes and highlighting the fact that we have an epidemic and that we need to be treating this and
making sure the schools are fully aware of what is happening and everything that can be done to prevent diabetes.

Well, Mr. Speaker, that is the reason for the bill, and that is the content of the bill, and so I submit and I hope that other members of the Chamber will see fit to supporting this and having it go to committee. We're certainly open if there are suggestions for some modifications or changes to listening to those and would welcome input from MLAs on all sides of the Legislature. Thank you.

Hon. Peter Bjornson (Minister of Education, Citizenship and Youth): Well, thank you very much, Mr. Speaker, and it's a pleasure to rise in the House today to speak to Bill 240 as proposed by the members of the Liberal Party.

Ms. Marilyn Brick, Acting Speaker, in the Chair

One of the first meetings that I ever had when I was teaching was a staff meeting to discuss the health needs of individuals in our school, and that, of course, had to deal with individuals who had potentially lethal consequences for coming into contact with foods or other allergens. It had to deal with a variety of different health needs, whether it was asthma or diabetes in fact, and when students were identified to have these health needs we discussed it at the staff meeting and discussed the protocols, and we discussed the protocols that had been in place by the division, and also, ultimately, by the Province through what is referred to as URIS, the Unified Referral Intake System, and that staff meeting was quite involved.

* (10:10)

We would have, among other things, video instruction about the particular needs of students. We would have public health nurses come to the school and demonstrate how to properly administer an EpiPen, once recognizing the results of a reaction.

We would have a variety of different professional development opportunities as teachers as well, when you knew that you had a student in your classroom that had these health needs that could be, potentially, emergent. And that was something that we did every year, and it was something that we did every year when new students came with new needs. And it's something that happens in school divisions throughout the province of Manitoba. It's something that happens in schools throughout the province of Manitoba.

And we would have cases where the individuals would be identified in the staff room so everybody knew, even if that individual wasn't in your class or any other classes, you would know that that individual had a potential health need, that there was a protocol in place to address those needs.

So, Mr. Speaker, or pardon me, Madam Speaker, what the member is proposing is something that's already happening. And, again, it's URIS, Unified Referral Intake System.

So there is training for teachers and that training happens when the needs are identified. There is consultation with the regional health authorities and public health nurses on occasion, depending on the division and the resources that are available to them to support the URIS program.

But it is happening already. And, certainly, Madam Speaker, what the bill is implying is that it's not happening enough. But, I can assure the members of this Chamber that the Unified Referral Intake System is a system that's been in place for some time now that is designed to address these specific needs that the member speaks about.

And this was jointly created through Family Services and Housing; through Education, Citizenship and Youth; and Manitoba Health and Healthy Living. There are a number of departments that were working on this initiative, as many departments often do when it comes to the needs of our children. And, as the member knows, through the Healthy Child Committee of Cabinet, that there are a number of departments that are already working together to address the needs of children from prenatal care with the prenatal benefit through to age 29. That's a commitment of the Healthy Child Committee of Cabinet.

So to have three departments working on this initiative is not unprecedented and, as such, a very important part of the strategy to make sure that specific health routines are safely delegated to non-health individuals. And I know—I know, as a teacher, that the notion of me having to give a needle was somewhat terrifying for me because I was not trained for that purpose. But, once we go through that process, and you have the public health nurse and you have other medical professionals come and talk to you about the symptomology, talk to you about some of the things that you can expect if a student were to have a severe health-care need and, of course, the procedures that were in place, it was comforting to me to know that I'd be able to do what
was necessary to provide medical assistance to that student, if that student found his or herself in such a situation.

So, the training's there; the training happens. It is part of the requirements under the Unified Referral Intake System. So this is not just teachers that might be responsible for this. This is also educational assistants or even early childhood educators that are part of this health-care plan that is developed and the training that is provided by registered nurses.

Now, fortunately, I didn't have to use that training. I'm very fortunate that our students in Gimli High School who had such needs did not find themselves in such peril that it would require me to act. But I was comforted by the fact that I had the training and the experience that would be necessary to provide comfort for that student until medical professionals could address the needs if the need was there to do so and to go to the hospital for subsequent care.

But what URIS provides is a uniform system. I know the member said that it's not happening consistently throughout the province. This is what the member is suggesting. But, it actually provides a uniform and defined service path so that people can respond to the health-care needs of their students. And, of course, as a teacher, we instinctively want to do everything we can to protect our students in our classroom, whatever that need might be, and we instinctively do so, but we also do so based on the information that we receive, as I said, through this URIS program and through the assistance and training that is provided by registered nurses.

Now the needs of children with diabetes attending community programs are also addressed through the URIS policy, and it continues to develop and update training standard manuals for use by registered nurses.

So what the member is talking about is actually happening throughout the schools, and I know, as I said, as a teacher, these are meetings that we had every year. If new students arrived midway through the term or midway through the school year that had health-care needs, then that was on the staff meeting agenda first thing in the morning when the arrival of that–of that student.

So, Madam Speaker, what the member is suggesting on the surface is, yes, it's important, it's necessary. But what the member is suggesting isn't happening is incorrect. It is happening throughout our schools, and if you look at specifically the issue of diabetes, yes, we do recognize the impact of diabetes throughout the province and the strategies that we're developing to address that. We do recognize that diabetes is a very profound problem in particularly remote northern communities in Manitoba, and we're working with health authorities to address that.

But in May of this year, we launched A Call To Action encouraging all levels of government–all levels of government to cross regions and jurisdictions in individual households to reduce the number of new cases of type 2 diabetes, something that we are committed to improve is to improve the access to diabetes care, and a good example of that is what's happening in image conferencing: connecting patients in Easterville, Grand Rapids and Moose Lake with doctors in Winnipeg, so recognizing where diabetes is particularly epidemic, recognizing where the needs are. We are working with all levels of government to address this, and, yes, it is disproportionately high among our First Nations communities. And, of course, our First Nations communities do fall under the jurisdiction of the federal government, but that doesn't mean that we're not prepared to work with our First Nations communities. In fact, we are working with our First Nations communities. That means that we're not prepared–doesn't mean that we're not prepared to work with the federal government; we are working with the federal government. So when you look at a particular initiative, we are going to the communities that are most profoundly affected, and dealing with that issue.

In '05-06, over $4.6 million has been invested since that time to implement chronic disease prevention and management programs across Canada, and $2.8 million since '08-09 will be invested in establishing a team approach to chronic disease prevention in Healthy Living in Manitoba.

Now, Madam Speaker, if you also look at our health curriculum here in the province of Manitoba, and if you look at our challenges that we've recognized with respect to student obesity in issues such as these, we've taken a multifaceted approach to address student health, whether it's through having one of the best health curriculums in the country–and it has been held up as an example in Canada to other jurisdictions, what we're doing for health curriculum–and whether it is one of the first
provinces to go to compulsory physical education in grades 11 and 12.

So we are taking a multifaceted approach to chronic disease prevention with programs throughout the province of Manitoba. We are working with the federal government and federal partners in regional health authorities to address the issues of student health. We have a unified referral intake system which is serving the needs of our students here in the province of Manitoba and teachers are getting trained and are being told of emergent health needs that an individual student might have when they come into the classroom, and plans and protocols are in place to address that.

So, Madam Speaker, you know, I'm very proud of what we are doing here in the province of Manitoba, and I know, as a teacher, that I take a lot of–oh. I see my time has expired, and I thank you for the opportunity.

Mrs. Myrna Driedger (Charleswood): Madam Deputy Speaker, I am pleased to rise today and put a few words on the record about Bill 220, The Public Schools Amendment Act (Diabetes Protocol).

The bill that's been put forward by the member from River Heights is certainly about making diabetic students safer and healthier when they're at school. The Minister of Education has just indicated that this already exists, that it is happening already in the schools.

However, the Canadian Diabetes Association has cited a number of instances when it isn't working in schools, and I will, in a few moments, put some of those comments on the record. So I think there is some work that needs to be done in the schools.

* (10:20)

Having said that, also, I do wonder why they went ahead and enshrined, then, in legislation, anaphylactic policies and yet they don't seem to want to do the same with this. And I have to wonder, you know, recently they passed legislation requiring school divisions to have policies to protect students with life-threatening allergies. And I note that that legislation was brought forward by a backbencher on the government's side. So they passed that legislation.

I would have assumed that those types of situations were also, you know, already being taken care of in schools. And yet the minister indicates that they needed legislation in this instance but they don't need legislation in this instance. So I hope it isn't a matter of any politics being played here.

