

Legislative Assembly of Alberta

Title: **Monday, March 13, 2006**

1:30 p.m.

Date: 06/03/13

[The Speaker in the chair]

head:

Prayers

The Speaker: Good afternoon. Welcome.

Let us pray. At the beginning of this week we ask for renewed strength in the awareness of our duty and privilege as Members of the Legislative Assembly. We ask for the protection of this Assembly and also the province we are elected to serve. Amen.

Hon. members, today we'll be led in the singing of our national anthem by Mr. Paul Lorieau, and I would invite all hon. members and all participants in the galleries to join in in the language of one's choice.

Hon. Members:

O Canada, our home and native land!
True patriot love in all thy sons command.
With glowing hearts we see thee rise,
The True North strong and free!
From far and wide, O Canada,
We stand on guard for thee.
God keep our land glorious and free!
O Canada, we stand on guard for thee.
O Canada, we stand on guard for thee.

The Speaker: Please be seated.

head:

Introduction of Visitors

The Speaker: The hon. Member for Bonnyville-Cold Lake.

Mr. Ducharme: Merci, M. le Président. Aujourd'hui j'ai le privilège de présenter en votre nom à vous et à l'Assemblée des invités spéciaux venus de la communauté francophone. Ils sont assis dans votre galerie et étaient ici ce matin lors de la cérémonie en reconnaissance des Rendez-vous de la Francophonie, une célébration annuelle de l'histoire et de la culture françaises et la Journée internationale de la Francophonie, qui aura lieu le 20 mars.

Je suis heureux de vous présenter en premier lieu les membres de l'exécutif de l'Association canadienne-française de l'Alberta. L'association, connue sous l'acronyme ACFA, a son secrétariat provincial à Edmonton, chapeaute plusieurs autres organisations, don't douze bureaux régionaux à travers la province. L'année 2006 est une année marquante pour l'ACFA alors qu'elle célèbre son 80e anniversaire.

Parmi nous aujourd'hui sont M. Jean Johnson, président, M. Jean-Louis Dentinger, conseiller, et les accompagnants pour cette journée spéciale à la Législature sont les membres de mon équipe au Secrétariat francophone, M. Denis Tardif, directeur général, et Mlle Cindie LeBlanc, directrice adjointe. J'aimerais qu'ils se lèvent et soient reconnus. Je vous invite à vous joindre à moi pour leur souhaiter une bienvenue chaleureuse.

Merci, M. le Président.

[Translation] Thank you, Mr. Speaker. Today I have the privilege of introducing to you and through you to the Assembly a number of guests from the francophone community. They are seated in your gallery and are special guests who attended the morning celebrations in the rotunda to mark the beginning of Les Rendez-vous de la Francophonie, a two-week celebration of French culture and history, and International Francophonie Day, coming up on the 20th of March.

I am pleased to first introduce executive members of the French Canadian Association of Alberta. The association, commonly known as the ACFA, is the provincial umbrella organization representing all francophones, with a provincial secretariat in Edmonton and 12 regional chapters across the province. The year 2006 represents an important milestone for the association as it celebrates its 80th anniversary.

Present today are its president, Mr. Jean Johnson, and councillor Mr. Jean-Louis Dentinger. I would ask them to stand up and be recognized by the Assembly.

Joining them on this special day at the Legislature are members of my staff at the Francophone Secretariat, Mr. Denis Tardif, executive director, and Ms Cindie LeBlanc, assistant director. I would like them to stand and be recognized.

I would invite the members of the Assembly to join me in extending them a warm welcome.

Thank you, Mr. Speaker. [As submitted]

The Speaker: Hon. members, today is Commonwealth Day. We celebrate the ties that bind us with over one-quarter of the world's population that live in Commonwealth countries. In the Speaker's gallery are three of the founding members of the Royal Commonwealth Society's Edmonton branch, which was founded in 2004. I'm happy to report as well that the Edmonton branch has undertaken to cosponsor and assist in the promotion of our annual Alberta Commonwealth Parliamentary Association student essay competition. An information sheet on the good work that the Royal Commonwealth Society does is on each member's desk. I now invite Colin Reichle, the branch's chair; Dr. Dugan, vice-chair; and Charles Hunt, the treasurer, to rise and receive the warm welcome of this Assembly.