I certainly hope that, in fact, what we see happening in our schools right now, in order to address the needs of children with diabetes, is indeed, happening and taking place and that the schools are well prepared. They have the teachers well educated in order to address these issues. But also we have to ensure that our teachers are well supported because their job is to teach children. Now teachers in today's era seem to be put in a position of having to do a lot more than just being teachers. They're certainly put in positions of having to be, you know, nurses on the side or counsellors on the side or social workers on the side. So we have to ensure that within the school system, when we expect all of these things to be happening for students, and that students are being well taken care of and their health needs are being met. I just want to indicate that I think we have to ensure that our teachers are well supported to be able to do that.

Now the minister is saying, well, this already exists, and, hopefully, it does because diabetes can be a life-threatening illness if it's not managed appropriately. It does require ongoing care and assistance and younger children especially need help, particularly with tasks like monitoring their blood sugar levels. That's not always something that very young children are capable of doing. And, if we expect our kids to go to school and to learn to be educated in our school system, then the school is going to be in a position of having to help that child monitor their blood sugar levels. And for some kids that, you know, that's a difficult task for children and I'm sure, you know, it is one that families certainly appreciate that schools are taking on that chore. Because children with diabetes spend most of their day in school, it is very important that their health conditions and particularly, in this instance, diabetes is well cared for during school hours.

This legislation does a number of things. It requires schools to obtain medical and emergency contact information about any student with diabetes. It requires school staff to receive annual education on the cause, prevention and management of diabetes and the steps to be taken in the event of a diabetes-related health emergency. It also requires school staff to give students the opportunity to perform their glucose monitoring when required and any necessary support they need to do that.
As I'd indicated earlier, when it came to anaphylaxis, this House did pass legislation requiring school divisions to have policies to protect students with life-threatening allergies. Now this legislation that we're speaking about today, Bill 240, does have a similar intent, but it goes a step further to require staff to undergo diabetes education and to support students who need to monitor their glucose levels.

The Canadian Diabetes Association had a campaign last year, and they launched this campaign for legislative change to better protect students with diabetes and other potential life-threatening illnesses. The Canadian Diabetes Association brought to the attention of legislators, situations where children have reportedly been prohibited from bringing needles to school, needles which they need to use to inject insulin or where they've been sent out of the classroom to check their blood sugar while in a confused state. Other students report being denied participation in school trips or extra-curricular activities.

So what the Canadian Diabetes Association is saying is that while the Minister of Education (Mr. Bjornson), you know, basically has put on the record that all of these things are supposedly happening—you know, all of these things that this bill addresses—that they're already happening in the schools, I think the Canadian Diabetes Association has reported some holes in this, and I suppose if a lot of these protocols are already in place, then maybe it is a matter of renewing with our teachers and our school divisions some of these issues and things that need to be done. But also, the legislation itself would entrench it in law and then ensure that we don't have kids falling through the cracks when schools are not following protocols. So it is interesting that the government has chosen to go down one road with anaphylaxis and, you know, life-threatening allergies, but they don't seem to want to go down the same road when it comes to diabetes.

Now diabetes, as has been indicated, is reaching epidemic proportions, particularly in Aboriginal communities, so we are seeing more and more diabetes that is happening in our young children. The Canadian Diabetes Association recently said that about 76,000 Manitobans have diabetes and that is twice as many as in 1989. Close to 10 percent of Manitobans have diabetes, and that's higher than the national average of 8 percent, and as many as 23,000 people don't know it.

Nationally, the estimated direct and indirect cost of diabetes is more than $17.5 billion per year and is expected to rise 43 percent by 2010 and 75 percent by 2016. Also, approximately 80 percent of people with diabetes will die as a result of heart disease or stroke. Canadian adults with diabetes are twice as likely to die prematurely, compared to people without diabetes. For example, a Canadian with diabetes is four times as likely to die at age 35 than a 35-year-old without diabetes. Life expectancy for people with type 1 diabetes may be shortened by as much as 15 years. Life expectancy for people with type 2 diabetes may be shortened by five to 10 years. And in Manitoba, it's estimated that 16 Manitobans will be newly diagnosed with diabetes today and every day, with the national average being 11.

So there are some challenges in terms of needing to be very astute about what is happening with diabetes in Manitoba because we are very affected by it. Unfortunately, the NDP record on addressing diabetes issues does leave a lot to be desired. One of the things that would relieve and alleviate a lot of the problems with kids would be if this government did move ahead, as other provinces have, and introduced insulin pumps. If that would happen, I think we would find that children are better controlled with their diabetes and wouldn't require as much attention as is needed as is currently happening, and I would urge this government if they would care to look at that, that that is a good policy that should be brought in. And I would encourage the government to give some serious thought to this legislation because diabetes in children is certainly something that we need to take very seriously. Thank you, Madam Deputy Speaker.

Hon. Kerri Irvin-Ross (Minister of Healthy Living): It's my privilege to put some facts on the record. The most important fact is that Bill 240 talks about contact information and medical and emergency information being available to staff at schools, and I'm very proud to say that our government has implemented URIS, which provides that opportunity. If you've been in the school, you'll see in the staffrooms pictures of children with their needs and treatment practices laid out in front of you. The staff and the teachers throughout the school are prepared and are aware of who these children are so that they can take the necessary action immediately to ensure their health and safety. And that's really important and that comes in collaboration through Family Services and Housing, through Health, and the education system itself as they work towards
ensuring that the information is available to everyone involved.

* (10:30)

The goal is to provide the support to individuals with the diagnosis of type 1 diabetes so that they can continue to live a healthy life to the best of their ability and ensure that they have the medication and the services that they require at home, in the school and in the community. And that's achieved by sharing information not only with the individuals and education with the parents, but also the other adults in their lives. And also by providing encouragement to the young people to participate in sports, to participate in camps, to have a sense of normalcy like every other child in the province but being aware of their--of their needs and being able to manage them.

That's why it's very exciting when community organizations come together and we've just had a, somewhat of a summer here in Manitoba, and in that summer there was a camp for children with the diagnosis of diabetes that they participated and were in an environment that was very supportive. They had the education and the support that they needed not only for each other and the peer relations that were developed, but also for the adults that provided the care and attention for them, and that's important. We've heard other members talk about what we call on this side, the epidemic of type 2 diabetes in our province.

We have addressed it head-on and we will continue to work with all of our partners to address those issues of diabetes. We know that through our commitment as a government with the Healthy Living Department that we have addressed those issues through information being shared across the province around physical activity, around nutrition, and we know that that makes a difference.

We also know that this is an issue, type 2 diabetes, is an issue that is prevalent in First Nations and Aboriginal communities, and we cannot ignore that. We need to continue to work with the leadership in all of the communities and the community members to address it. And one of those ways that we have found to be extremely successful is through the Chronic Disease Prevention Initiative.

Now this is an initiative which is jointly funded between the federal government and the provincial government, but the most important partner are the volunteers and the community members that come together. And by coming together and addressing the issues that face their communities as well as their citizens, and looking at different ways of encouraging physical activity whether it's through walking trails, whether it's through skating programs, swimming programs and also looking at the issue of smoking and nutrition.

The nutrition has been addressed in a number of communities through the Northern Healthy Food Initiative where we have encouraged and supported the gathering of traditional foods within those communities and we know that that makes a difference. But we also have provided technical support as well as equipment for the development of community gardens and we know the benefit of that.

There's also been the support of community freezers so we can--so the communities can preserve their food. Those are small steps but I must say that they're essential as we deal with this issue of diabetes in our community.

In May we released, Diabetes: A Call To Action. It was a plan to address the issue of diabetes in our province and I'm proud to say that we received endorsement from a number of individuals, individuals that are dealing with type 2 diabetes themselves but also with individuals who are committed to the prevention. And that's the key, that we continue to provide the supports and information to children and adults with type 1 diabetes, but that we also look at methods of preventing type 2 and, I believe, that that happens through initiatives based in the school. Our health and physical education curriculum does just that.

The mandatory phys ed is one of those, I think, pillars which encourages lifelong activity and promotes that. And we know that physical activity and nutrition make a difference.

We know that the rate of obesity is rising, but we believe as we continue to implement, work with community members around healthy living strategies that that will prove to be extremely successful. And one of our partners in doing that is the education system.

We have made some positive movement, and in this positive ground that we have covered, we do not--never believe that we don't have more work to do, because we do, Madam Deputy Speaker, have more work to do. But we're committed to doing that. It's all of our responsibility as educators, as healthcare professionals, as parents. It's our own
responsibility as we take care of our own bodies, but we need to support each other in that.

We have an exciting program that talks—that is called Getting Better Together, and what this addresses is the issue of chronic diseases, specifically diabetes. And it encourages individuals to find methods in which they can continue to maintain a healthy lifestyle and deal with the diagnosis of diabetes, but continue to participate in our society, and that's essential, and live a healthy lifestyle. And that can be managed through peer support, through information, again, about physical activity and nutrition.

So I want to conclude by saying the information around, specifically around children in schools is already being provided. Training is available to the professionals in the school, and prevention is well under way, not only in the school, but in communities as well. Thank you.

Mr. Kevin Lamoureux (Inkster): Madam Deputy Speaker, you know, I would welcome the opportunity to be able to speak to this bill. It's unfortunate, you know, I look around and I see just how interested the government really is on what is an important issue for the province of Manitoba, that being diabetes. You have, actually, more members of the opposition here than you have in terms of government. You have one individual that was here in terms of representing government in the Cabinet. You know, I would like to think that the government would show and demonstrate more respect for the issues that are facing Manitoba.

Mr. Lamoureux: Diabetes has been pointed out—

The Acting Speaker (Ms. Brick): Order. I would just like to remind all members that reflecting on the presence of government members or lack of presence of government members. It's the individuals that, I believe, that we are supposed to be concerned about. And I think Manitobans should be concerned when the House sits and you only have one minister inside the Chamber, when you have more opposition members than you have government members inside the Chamber.

And if, in fact, I am little bit off on that, I would apologize for it, Madam Deputy Speaker, and continue on in regards to my comments.

The Acting Speaker (Ms. Brick): Order.

Mr. Lamoureux: You have to appreciate that I am a little sensitive—

The Acting Speaker (Ms. Brick): Order. Just as a—sorry. [interjection] I just want to give a general caution to the House that reflecting on the presence or absence of members from the Chamber is something that is not normally done in the Chamber. So I just want to give a general caution to members in that regard. Thank you.

Mr. Lamoureux: Well, Madam Deputy Speaker, it just goes to show in terms of this particular issue and the critical—of being of critical importance.

You know, the member from Charleswood made mention in terms of some of those averages. When you have somewhere in the neighbourhood of 16 individuals every day being recognized with one form of diabetes or another, and not only the social, but the economic costs of this particular disease, Madam Deputy Speaker, and here we have an idea that's before us that I believe deserves a great deal more attention than the Minister of Education (Mr. Bjornson) or the Minister of Healthy Living (Ms. Irvin-Ross) has given to the issue.

In fact, Madam Deputy Speaker, what I would suggest to you is that we need to look in terms of what it is that this bill is actually proposing to do to require schools to obtain medical and emergency contact information about a student with diabetes. It indicates in the explanatory notes that school staff must receive an annual education on the cause, prevention and management of diabetes, as well as steps to be taken when a student has a health emergency related to diabetes. School staff must also provide support for students with diabetes who have to perform glucose monitoring.

Ms. Bonnie Korzeniowski, Deputy Speaker, in the Chair

Madam Deputy Speaker, what really surprises me was the response that we got from the Minister of Education. I think the Minister of Education needs to reflect—doesn't have to reflect in terms of going that far back, just to yesterday; he sent out a press release. The minister might be familiar with the press release. The member from Southdale is made
reference to in the press release. It talks about allergies. Think about this.

Here is what the minister yesterday had to say in the form of a press release: Amendments to the Public Schools Act and the Education Administration Act that will come into force Nov. 1 will formalize the requirement that Manitoba school divisions have policies to protect students with life-threatening allergies. Education, Citizenship and Youth Minister announced today, that being yesterday, Mr. Speaker. Quote: With this amendment in effect, we will be strengthening the requirement that school divisions have anaphylaxis policies to meet the needs of pupils who have been diagnosed with allergies.

Well, Mr. Speaker–Madam Deputy Speaker, put that in the context of the bill that the minister spoke on today, and I would suggest to you, one could see the oozing of hypocrisy, when it comes to why it is there seems to be a double standard on allergies versus diabetes. Are we to assume that teachers–based on what the minister, his comments–are we to assume that teachers had no ideas about allergies, that there was no policy within the school divisions in regards to allergies, and that's the reason why we needed the member from Southdale to bring in an amendment to the legislation so that the Province would have a legislative presence in our school divisions? Are we to assume that that's what the Minister of Education was attempting to imply? Of course not.

I think the Minister of Education needs to give more credit to our teachers and our professionals in education, Mr. Speaker. Of course not. Of course, they were aware of allergies to the extent that allergies even cause death. Of course, we know that the teachers were aware of it and there were some plans put in place. But did that stop the Minister of Education or the member from Southdale in terms of bringing forward an amendment on the issue? No. Why? Because they saw the benefits of doing this and addressing this issue in the form of amendments to the legislation that would in fact formalize the process.

In fact, you go further. This is what the minister said yesterday referring to the allergies in the amendments that the member from Southdale brought forward. These amendments strengthen this requirement by formalizing it within provincial legislation, as well as giving the minister the discretion to develop regulations around the framework of anaphylaxis policy requirements.

Well, Madam Deputy Speaker, why doesn't the Minister of Education apply the same principles that he's using in supporting the member from Southdale on the private member's resolution brought forward from the member from Southdale with the member from River Heights in the amendment that the member from River Heights and the Manitoba Liberal Party have brought to this legislative Chamber? Why doesn't the Minister of Education do that? Is he trying to say that allergies is a bigger problem facing Manitoba as an issue today than diabetes? Is he that naive to believe that diabetes is not as serious as it is? Does he not believe that this particular disease needs to be aggressively addressed inside this Chamber?

He stands up and he says, well, not to worry, our teachers and principals and so forth are well aware of the situation. Unlike allergies, the teachers are well aware of this particular issue.

Well, we in opposition, and particularly the Liberal Party, would say to the Minister of Education (Mr. Bjornson) that the teachers are, indeed, aware of allergies. They are, indeed, aware of diabetes, but much like the principle of formalization that the minister talked and gloated about yesterday, and patted his backbencher on the back saying how wonderful it was. Well, the same principle should apply here, Madam Deputy Speaker, and we in the Liberal Party are not looking for a pat on the back, but we are–we are looking, we are looking for a government that will take the issue of diabetes more seriously, and take the necessary actions that are going to make a difference in the province of Manitoba and not just shoot down any other idea unless it's an idea that seems to be coming from the government of the day.

I say shame on this government. How narrow-minded and how self-serving can a government be when it only deals with issues in which it feels that if it can't get 100 percent of the credit, it doesn't want you to act on it, Madam Deputy Speaker? How selfish can a government actually be? Why doesn't it recognize the bill for what it is, a bill that can have a positive difference in the province of Manitoba? Why does the government have to insist that it has to be the member from Southdale or one of her backbench colleagues that have to introduce something in order for it to pass inside this legislative Chamber?
Hopefully, in one of these—and one of these leadership candidates will see the merits of some of the ideas that are being talked about inside this Chamber, and take a different approach in terms of recognizing the value and allowing more private members’ bills to pass inside this Legislature. It should be the merit of the idea that determines whether or not a bill passes this Legislature, not only in terms of if it happens to be a backbencher idea, or it has to be a government idea, Madam Deputy Speaker.

So we would ask the Minister of Education (Mr. Bjornson), the Minister of Healthy Living (Ms. Irvin-Ross) to seriously review this particular bill and allow the bill to ultimately go to committee, Madam Deputy Speaker.

Madam Deputy Speaker: Order, please. The member's time has expired.

Ms. Marilyn Brick (St. Norbert): Madam Deputy Speaker, it's really my pleasure to put a few words on the record in regards to The Public Schools Amendment Act (Diabetes Protocol), and I listened with intent when the member for Inkster was speaking and did find some of his comments interesting, although I would have to question somewhat some of his reasoning when he imputes motive to some of the things that our government has done and does that in a fashion that is, I would have to say, somewhat challenging.

As we have said before, this bill requires schools to obtain medical and emergency contact information about any student with diabetes. And I think many members have spoken already today, including our Minister for Education, Citizenship and Youth and our Minister for Healthy Living, and talked about the fact that divisions are already expected and required to have policies in place under the unified referral and intake system. That is there to protect students with diabetes and other illnesses that can be life threatening.

Divisions have mechanisms in place for parents so they can identify students who have diabetes through the URIS system, which includes whether a child requires assistance with blood glucose monitoring and whether the child has low blood sugar emergencies that require response. And I must say that I'm really happy to hear that the URIS system is in place.