Hon. members, my vignette of the day will be about the two chairs on the dais. In the Speaker's gallery are craftsmen who built the chair on the right. They're Chad Hoflin, a former Infrastructure and Transportation employee; Dennis McDonald, a former Infrastructure and Transportation employee; Patricia Souliere, an apprentice carpenter with the Department of Infrastructure and Transportation; and Amie Scott, an apprentice painter with the Department of Infrastructure and Transportation. Robert van Essen, a former Infrastructure and Transportation employee who also worked on the project that I will describe later, could not be with us today. I'd invite all hon. members to extend to them the warm welcome of the Assembly.

head:

Introduction of Guests

The Speaker: The hon. Minister of Advanced Education.

Mr. Hancock: Thank you, Mr. Speaker. Today in the members' gallery are two of Alberta's outstanding postsecondary leaders. Sharon Carry, president and CEO of Bow Valley College in Calgary, is a true visionary and a passionate advocate for the role of learning in securing the future of our province. Sharon has been president of Bow Valley College since 1997 and has successfully led the transformation of the college into one of Alberta's leading postsecondary institutions. Value for money, there is no better source of education.

Séamus O'Shea, vice-president academic at the University of Lethbridge, is also in the gallery. Séamus has been with the University of Lethbridge since 1977 and is a professor in the department of chemistry and biochemistry. He has served as vice-president academic since 1991 and has been active in the implementation of information technology for academic and administrative

purposes. You may recall that Séamus O'Shea is also the chair of Alberta's iCORE, informatics circle of research excellence.

Mr. Speaker, I met with both Sharon and Séamus today to discuss the creation of a common student application system. These are the two leaders of the process, and it's exciting to see where the initiative is going. It's very complex. It will take a little while to get up and running, but the talent and enthusiasm and leadership behind that project could be in no better hands. I'd ask the two to rise and receive the traditional warm welcome of our Assembly.

The Speaker: The hon. Minister of Human Resources and Employment.

Mr. Cardinal: Thank you very much, Mr. Speaker. It's my pleasure to introduce to you and through you to the members of the Assembly 24 grade 6 students from Boyle school, and they are accompanied by their parents and teachers. They are seated in the members' gallery. I'd ask them to rise and receive the traditional warm welcome of the Assembly.

The Speaker: The hon. Minister of Gaming.

Mr. Graydon: Thank you, Mr. Speaker. I'm fortunate to have a guest here today. This young fellow is a student at the University of Alberta studying political science, and then he hopes to go on to a law degree. Kurtis Streeper worked in my constituency office last summer, and I'm hoping to welcome him back to the same position again this year, where he can do his excellent job of serving the constituents of Grande Prairie-Wapiti. I'd ask Kurtis Streeper to stand and receive the warm welcome of the Assembly.

The Speaker: The hon. Member for Edmonton-Meadowlark.

Mr. Tougas: Thank you, Mr. Speaker. It's my pleasure to introduce to you and through you to all members of this Assembly a group of 31 students and teachers from Meadowlark elementary school, led by their teacher Lu Zhang. The parents are Jessica Tang, Liz Leung, Angela Kwan, and Sylvia Lo. Would they please rise and accept the traditional warm greeting of this House.

The Speaker: The hon. Member for St. Albert.

Mr. Flaherty: Thank you, Mr. Speaker. I'd like to introduce to you and through you to members of the Assembly 76 grade 6 students from Albert Lacombe school. They're accompanied by their teachers, Mr. Joe Esposito, Mrs. Elaine Whittaker, Mrs. Paddi Brown, and Mrs. Donna Ernst, who is a teacher assistant, and parents Mrs. Laura Kabat and Mr. Nick Tassone. Would they please rise and receive the warm welcome of the Assembly.