I have a son who is now, I thank God, that my son is now 23, in many ways. I think there's some of the members in the House who can talk to the challenges you have when your children are younger. My son has asthma, and for me that has often been a challenge in my family. Having asthma is an illness that also is addressed under URIS, and I think that it's great to see that some of the things that are happening under URIS creates a better dialogue between schools, between day cares and between parents.

* (10:50)

And I think that's really important to put on the record because it's that dialogue that helps in education, but it also helps in preventing emergencies from happening because then teachers, educational assistants, child-care workers can all be aware of the kinds of health concerns that a student or a young child who's attending day care may present.

URIS provides support to children with special health-care needs when they are apart from their parents, their guardians, when they are attending school, a licensed child-care program, a recreation program or are receiving respite.

And, as many people in this House know, I was—in my last position with the City of Winnipeg, I was responsible for youth-care services across the city of Winnipeg, meaning that all the youth action centres fell directly under my authority, and I had a number of staff that reported to me, sometimes in excess of a hundred staff.

Having said that, I think that knowing that this protocol is in place, this URIS system, is very helpful for people, whether you work in recreation, whether you work in child care or whether you work in education. I'm so happy to see that this was undertaken as a joint initiative between Family Services and Housing, between Education, Citizenship and Youth and between Manitoba Health and Healthy Living.

I think when protocols like this are developed that marry these departments together and take a look at the variety of challenges and issues that are facing people, including respite workers, that's when we get a great protocol. It comes together and marries a dialogue with parents, with teachers, with health-care workers, with—in addition, with child-care workers, and that's the kind of thing that makes parents feel so much better because they know that the concerns of themselves are taken care and that their child is being taken care of when they're at
school, when they're at a child-care facility or when they're at a recreation program.

Some examples of health-care needs that are addressed by URIS include asthma, as I've already mentioned, life-threatening allergies, seizures, gastronomy feeding and diabetes. URIS provides a uniform and a well-defined service path that community programs can access to support children with special health-care needs. And as I mentioned, in my last position, I had a lot of staff and, boy, I think it would've been nice to have had this protocol in place rather than me developing a protocol for the youth-care workers who were working there.

So, as somebody who has previously worked in recreation for numerous years, I'm thrilled to see that there is a standard that is established, that is adhered to in a variety of settings.

The needs and supports of children with diabetes, who are attending community programs, are addressed through the URIS policy. URIS continues to develop and update training and standards manuals for use by registered nurses. And in May, 2009, we launched a call to action encouraging all levels of government across regions and jurisdictions and in individual households to reduce the number of cases of type 2 diabetes.

I think it's, as I said, very interesting listening to the member for Inkster (Mr. Lamoureux) and having him put forward the idea that we are not interested in diabetes. I think nothing could be farther from the truth. We know that diabetes is something that is affecting the residents of Manitoba, and we are very, very much focussed on this disease, and prevention of this disease, as was mention by our Minister of Healthy Living (Ms. Irvin-Ross). It's adopting a healthy lifestyle, and an overall healthy lifestyle including things like how you eat, including things like exercising, being active and, having been a part of the Healthy Kids, Healthy Futures task force, I can only say that we did hear issues like diabetes, issues like asthma, issues like allergies mentioned at our public hearings when we went around the province. And that's why our government has been focussing on these areas and, in particular, diabetes. And I think it's through public education, through dialogue with parents, through dialogue with child-care workers, teachers, that we are going to encourage children to lead a healthy lifestyle.

So, once again, I'm really pleased to be able to put a few thoughts on the record about this and to be able to congratulate our government on the good work we've been doing. Thank you, Madam Deputy Speaker.

Mr. Ron Schuler (Springfield): I wish to put a few points on the record, and I know that members will want to pass this resolution and it is a good one, this bill, and I'd like to thank the member from Inkster for having brought this forward.

Diabetes is a very important issue. It affects almost every family, certainly it does ours. And it's something that, again, science and medicine have progressed to the point where a normal life and a healthy life can be achieved; you just have to monitor yourself more carefully. And I would like to congratulate the member for having brought this forward because it's important that we recognize this as an issue and that we recognize it as something that we should be taking an active part in.

I would also like to add: a very important component to this is physical activity, namely, sports. I would like to encourage our schools and our community clubs and our organizations to focus on getting our youth more active in sports. We know that diabetes and childhood obesity are going to be issues that are going to face us on a health-care level and we'd be better off putting more money in preventive areas, encouraging our young people, our children as young as four, to get involved in some kind of sport. Get a love for some kind of activity that gets them out, gets them moving, allows them to exercise, and in such a fashion that it becomes a lifelong process, that you're always active. We know that children—and, of course, I speak from experience—have a tendency to spend more time on the computer and on all their other games, and if I were to try to mention them all, my children would say, dad, you're embarrassing us, so I won't mention all these games, but they spend an awful lot of time with those kinds of games and that's not healthy. It's fine when it's raining and storming outside, but when it's nice out, we need to get our children out.

Diabetes is going to have to be taken on a—a large, large perspective and this is certainly one piece of legislation that, I think, goes a long way in starting to address diabetes. And I would have liked to have spent more time putting comments on the record, but the clock is running out and I know we still want to vote and pass this resolution, this bill. And appreciate the opportunity to put at least a few words on the record. Thank you.

Mr. Gregory Dewar (Selkirk): It's a pleasure to rise to speak to this bill and I'm eager to add my input.
into this very important piece of legislation, Mr. Speaker.

We had a–we had a good discussion–first of all, I want to comment on the member for Inkster's (Mr. Lamoureux) remarks regarding absence or presence of members, which he knows is against the rules, but I remind the member that this Tuesday morning here in the Legislature, there is no requirement to maintain quorum and there is, of course, no votes. And the reason we have no quorum, I remind the member, is because Treasury Board meets, and if he knew the rules, he wouldn't be raising all these requests about why members aren't here. And he was, you know, commenting about the absence or the presence of members, which he knows is clearly against the rules, Mr. Speaker.

The other day, we had a good–we had a very good discussion about–I don't know if members were there on Monday night where we were discussing the–several private members' bills and I want to just comment and pay tribute to the members who raised really important issues. The member for the member for Kirkfield Park (Ms. Blady) with her service animals, the member for the Interlake–or, excuse me, Lakeside had a private member's bill on the heritage hunting and trapping act, and the member for Minnedosa (Mrs. Rowat), who had a bill on the infant loss–and we had a good representation of the public who came out and made presentations to these bills and you can clearly see that private members' bills–

Madam Deputy Speaker: Order, please. Time has lapsed.

The hour being 11 o'clock, we will move on to resolutions. The script for–when this matter is again before the House, the honourable member for Selkirk will have eight minutes remaining.

* (11:00)

RESOLUTIONS

Res. 20–ALL Aboard

Madam Deputy Speaker: The hour being 11, and time for private members' resolutions. The resolution for consideration today is the resolution, ALL Aboard, brought forward by the honourable member for Wolseley.

Mr. Rob Altemeyer (Wolseley): I move, seconded by the honourable member for Burrows (Mr. Martindale), that

WHEREAS poverty reduction has been a top priority of the provincial government since 1999; and

WHEREAS since 1999 the provincial government has taken significant steps toward reducing poverty including investing in new housing projects, raising the minimum wage by 50 percent, introducing the Manitoba Child Benefit, fully restoring the national child benefit to low-income Manitobans, a benefit that had been clawed back by the previous government, and creating more child-care spaces; and

WHEREAS the provincial government is also enhancing employment and income assistance through rewarding work; and

WHEREAS the provincial government has been building healthy neighbourhoods through programs such as Neighbourhoods Alive!, the Northern Healthy Food Initiative and other community economic development programs; and

WHEREAS starting this fiscal year the provincial government invests more than $744 million annually to poverty reduction efforts; and

WHEREAS according to Statistics Canada, the number of children living in poverty in Manitoba has been reduced by 43 percent since 1999 and the poverty rate for children of single mothers has declined 52 percent since 1999; and

WHEREAS the provincial government's recent ALL Aboard initiative to fight poverty will focus on four key priorities: (1) affordable housing and safe, supportive communities; (2) education, training, employment and income; (3) strong, healthy families; and (4) accessible, responsive and coordinated supports.

THEREFORE BE IT RESOLVED that the Legislative Assembly of Manitoba urge the provincial government to continue to combat poverty in Manitoba and provide Manitobans living in poverty with the means to succeed.

Madam Deputy Speaker: It has been moved by the member from Wolseley, seconded by the member from Burrows,

WHEREAS poverty reduction has–dispense?

Some Honourable Members: Dispense.

Madam Deputy Speaker: Dispense.
Mr. Altemeyer: Madam Deputy Speaker, it is my sincere pleasure to stand in this Legislature as a proud member of our government and talk for a brief moment about one of the most important initiatives that I think any government could bring forward, and that is Manitoba's first ever comprehensive poverty reduction strategy. It is, of course, called ALL Aboard. It was launched just this past spring, in May, and I think I'll begin with just a few highlights so that people can get a little bit of a sample of the type of initiatives that are now flowing underneath this program.

To start with, housing in my constituency is one of the largest issues that we wrestle with in my constituency office. We had over a thousand constituents contact my constituency office or contact me here at the Legislature directly during my first term in office. And many of the issues that they were raising related to housing.

And the root of this crisis, of course, lies squarely in the history of the other two political parties who also share this Legislature with us. At the federal level, it was, of course, the Liberal budget in the mid-1990s which savaged the social safety net. The current Liberal leader was part of that decision and he supported that decision. We did not support that decision. Also true that throughout the 1990s the Conservative Party made numerous policy decisions related to housing which increased poverty rates and increased hardship on disadvantaged people. Their attitudes, as near as I can tell from what they have said in the Chamber, from what they have said during election contests has not changed one bit.

And we now stand here very proudly, Madam Deputy Speaker, with a track record showing of over 5,000 new, affordable housing units have either been built or renovated or retrofitted for the benefit of low-income and medium-income people.

Equally important in my constituency, and I'm sure in the constituencies of many, if not all, of my colleagues, is the issue of child care. We have created 10,000 additional child-care spots. We are increasing the wages for child-care workers, which for so long were neglected by previous governments. We're providing funds so that people can go back to school and increase the level of education and training that they have, to then receive even higher compensation for their hard-earned labour. And we're providing funds for retrofitting and improving the layout of, and the functionality of, child-care centres. So many of these started on a shoestring budget. Just when the need reaches a peak, then someone will open up a day-care centre in a church basement or in their home. People are now able to access funding from our government to provide much upgraded facilities. And again, in my constituency at the Cornish Child Care Centre, we have celebrated those types of expansions to infant care and a dramatic refresh of the child-care facilities.

Madam Deputy Speaker, I think with my remaining time, I also want to talk a little bit about the accountability measures that are built into our poverty-reduction strategy. We are focussed very intensely on providing good accurate feedback to this Chamber and to the citizens of Manitoba on the progress that we have made in reducing poverty throughout Manitoba and also holding ourselves accountable for the progress that we aim to make in the future. What that requires, Madam Deputy Speaker, is that you have an accurate tool which will actually measure progress.

And here again, I want to highlight the enormous difference between what our government has already put in place and some of the rather flimsy ideas that we have heard from our colleagues. By my count, our Liberal counterparts in this Chamber have, on multiple occasions now, brought forward a piece of legislation that they felt would be adequate in reducing poverty, and nothing could be further from the truth. The specific line that I'm referring to in their proposal said that in order to measure the rate of poverty in Manitoba and hold themselves accountable for the progress that we aim to make in the future. What that requires, Madam Deputy Speaker, is that you have an accurate tool which will actually measure progress.

Just recently, in my constituency in the West Broadway neighbourhood, we celebrated the opening of the first co-op housing apartment block to have been built in this province in decades. It's called the Greenheart Housing Co-op and 24 families will be living there, and in a co-op environment, in a LEED-certified building which meets our green building criteria that the government has also brought into place, and a spectacular example of the wonderful things that can be accomplished when community groups with a great idea come to a receptive government and end up making a difference in people's lives.

Well, if you ever wanted to drive an 18-wheel truck through a loophole, Madam Deputy Speaker, that's a pretty good way to set it up. There is no such international standard for measuring poverty.
Canada, in fact, doesn't even have a national standard for measuring poverty; again, a legacy of successive Liberal and Conservative governments in Ottawa.

And I would also point out that the Liberal proposal, so-called, would appoint one, one agency, Madam Deputy Speaker, to be the only entity which would link with government in this circumstance if their legislation was brought forward, when in fact there are hundreds of agencies equally deserving of the opportunity to connect with government and provide feedback.

The member for Inkster (Mr. Lamoureux) is taking offence because he doesn't like the flaws in his proposal being exposed in a public forum. He's usually pretty prickly when that happens and today is no different. And I would think that he's asking, you know, who else is more qualified than the one agency that they've chosen to highlight.

Well, I would think maybe the Manitoba Métis Federation might have a few things to say about poverty. I'm thinking maybe the Manitoba Child Care Association might have a few things to say about poverty. I'm thinking the, you know, Winnipeg Housing Rehabilitation Corporation might have a few things to say about poverty. I'm thinking the Assembly of Manitoba Chiefs might have a few things to say about poverty.

And, Madam Deputy Speaker, our government is going out to the community level this fall to do extensive consultations to get feedback on our proposal. We're not, as the Liberals are proposing, going to ram through this suggestion and have just one hand-picked agency provide all of the advice.

* (11:10)

We want to collect all of the feedback that we can from people and continue our fantastic progress and making sure that all families and all children and all individuals, whether you have been born and raised in Manitoba, whether your family heritage extends back to the time memorial on Turtle Island or whether you just arrived here a couple of weeks ago from another continent, that every single person in Manitoba has a legitimate opportunity to improve their own life and to improve the lives of their family members.

And, Madam Deputy Speaker, I look very much forward to playing a key role in those consultations. I've been extraordinarily pleased to work with my fantastic colleagues, Cabinet ministers and backbenchers alike, our leaders on this at the Cabinet table, of course the honourable member for St. Johns, and Family Services and Housing Minister (Mr. Mackintosh) and also the honourable member for St. Boniface (Mr. Selinger), our former Finance Minister. They have played such a fantastic role in shaping ALL Aboard, in doing the research, in finding out the best practices.

And, Madam Deputy Speaker, let us not forget, when we came to office the Tory legacy had one in every five kids living in poverty in this province. That's absolutely unacceptable to have one kid living in poverty. The Tories weren't even keeping track of this. They had proposals in the education system, you know, another great equalizer which the Tories don't want to hear about is education. Their proposal in education was to put a TV set in every classroom and use class time to beam advertising messages into the brains of our school kids rather than learning the basics of education and beyond. That's their proposal for poverty reduction.

Our proposal, far more advanced, far more sophisticated, opening the doors to lifelong learning, whether you are in grade school, high school, university or coming back to school for an upgrade or to get your grade 12. That's another fundamental difference between ourselves and the members of the opposition and the results speak for themselves.

Stats Canada now reports that our poverty rate in Manitoba, if you were a child living here, the poverty, the poverty rate has been reduced by 43 percent, Madam Deputy Speaker, and if you were a child living in a family headed by a single female, a single mother leading your family household, the poverty rate for children in those families has declined by over 50 percent since 1999. Don't tell me that who's in power doesn't make a difference.

This government's making progress. We are proud to do it. I implore all members of the Chamber, whether you understand poverty, whether you've experienced poverty, whether you care about it, give us a mandate to continue our excellent work on behalf of all Manitobans rather than the narrow interests that so often get reported here. Thank you very much.

Mrs. Mavis Taillieu (Morris): I welcome the opportunity to put some correct words on the record and refute the statistics that the member from Wolseley has been spewing in the House which rather paints a different picture than what is reality, Madam Deputy Speaker. But I know that he's not a
member of the Cabinet; he's a member of the back bench. Heprobably does not get the opportunity to speak with his Cabinet colleagues, perhaps is not really well versed in exactly what is going on, so I can forgive him for that, just for being a person that's not really in the loop in things within the government.

So, but, you know, when I, when I read the first line of this, poverty reduction has been a top priority of the provincial government since 1999. I have to say in 10 years, in 10 years nothing substantial has happened to reduce poverty and that's the sad reality because we know that reality--poverty is a reality for thousands of Manitoba families and particularly for children.

So in 10 years the record is still very strong that there's still a lot of poverty in this province. So no matter what the government wants to say, Madam Deputy Speaker, they've not eradicated poverty. In fact, according to Manitoba Child and Family poverty report card there are at least 47,000 children in Manitoba who live in poverty, 47,000.

Manitoba's poverty-stricken children comprise 18.7 percent of kids province-wide and that's been a percentage that's really been unchanged in the last decade so they can put a lot of rhetoric out there and say what they've done, but they haven't done anything, Madam Deputy Speaker. The sad reality is, still, 10 years later, we see members standing in this House and bringing forth resolutions to talk about poverty but they are talking about it, but they're doing nothing more than putting out resolutions and they're not bringing forward real solutions.