Thank you, Mr. Speaker.

The Speaker: The hon. Member for Edmonton-Calder.

1:40

Mr. Eggen: Thank you, Mr. Speaker. It gives me great pleasure to introduce to you and through you to all members of the Assembly 42 students from Prince Charles elementary school. Along with them are two teachers, Ms Alicia Cardinal and Mrs. Clementine Spence; two student teachers, Ms Sylvia Hui and Mr. Nick Larkin; two teachers' assistants, Ms Sinclair and Mrs. Gelasco; and a parent, Mrs. Laurie Callihoo. They'll actually be here at 2:00 this afternoon, but can we give them a round of applause anyway.

Thank you.

The Speaker: The hon. Member for Edmonton-Strathcona.

Dr. Pannu: Thank you, Mr. Speaker. I'm pleased today to introduce to you and to the House Zoe Todd. Zoe is a graduate of the University of Alberta and plans on pursuing a degree in medical anthropology as an extra. Zoe is currently a volunteer with the Seminar on the United Nations and International Affairs. Zoe has been a wonderful addition to my constituency office staff and is assisting us with community outreach. I trust that she is sitting in the public gallery. I will now ask her to please rise to receive the warm welcome of the Assembly.

The Speaker: The hon. Member for Edmonton-Beverly-Clareview.

Mr. Martin: Thank you, Mr. Speaker. I'm delighted today to introduce to you and the members of the Assembly two active women in the Edmonton community. Docia Lysne is an active NDP volunteer over a number of years and also serves on the board of directors for Planned Parenthood. She serves as a mentor for the Edmonton institute for women. Marion DeShield is a former leader of the national black women's coalition and is a senior citizen volunteer with the seniors' centre here in Edmonton. My guests are seated in the public gallery, and I would now ask that they rise and receive the traditional warm welcome of the Assembly.

head:

Oral Question Period

The Speaker: First Official Opposition main question. The hon. Member for Calgary-Currie.

Calgary Funding Needs

Mr. Taylor: Thank you, Mr. Speaker. The mayor of Calgary has been trying since before Christmas to get in to see the Finance minister to discuss her upcoming Alberta budget. Now, I don't know how the minister expects to learn Calgary's needs otherwise since there are few people alive who can remember the last time the Calgary Conservative caucus went to bat for their hometown. To the minister: why is she refusing to consult with the mayor of Calgary until two days after she brings down the budget?

Mrs. McClellan: Mr. Speaker, I have not refused to meet with the mayor of Calgary at all, and I am disappointed that this hon. member chooses to continue this discussion, which is really without a great deal of foundation. Let me just set the record straight. I received a letter from the mayor of Calgary on December 15 wanting to talk about some municipal taxation issues. I responded to the mayor immediately and asked because of the budget meetings we were encountering then, remember, the 15th of December, if he would meet with 23 MLAs from Calgary, or thereabouts, and share their concerns – they could meet in a group – and, most appropriately, could he meet with the Minister of Municipal Affairs. I did not receive a response to that letter.

The Speaker: The hon. member.

Mr. Taylor: Thank you, Mr. Speaker. A supplementary to the Premier: could the Premier at least meet with the mayor between now and budget day if the Minister of Finance continues to refuse to do so?

Mr. Klein: I can tell you, Mr. Speaker and this hon. member, that I have met with the mayor of Calgary on numerous occasions, and depending on what he wants to speak to me about, I'd be very happy

to meet with him, but I can't go into details of the budget with the mayor or with members of the opposition or members of the media or anyone else for that matter.

The Speaker: The hon. member.

Mr. Taylor: Thank you, Mr. Speaker. The Premier can listen to the other party.

Given the refusal of the Finance minister to meet with the mayor and the failure of the Education minister to meet with the Calgary school board chair in advance of the budget about the budget, why is the Premier allowing his ministers to take the citizens of Calgary for granted?