And we know child poverty in this province is devastating because we know that when you have poverty, it's not just about economics. It's about children who are unable to get out of that cycle, so they become impoverished adults. We still see the situation across this province, Madam Deputy Speaker, and, you know, the member likes to put out statistics, but when you consider that child poverty rates for our province don't usually include First Nations communities, then we could look at those numbers again and say that poverty is much more widespread than they want to recognize.

I want to just say a few words about the member from Wolseley's comments, and he talked about housing and he talked about how housing has so improved under his government. I'd just like to say a few things. Now, in the year 2000, just after this government took office, the federal government transferred social housing stock to the province of Manitoba, and with that came a substantial amount of money. And what did the NDP do? They combined the departments of Family Services and Housing and then they saw this pot of money. Now this was like, $26 million, I believe, was the figure, of money that came from the federal government, and this was to take care of the maintenance needs of housing, social housing, in this province for the next 30 years.

But the minister who was Family Services and Housing minister at the time saw this pot of money and, with glee, rubbed his hands together and said, oh, I could use that money now, so I'm going to spend it--and spend it he did. And then we find social housing in this province has crumbled and de--crumbled with lack of maintenance. And then what do we see after that? We see a corporation, Aiyawin Corporation, which took hundreds of thousands of dollars for their own personal gain, money that was supposed to be used to repair and maintain social housing, and we saw a government then turned a blind eye to that and said, oh well, we'll give them another chance, and so more money funnelled away out of taxpayers' pockets into the wrong, mismanaged placement perpetrated by this provincial NDP government.

And not only that, talks about child care, Madam Deputy Speaker. I just want to also put on the record that the universal child care benefit proposed by the Conservative government, which flowed millions of dollars into this province for parents--what happened with the NDP government? They took that money that was supposed to flow to parents--and that would include foster parents who are looking after most vulnerable children in our society--and they took that money for themselves and didn't want to flow that to foster parents to look after the children. That was tax credit money to be used for children, but, instead, the NDP government took the money, saying, well, we'll decide how that money's going to be spent, in their typical Big Brother, we-know-best attitude that perpetrates and pervades this NDP provincial government.

I'm--when I look at affordable housing and safe, supportive communities, I have to give my head a shake. And I think that all of us in this Chamber would have to say that in the last little while, in Manitoba Housing units in this province, we have seen terrible acts of violence happening against
women and against children. This is something that has been ongoing since the NDP took office. They like to crow about how they–how they've improved, but really the sad situation is there has been no improvement. In fact, I don't think it could ever get worse. But, having said that, we don't know what next week is going to bring under this government's watch in some Manitoba Housing units, where we have gang members dealing drugs, prostitutes dealing with their customers, and young families who are struggling and trying to go to work every day to provide for their families and are forced to have to deal with this kind of situation that they see daily.

So, Madam Deputy Speaker, their record stands for itself. I don't think that anybody can say that this government has succeeded when it comes to housing. They have not succeeded. It's not succeeded when it comes to safe affordable housing; not succeeded. It has not succeeded when it talks about care for vulnerable children in this province with over 8,000 children now in care. It has not succeeded in looking after children in the child welfare system. It's not–our communities are less safe, not more safe. Our families are worse off today than ever before. And, Madam Deputy Speaker, I know that poverty is still an issue in this province. We see it and hear about it every day. Every day in the newspaper, we hear about issues within our communities in this city and province. And for someone to stand in this House and say we're solving everything is just unconscionable and it defies logic, really, because none of the things that have been claimed here today–

Madam Deputy Speaker: Order, please. The member's time has expired.

Mr. Doug Martindale (Burrows): It's an honour to second this resolution, and I commend the MLA for Wolseley for writing it and introducing it and speaking to it today.

Poverty reduction is really about social inclusion. It's not enough to just reduce the level of poverty, but we must ensure that people who live in poverty are included in all aspects of our society. And, of course, one of the benefits of reducing poverty is that people do feel more included.

And I have a couple of definitions of social inclusion from other provinces. And the first one comes from Newfoundland and Labrador, where in their document, Reducing Poverty: An Action Plan for Newfoundland and Labrador, dated 2006, they say, when we use the term poverty, we mean not only a lack of adequate financial resources, but also social exclusion, which is both a consequence and a cause of poverty. Social exclusion refers to individuals not being able to participate fully in the social and economic activities of society. This exclusion prevents them from developing to their full potential. And to turn that around, you know, I mentioned social inclusion, which is the opposite.

The government of the United Kingdom proposed a working definition of social exclusion as follows: Social exclusion is a complex and multidimensional process. It involves the lack or denial of resources, rights, goods and services, and the inability to participate in the normative relationships and activities available to the majority of people in a society, whether in economic, social, cultural or political arenas. It affects both the quality of life of individuals and the equity and cohesion of society as a whole, and I think a good example of social inclusion is our educational system, particularly in Winnipeg School Division where students with special needs, students with disabilities who, at one time, were put in special classrooms, are now included, are now mainstreamed, are now part of the educational system in almost every class in every school but, particularly, in Winnipeg School Division.

Our poverty reduction strategy was announced in May of this year on May 21st. However, we are proud of the fact that, really, our poverty reduction began when we formed government in 1999, and we have made substantial progress since 1999. For example, if one looks at provinces with poverty reduction strategies, namely Manitoba, Ontario, Nova Scotia, Newfoundland and Québec, and if you look at progress from 2000 to 2006, there are substantial differences and Manitoba looks very good on some indicators.
For example, the rate of low income for children decreased in Manitoba on the market basket measure 40 percent from 2000 to 2006 and, if you look at LICO, the low income cut-offs, reduced by 43 percent. By comparison, Ontario, a much wealthier province, had a reduction of child poverty of 2.5 percent from 2000 and 2006; Nova Scotia, a 29 percent reduction—these are both on the market basket measure, and Newfoundland 37 percent, and Québec 41 percent. Also, looking at the LICO measure for Manitoba, children of single parents saw a reduction in poverty in Manitoba of 52 percent.

The member for Morris (Mrs. Taillieu) says we haven’t done anything, we aren’t doing anything. I think this is proof that the numbers are going in the right direction. We have further to go, but we have made substantial progress, and one of the reasons is that we reversed a decision of the previous government, who, when they were given substantial money by the federal government in the child tax benefit, they put it all into programming. Basically, they clawed it back. They were given the money from Ottawa, and I partly blame Ottawa for this, you know, they announced this new program and they say, oh, we’re giving all this money to children, and then they tell the provinces they can do whatever they want with it. So what did most provinces do? They clawed it back from families with children; low-income, poor families, families on employment income assistance, and put into their favourite programs, and so we reversed the clawback. We reversed that decision and we said all of that money is gonna go to families with children, and it made a huge difference in their lives. It made a substantial difference in the reduction of poverty rates.

The rate of low income for all persons decreased 19 percent from 2000 and 2006 in Manitoba. By way of comparison, in Ontario, using the market basket measure, 1.6 percent; Nova Scotia, 29 percent; Newfoundland, 38 percent; Québec, 23 percent.

Now, if you look at the market basket measure ranking, Manitoba is third behind Alberta and Québec, and Alberta is arguably a much richer province. At least they were until the bottom fell out in the market for oil and gas. So, what about other provinces? Well, Ontario, fifth; Nova Scotia, sixth; Newfoundland, eighth; Québec, second. So we compare very well to other provinces, and what about the market basket measure for children? Eleven point 9 percent of the population. I think that was 19 percent. I think the member for Wolseley rounded it off at 20 percent. We’ve reduced the level of child poverty almost by half if you consider the market basket measure. Ontario, a reduction of 15 percent; Nova Scotia, 16—pardon me, the rate of poverty for children in Ontario, 15.4 percent; Nova Scotia, 16.5; Newfoundland, 20.8 and Québec, 9.4.

All of these provinces have indicators and Manitoba has indicators, and you can judge us in two ways. You can judge us on our record since 1999, because we have had 10 years. I'll grant you that, yes, we've had 10 years. We've made substantial progress.

*(11:30)*

You can look at the numbers, and you can also judge us going forward. You can say, what are we going to do in the next two years that we're government, or the next six years that we're government, or the next 10 years, and measure our progress by our own indicators that we are going to announce.

And we are going to announce 10 indicators to track progress on poverty reduction and social inclusion in four main areas. Ontario has nine indicators; Nova Scotia, four; Newfoundland has a mixed approach of a market-basket measure based on income tax data and a set of indicators similar to Manitoba with five medium-term goals and 20 objectives; and Québec will have an annual report on activities carried out within the framework of their action plan.

So, you can judge us by our past record, and you can judge us by our record going forward based on the indicators that we are going to announce.

Now, there are more indicators of things that we are doing in which we have made good progress, which actually put money in people's pockets, and not just people who are on employment income assistance but people who are working, the working poor.

So, for example, we increased the minimum wage which, when we inherited government, was $6 an hour. It will be $9 an hour, as of October 2009.

We increased the amount of income assistance that recipients can earn before their benefits are affected. So we've increased the work incentive, which is the amount of money that people can keep before they have a clawback.

We have extended the Rewarding Work Health Plan benefits for those moving from income assistance to paid work.
And, unfortunately, my time is running out, but I hope that other members on this side will read into the record the excellent progress that we have made and that we will continue to make under our poverty-reduction strategies.

Mr. Blaine Pedersen (Carman): To speak to this resolution, ALL Aboard, the Wolseley fantasy train, has just been a deep desire of mine, I guess.

The misinformation in this is fascinating. First of all, all you have to do is check the national news, and Manitoba makes the national news every day these days, and it's not in a good way; it's because of the crime.

If you had 10 years to improve your record and the best you can do is come up with being the headliner on the national news for crimes in Manitoba, this resolution is totally off-base.

In the second WHEREAS, it says, raising the minimum wage by 50 percent, and perhaps they've done that. I haven't checked the actual numbers. I wouldn't believe NDP numbers if you gave them to me, but they said–if you had, instead of raising–instead of raising–the minimum wage by 50 percent, if you would've raised the personal exemption on each and every Manitoban by 50 percent in the last 10 years instead of working on the minimum wage, you would have reduced poverty astronomically in this province because, and I understand that the members opposite have never written a paycheque, never actually signed the cheque for a paycheque, but when you do that cheque, there are deductions.

And it's not how much you make; it's not the wage that you're paid; it's the amount of money you take home, and it's the amount of money that you have at the end of the year. And raising the personal exemption would put money back into people's pockets instead of raising the wage but keeping the person–and paying more taxes and keeping the personal exemption down to a ridiculous level compared to other provinces.

The member from Burrows was talking about social exclusion and social inclusion. Well, I guess Manitoba now has been socially excluded from Canada because we have this crime rates. We're the gang capital of Canada; we used to be the car theft capital of Canada and now, through working of citizens protecting their vehicles, they've managed to drop that. It's not government that reduced the car theft; it was–it was the people of Manitoba who did it.

So, what you've done–so what you've done is you socially excluded Manitoba from Canada because we go cap in hand now to Ottawa for almost 40 percent of our budget. You don't have–they talk about all this money that they're–that they have put in and that they're going to put in to poverty reduction levels. You've had 10 years to do this. You've had some of the high–you've had record high transfer payments, equalization payments over the last 10 years and all you've got for it is higher crime rates, higher poverty in Manitoba and, as they use their statistics about dropping the poverty rate in Manitoba in child poverty, they conveniently exclude the First Nations reserves because that's a federal jurisdiction. Yet they haven't included that in their numbers for Manitoba. If we included that–look at the H1N1 outbreak we had this spring. Where did it hit hardest? It hits hardest in poverty–in poverty-stricken areas such as the reserves in the north.

If this government is so successful at reducing poverty, why is–why is it that we get–have the results of the H1N1 this spring? We are all hoping that H1N1–the ministers themselves–the Health Minister last week in question period just said we're hoping H1N1 is not as serious this fall. We all hope that, but as a government they have really failed Manitoba in preventing the root causes of poverty to our most vulnerable people in Manitoba.

This resolution is so far off base, Madam Deputy Speaker, that we have–in the last 10 years all that has happened with this province from this government's direction is to spend more money, put Manitobans in debt and from that–from their own admission–poverty comes from being in debt, from owing money, from not having money, and that's exactly where we are as a province. And the people of the province is–as the reflection of what has happened here because we do have more poverty. We have less people able to provide adequately for their families. That leads to crime and the war, the gang wars that we have here within Winnipeg. And I should say that the drugs and the gang wars are not restricted to Winnipeg. They're out in our rural areas as well, now, too. It's–we're seeing it even in our smallest towns. In my constituency we're seeing increased drug use amongst, particularly young people, but it affects all people, and we have to–we have to somehow come to grips of how we're going to turn this around.

Putting out a resolution that gloriously states we've reduced poverty and it's going to go away is not going to help. It's not going to change what is
really happening out there. To have this resolution out--put out to the public for them to see, it would--they would be laughing at this because they know it is so far from the truth.

Mr. Speaker in the Chair

Their initiatives that they've brought forth: affordable housing and safe support of communities--isn't it Gilbert place where--in Winnipeg here that's had the--that's had the terrible child abuse cases here lately?

The education, training employment: we know that they have lofty goals for employment, but we know that's not happening.

Strong, healthy families: a strong, healthy family comes from a strong healthy economy and we don't have that here in Manitoba.

Accessible, responsive and co-ordinated supports: I really don't know what that's supposed to be, but I'm sure that will make for a wonderful press release coming out in the next few days about how they're--how they're addressing poverty.

But, Mr. Speaker, this resolution is so far off base I would really hope that even the government members would talk this one out and not let it pass, because it is so far off from reality and this government needs to take a much more responsible role in solving poverty in this province.

Thank you, Mr. Speaker.

* (11:40)

Mr. Larry Maguire (Arthur-Virden): Mr. Speaker, it's with trepidation, I guess, that I rise to speak to this ALL Aboard resolution today that has come before us.

All governments look at poverty reduction as a priority in trying to move forward in dealing with circumstances in Manitoba to provide more affordable housing and safe, supportive communities for those that are living in the poverty levels in our provinces. We'd like to see greater opportunities for education, training, employment and income.

There's no doubt that the strong and healthy families are an opportunity--provide a great opportunity for a vision in the province of Manitoba, to provide people the opportunity to become more engaged in their own lives, Mr. Speaker, provide them with the confidence and assurance that comes from being employed, and having an opportunity to raise their families in a, in as supportive an opportunity as they can and, you know, everyone tries to put--each government tries to put accessible, responsive and co-ordinated plans in place. And I guess that's why I feel that for a resolution like this, to urge the provincial government to continue to combat poverty in Manitoba, and provide Manitobans living in poverty with the means to succeed, is an, you know, it's a plausible opportunity. It's a plausible opportunity and something that should be a vision for any government that's in power.

And I guess I speak as a member of the opposition today, representing the southwest corner of Manitoba, Arthur-Virden and, you know, we have an opportunity--as I deal with similar circumstances in my constituency from time to time--to make improvements, and I know that it is time for a change of government to look at the opportunities that could arise. This government has had 10 years to fix the problem. Perhaps one could say that there's an analogy to health care, where they said they would fix it with $15 million in six months.

There's a great oversimplification of the difficulties in some of these circumstances, Mr. Speaker, and this government has never done anything to change that, never done anything to fix that circumstance, and I just have to say that that there are--that, while I know the member from Wolseley means well, he's--he is a backbencher, perhaps, and with all due respect, I know full well that, that the government has tried to make some changes, and has made some changes. But they've had 10 years to fix a program like this and to deal with it and here we are, as my colleagues have mentioned, we're on the front pages of the papers across Canada. We're on the news every night about crime and stabbings and beatings and issues of degradation in each of these local areas of the city that are dealing with poverty on a regular basis here in the city of Winnipeg–and we're making the national news for all the wrong reasons. For all the wrong reasons.

And it's a shame that a government would have the audacity to bring a private member's bill like this and call it ALL Aboard, Mr. Speaker, because I think that they are, they're definitely, you know, there's a great deal of animosity, I guess, amongst themselves, in regards to wanting to move this forward, amongst some of the backbenchers. I know, he can't--he must be very frustrated by the fact that he has to bring a private member's resolution forward like this so that his colleagues can see the importance of the, of the circumstances that they're faced with. I know that it's
been on the Order Paper for some time, but the fact that he would bring it forward today when we're making the national news for all the wrong reasons, maybe he should ask all of his Cabinet colleagues and the Treasury Board to get ALL Aboard, and get on with fixing this, these unfortunate circumstances for the impoverished of our province, Mr. Speaker, and provide for a much greater opportunity to enhance the livelihoods of all of these citizens in this province.