Mr. Klein: Mr. Speaker, I'll have the hon. Provincial Treasurer respond in detail, but both the Calgary mayor and the chair of the Calgary school board are criticizing the province for what they claim is a lack of funding to the city. Both claim the government is ignoring the needs of Alberta's largest city, a unicity. I would like to remind both individuals and the hon. member that over the past year this government has invested more than \$4.14 billion – billion – for roads, schools, hospitals, and many other priorities in the city of Calgary.

The Speaker: Second Official Opposition main question. The hon. Member for Calgary-Currie.

Corporate Donation to Olds College

Mr. Taylor: Thank you again, Mr. Speaker. The moral of the story of the Pied Piper is that he who pays the piper calls the tune. EnCana Corporation has given Olds College over a million dollars to fund, among other things, an expanded land sciences program with a curriculum developed by the oil industry. To the Minister of Advanced Education: sure, we want our sons and daughters to be employable when they graduate, but what steps is he taking to protect the academic autonomy of Olds College here?

Mr. Hancock: Well, Mr. Speaker, I think that that's a very nasty slur on a very fine institution. Olds College has served Alberta and Albertans, particularly in the agriculture and home economics area and now in land sciences and horticulture, for many, many years and does a fine job of doing that. It provides an excellent educational opportunity for students.

The hon. member knows, or at least should know, that every new program that comes forward has to go through the quality Alberta council, which ensures that it's of the highest quality standards and that it's an appropriate program for students. Any new program offered by Olds College will go through that process. The hon. member knows that, and he should actually withdraw that kind of a slur against one of Alberta's fine public education institutions.

The Speaker: The hon. member.

Mr. Taylor: Thank you, Mr. Speaker. To the minister: given the comments last Tuesday in Camrose by the hon. Member for Cypress-Medicine Hat regarding the Land Agents Licensing Act that, quote, industry is in control of the act, is the minister at all concerned that this new arrangement inappropriately places this program at the beck and call of the industry?

Mr. Hancock: Mr. Speaker, I can't comment on what another member might have said when I wasn't there, but I can assure the House of this: Olds College offers land management programs and

is expanding those programs. They're of excellent quality, and it's very important that they do so. As this government embarks on a land-use strategy to mirror the air-quality strategy that we have, the clean-air strategy, and the Water for Life strategy, a land-use strategy that is being developed by this province as part of our 20-year strategic plan, having knowledgeable people and knowledgeable programs in that area is of very, very high importance. Olds College is actually leading the way in that area with quality programs which are not industry controlled but are controlled through the college itself through a community-governed organization, a board-governed organization with independence and the requirement that all programs be approved through the quality Alberta council. It couldn't be a higher standard than that.

Mr. Taylor: Mr. Speaker, will the minister commit to urging the college to consult with landowners, with the Alberta Surface Rights Federation, the Alberta grazing lease association, and other such organizations on this new curriculum, or does that only come with million dollar donations?

Mr. Hancock: Mr. Speaker, good corporate citizenship and good individual citizenship are the backbone of this province. Individuals and members of the community and corporate citizens in this province should be encouraged to contribute to advancing the education in this province. They should not be slurred. They should not be run down. They should not be denigrated for being good corporate citizens. Donating money does not give control, not in this province for public education, not in this province for political purposes. Giving money is good corporate citizenship. It helps enhance the learning opportunities for students. The quality of the program is strictly in the hands of the institution itself, its board governance, and subject to the quality Alberta control council. This member knows that and should understand that and should not be besmirching the reputation of a fine public institution and good corporate citizens.

The Speaker: The hon. Member for Edmonton-Centre.

1:50

Health Care Reform

Ms Blakeman: Thank you, Mr. Speaker. An article by the Minister of Health and Wellness appeared in a Calgary newspaper over the weekend in a weak attempt to explain the third way. This article did not provide any of the details that Albertans have been demanding. It was vague, uninformative, and now there are only 17 days left in the consultation. My questions are to the Minister of Health and Wellness. Given that the Alberta Medical Association, which represents 97 per cent of Alberta's physicians, wants more details about the proposed reforms, will the minister clearly define which hospitals and medical services would be privately insured?

Ms Evans: Mr. Speaker, first of all, just on the subject of private insurance, that is not the subject of the consultation on the health policy framework. I met last week with the membership, the executive of the Alberta Medical Association. They did raise a number of issues. They indicated to me that they would be raising these points at their meeting this weekend. My understanding is that this weekend they dealt with care guarantees and a request for having more detailed information. They were positive about many of the points in the health policy framework. Relative to certain particular points relative to workforce and the role of doctors in any other altered system, they asked for more detail, and in due course we will provide that.

The Speaker: The hon. member.

Ms Blakeman: Thank you very much. Again to the same minister: given that the AMA is only now being consulted, can the minister explain why Alberta's doctors weren't involved in the drafting of such significant policy changes?

Ms Evans: Mr. Speaker, the College of Physicians and Surgeons and members of the Alberta Medical Association have talked and had an ongoing dialogue with Health and Wellness as we normally would. I know that's happened with my predecessors; it's happened with myself. Relative to many of the proposals that are in that particular policy framework, we have talked to them. There has been dialogue about the specifics that they're asking for now. There's obviously more dialogue to occur. But prior to even tabling the health policy framework, in general terms we had a discussion with members of the Alberta Medical Association, the College of Physicians and Surgeons, and several other providers. We provided some early indication of the types of things we were looking at.

Ms Blakeman: Well, they're still looking for detail.

Again to the same minister: given that Alberta's doctors weren't consulted on this, evidence from the Health Symposium was ignored, and Albertans have had very little opportunity for input, can the minister explain who is driving these health reforms?

Ms Evans: Well, Mr. Speaker, I think if you're a person on the waiting list for a hip, if you're a person on the waiting list for knees, if you are persons waiting for cataract surgery, if you are people that have waited a long time for surgery, you're asking us to make some changes and look at options.

The other thing, Mr. Speaker: I would say that Canadians are recognizing that we have to change. We may not all agree on what the changes are, but it's very clear that in order to provide timely care and the proper access for individuals as well as something that continues to make it possible not only in the foreseeable future but years beyond to sustain the health care service delivery system, it's up to all of us to look. Universally across this nation, I believe, at least across Canada we are looking at other ways of doing things.

The Speaker: The hon. Member for Edmonton-Highlands-Norwood, followed by the hon. Member for Calgary-East.

Rural Health Care

Mr. Mason: Thank you very much, Mr. Speaker. Rural health care has been on life support in Alberta for years now. Now the government plans to pull the plug completely. Dr. Brent Piepgrass, the vice-president of medical services with the Peace Country health region, describes the impact of the third way as frightening. To the Premier: why is the government threatening rural Alberta health care by pursuing policies that Dr. Piepgrass says will only lead to a further drain of doctors from rural areas to large cities?

Mr. Klein: Mr. Speaker, I haven't spoken to the doctor in question. This is the opinion of one individual. I'm sure that the hon. Minister of Health and Wellness will speak to him if he wants to speak to her and provide his opinions and, hopefully, his options and his suggestions to make the system better.

The Speaker: The hon. member.

Mr. Mason: Thank you very much, Mr. Speaker. To the Premier again: why is this government failing small towns like Manning in

Alberta by proposing for-profit medicine that will make it almost impossible for those towns to retain their local doctors?

Mr. Klein: Mr. Speaker, I'll have the hon. Minister of Health and Wellness respond in detail, but the challenge of attracting doctors to rural areas is a constant problem notwithstanding the fact that we have a rural MD strategy. This isn't an issue just here in Alberta. It's an issue in ND Saskatchewan and ND Manitoba as well because doctors across North America are moving to urban centres. Despite that, Alberta's rural physician action plan has helped, I think very significantly, maintain the ratio of doctors to patients in rural Alberta over the last five years. In fact, I'm told that since 2004 the number of doctors in rural Alberta has actually increased by about 3 per cent.

The Speaker: The hon. member.

Mr. Mason: Thank you very much, Mr. Speaker. Again to the Premier: why is his government refusing to have open, public, and transparent hearings if not just to hide the disastrous consequences of its third-way privatization scheme on rural health care?

Mr. Klein: Mr. Speaker, not only can the minister speak about the challenge of attracting doctors to rural areas; she can speak in detail about the public consultation process. I'll have her respond.

Ms Evans: Mr. Speaker, we are working extensively and exhaustively, the colleagues and myself, on speaking with people in rural Alberta and in urban Alberta. I've had consultations this morning. I had consultations Saturday. We will be providing the list of people that we've consulted with. We're getting a lot of letters and e-mails, and we're responding to those. People have had meetings, and frequently they request a private audience. They want to talk in private about health care, but we are very willing to meet in open settings with them as well. I'd have to say that the response to those meetings has been very positive. We've had, obviously, several here in Edmonton, and in the latter part of the month we'll be in Lethbridge and Medicine Hat. We'll be in Hinton this Saturday and in Calgary on Saturday as well to divide our time between two places, to hit the very specific concerns from very specific communities.

Mr. Speaker, we're very willing and open to listening. I want to just say thank you to the MLAs who've undertaken private and public discussions with their residents about health care. They are also adding to the information that we're bringing forward.

The Speaker: The hon. Member for Calgary-East, followed by the hon. Member for Edmonton-McClung.

Gangs and Organized Crime

Mr. Amery: Thank you, Mr. Speaker. Last week my constituents were confronted with the latest carnage that has resulted from a gang war in Calgary. This latest homicide and retaliation unfortunately both occurred in my constituency and seemed to be directly related to two gang-related homicides last summer. My question is to the hon. Solicitor General and Minister of Public Security. Could the minister inform the House and my constituents as to the actions that our government and his department are taking to combat organized crime in Calgary and across the province?

The Speaker: The hon. minister.

Mr. Cenaiko: Thank you very much, Mr. Speaker. These incidents once again highlight the nature of the violence among gangs and

organized crime within our province and, coming with this, obviously, the tragedy that follows these incidents for the families whose sons are deceased. The police are doing their job in looking at the investigations and the resources that they have. These are highly intensive investigations that take more resources than most other investigations due to the seriousness, due to the danger that surrounds them. But intelligence-led investigations – for example, the situation in Calgary – are really based on the intelligence information they get from the policing community as well as from the public. Chief Jack Beaton and myself on Friday appealed to the public for members to provide that information to the police service, to phone Crime Stoppers if they have any information regarding gang activity in their communities or in their neighbourhoods.

2:00

Mr. Speaker, our department utilizes Criminal Intelligence Service Alberta; IROC, the integrated response to organized crime; as well as the new ICE team that was deployed this year, the integrated child exploitation unit; regarding organized crime throughout the province.

The Speaker: The hon. member.

Mr. Amery: Thank you, Mr. Speaker. Again to the same minister: could the minister inform the House as to what the performance measures are that his ministry is using to ensure that the money targeted against organized crime through IROC is being effectively spent?

Mr. Cernaiko: Mr. Speaker, IROC has a mandate to use a variety of enforcement strategies and partnerships to dismantle and disrupt organized crime throughout the province through their police services, being the RCMP in Edmonton and Calgary. As well, we provide funding for officers in Lethbridge, Medicine Hat, as well as Camrose. I can't release specific performance results regarding their investigations, obviously, due to the fact that they have ongoing investigations at this very time. I can assure the hon. member that the outcome of IROC investigations is made public through the media releases upon the effective arrests.

The Speaker: The hon. member.

Mr. Amery: Thank you, Mr. Speaker. Again to the same minister: could the minister inform the House as to what successes IROC has had in ensuring that law-abiding Albertans are being kept safe from these violent crimes?

Mr. Cernaiko: Well, Mr. Speaker, as I mentioned earlier, these are very highly intensive, resourced investigative bodies, or IROC is. Obviously, it takes a large number of officers to work on these investigations due to the seriousness, whether it's surveillance, whether it's intelligence probes, or whether it's the investigative capabilities themselves, of each of these investigations.

I'll give you three very quick examples, Mr. Speaker, that occurred this past year, just within the last seven months. Project Intrigue was an IROC investigation with the RCMP and the integrated proceeds of crime where they, in fact, seized \$4.25 million worth of ecstasy, drugs, body armour, and semi-automatic weapons. Project Ikon was another example. In September four men and one woman were arrested with \$450,000 worth of drugs and weapons. Project Infiltrate: in December of this past year, a \$30 million mortgage fraud in and around the Edmonton area, including Camrose; 118 properties; six properties in Camrose as well.

The Speaker: The hon. Member for Edmonton-McClung, followed by the hon. Member for Calgary-Nose Hill.

Treasury Board Meeting Attendance Records

Mr. Elsalhy: Thank you, Mr. Speaker. It's shameful that this government refuses to be accountable, hiding behind some of the worst FOIP legislation in the country. Alberta's Privacy Commissioner recently said that the government needs to adopt a culture of openness. Last week one example of this culture of secrecy was when the Official Opposition was asked to pay \$174,000 for documents related to the income support and AISH class-action lawsuit, and don't tell me this is for photocopying costs. To the Minister of Government Services: if the minister believes in the importance of open, accountable government, why does he support changes to the FOIP policy which will increase government secrecy and limit access to information?

Mr. Lund: Well, Mr. Speaker, this government has for a number of years had a very open and accountable system. The member refers to some charges. Well, let the facts be known that, in fact, since this legislation was passed, it has cost the Alberta government some \$56 million. How much have we collected in fees? Five hundred and thirty thousand dollars.

Mr. Elsalhy: This question is to the Deputy Premier. Given the outrageous cost of FOIP requests, will the minister save taxpayers' money by tabling attendance records for the Treasury Board meetings at which the lawsuit and the settlement were discussed? Nothing confidential, just the attendance records.

Mr. Klein: Well, Mr. Speaker, we don't normally know who is asking for the FOIP information, but the hon. member has admitted it. The opposition has requested, obviously, information regarding the collection of overpayment and compensation for underpayments to individuals on AISH. Right?

Now, Mr. Speaker, our officials, good-thinking public service employees with no crosses to bear, no political allegiances, estimate that it will cost \$326,000 to comply with the opposition's request. So the request that was received by the FOIP commissioner was very broad and would require a significant \$326,000 worth of staff time and office resources to search for the records, prepare, and copy them all for the Liberal opposition.

The Speaker: The hon. member.

Mr. Elsalhy: Thank you, Mr. Speaker. To the Premier then. Okay. Don't give us the entire FOIP request. Just tell us who was at those meetings.

Mr. Klein: Mr. Speaker, I'm told that a total of 200,000 pages would have to be prepared, so we feel that the estimate relative to the fee being charged is fair given the immense scope of this project. I'll have the hon. Provincial Treasurer respond.

Mrs. McClellan: Well, Mr. Speaker, just briefly. No, I will not give the attendance records of a Treasury Board meeting. I am the chairman of Treasury Board, and it's well documented. There is also a list of people who belong to Treasury Board, and those are the people that are present at Treasury Board meetings.

Common Student Application Process

Dr. Brown: Mr. Speaker, with the high standards required for access to postsecondary institutions in Alberta, students often have to apply

a number of times to several institutions in order to gain admission. This leads to inefficiencies and wastes of time and money both for the students and the institutions. It's been almost a year since the common application process was proposed in the Access to the Future Act. My question is to the Minister of Advanced Education. Why is it taking so long for a common application process to be instituted in Alberta?

The Speaker: The hon. minister.

Mr. Hancock: Well, thank you, Mr. Speaker. It is complicated, but it's important. It's important work that is being done. As the hon. member indicated, the Access to the Future Act did provide for the development of a common application system, but we have in this province publicly governed, board-governed institutions. They're independent institutions, so it takes a great deal of work and collaboration to bring them together to work on a system of this nature.

Now, we're very fortunate, of course, in having