With those few words, Mr. Speaker, I know that there are others who wish to speak to this particular bill. Thank you—or resolution.

Ms. Flor Marcelino (Wellington): Mr. Speaker, I'm very delighted to be able to speak for this private member's resolution, and I thank my honourable colleague from Wolseley for bringing this resolution to this House.

Mr. Speaker, for someone who has lived in poverty for many years and still in a survival mode to this day, I am qualified to speak on the issue of poverty, as I do know when improvement to living standards have happened or not.

Two days ago, I passed by the newly built Greenheart Housing Co-op located in the Wolseley constituency. Mr. Speaker, it's a beautiful, four-storey, 24 units of housing spaces very soon to be occupied by low-income residents of this city. And just not too long ago, on September 11th, on William Avenue in the Wellington constituency, we had our sod-turning ceremony for a duplex house to be built in that space, and just like Greenheart Co-op Housing, it will be a new structure, very much into the—not really a fad, but the way of building homes and buildings now that they're energy efficient, that they are—they use environmental friendly buildings. But above all, this experimental housing unit will be one of the many to be built all over Canada especially in areas like inner cities to help solve the housing shortage. And also, a few years ago, several years ago, I was visiting—I think it's in the Minto area, there's this—another new co-op housing built, but this one was made possible by the—through the initiative of the labour union, the CAW. Again, this was a co-op housing and this was built for low-income families as well.

And I know of so many friends and acquaintances who have been residents of, let's say, not so desirable living spaces who have now occupied these many co-op housing and they're very happy with the neighbourhood, they're very happy with the new, comfortable space they are in, and they are all the more grateful that all these housing co-ops or housing projects have been available to them because of the initiatives of this government and the previous NDP government.

I was not politically active until a few years ago, and we came here during the time of the then-NDP government under Premier Pawley, and we were quite impressed that the standards of living of people like us from low-income salaries were not too bad. We were comfortable—well, we're used to Spartan living, so—and, but yet, we had a place of our own, a decent place to live. It's not a shanty and it's not a blighted area that we were in, although these are not the 'burbs, the suburbs. And so I thought, I'm grateful that whatever this party or this government is in power, I thought in my—being naive to the politics of the day, I thought they were not doing bad.

* (11:50)

And then came—and then they were out by the late '80s and somehow I felt the difference right away especially when working in—at the college then. We got hit by the Filmon Fridays. I could very well see the reduction in income for our family and—but I can't do much and it stayed for, I think, a year or two, those Filmon Fridays.

And now since 1999 under this government, the marked difference in lives of people is palpable. I've seen a lot of friends who have been in housing projects then or co-op housing then have now bought homes in, some of them in the suburbs, some of them in inner city but they're quite happy that now they have their own place. Well, they have to spend more right now because it's not just 27 percent of their income that they're spending for housing but they were happy. They are happy that their lives have improved and they credit the many policies of this government, especially the last 10 years, for the improvement in the quality of life.

Their children are in school. Their children are able to work in the summer or some of them were able to get student loans. The husband and wife were all working. Those with young children are able to avail of child-care spaces. So qualitatively their lives have improved and I'm sure it's no accident that all this improvement have come to pass.

I would definitely hate to go back to—or I wouldn't, rather, want anyone who's working and hard up, just like we were, to be, again, going through an experience just like Filmon Fridays. So,
Mr. Speaker, I don't have much statistics because I'm not a person who's good in statistics but I do talk a lot or I do have the chance to visit a lot of people mostly from my community and this community has grown tremendously over the last few years. And I'm so— I'm so inspired and I'm so delighted to know that they were, they're very happy to be living in Manitoba and they're appreciating the good governance that they're seeing, a far cry from what they experienced when they were back in the Philippines, and they appreciate that it is so because of the many of the good policies this government has put into place. Thank you, Mr. Speaker.

Mr. Kelvin Goertzen (Steinbach): You can tell that a government has been in government too long when they start to bring forward resolutions and ideas that only ring in here in the Legislature but they'd be hollow if you'd bring them out to the real people of Manitoba. If you bring them to Manitobans and say, this is what your government has brought forward, they wouldn't recognize it for the real Manitoba that they live in because they know, Manitobans know, they get it. They understand that there are many, many problems that haven't been addressed when it comes to poverty in this province and it resonates into crime, into many other issues in the province.

And I think, in fact, that most Manitobans would be disappointed of the self-congratulatory message brought forward by the member from Wolseley. Maybe particularly in his community they would say this is a member who is not in touch with the priorities of our constituents. This is a member who is bringing forward pat-on-the-back resolutions when there are real issues that are being faced in our home community.

In fact, you know, now that they're undergoing a leadership race, we see some of the NDP leadership candidates break loose from the tight messaging that's usually set forward from that Cabinet and they're talking about the truth in some ways.

You had the member for Thompson (Mr. Ashton) saying that crime has skyrocketed under this government. That was his term. He said crime was skyrocketing under the NDP government. Then they had to make an announcement on reducing poverty because he hadn't been able to get it done in Cabinet in the last 10 years, and so you see the truth come out from these leadership candidates. They recognize their own failure and yet you have this self-congratulatory message from the member for Wolseley (Mr. Altemeyer), and I look forward to more revelations, more self-revelations from the leadership candidates as they break free from that tight rein of communication control which has permeated from the Premier's office over the last 10 years and we can hear the truth from those members what Manitobans already know.

And I'll say, Mr. Speaker, very disappointed that on this pat-on-the-back resolution brought forward by the member for Wolseley, he didn't mention any of the organizations who are on the front lines of fighting poverty. He didn't mention—I'll mention one. There's so many I could talk about, but the Siloam Mission who, every day, are talking about how do they help the homeless and their numbers are increasing and they have people who are dedicated to trying to help those who are in need each and every day, but the member for Wolseley, if he would've brought forward a resolution on Siloam Mission or any of the other organizations, I think we would have had unanimous support but, instead, he brings forward a self-congratulatory, false and hollow resolution intended to pat himself and his caucus on the back when many of his own members don't even believe it, and I'm sure that his constituents would be disappointed and say it's not the reality of what we're facing in our community.

So he missed an opportunity. He missed an opportunity to support those who are out there each and every day on the front lines of poverty dealing with the reality. Instead, he comes in here and his words and his resolution, they ring hollow in the Chamber and they're not reflective of the views of Manitobans.

Mr. Kevin Lamoureux (Inkster): Yes, Mr. Speaker, the member from Steinbach has made, I think, members of the New Democratic Party somewhat depressed over the fact that, maybe even somewhat embarrassed, by having this particular resolution brought forward today, because it is— all those issues facing the province of Manitoba and you get a government backbencher that says, well, I want to pat us on the back because we're doing a good job in fighting poverty.

I don't have the statistical numbers right at hand, but the last time I had a discussion with Winnipeg Harvest, my understanding is the number of children going to Winnipeg Harvest has significantly increased over the last 10 years.

So, when you look at issues such as that as to what the member from Steinbach has pointed out in
terms of Siloam Mission, organizations that are on the front line in which people vest hundreds if not thousands of volunteer hours into, and these are the people that are fighting poverty at the street level, and then we talk about the scarcity of time in terms of legislative time inside this Chamber and if we're going to want to pat someone on the back, I would suggest, as the member from Steinbach has, is that we need to look at some of these organizations that are fighting poverty on the streets to believe and try to give the impression to Manitobans that poverty is decreasing in the province of Manitoba in a very real way when, on the other hand, we have an increase in demand for some of those services such as Winnipeg Harvest and the Siloam Mission that it kind of contradicts the reality of the situation, and that is why I think that it's difficult for members, a good number of the members inside this Chamber, and I like to think even possibly some of the government members, from supporting a resolution of this nature.

I call into question the statistics that the member from Wolseley has brought forward. You always have to put things into a proper perspective of time, of how and where we might be in a business cycle and what sort of programs the government has actually implemented and where are some of the examples where government could improve. If you bring in a resolution of this nature, which does nothing more than just kind of pat yourself on the back, how do you expect other political parties to respond to it? To respond in a favourable light would be, in my opinion, be doing a disservice as a member of the opposition given the very nature of everything that needs to be taking place of all the–

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

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

PRIVATE MEMBERS' BUSINESS

Second Readings–Public Bills

Bill 240– The Public Schools Amendment Act (Diabetes Protocol)

Gerrard 3241
Bjornson 3242
Driedger 3244
Irvin-Ross 3245
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Resolutions

Res.20–ALL Aboard

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The Legislative Assembly of Manitoba Debates and Proceedings are also available on the Internet at the following address: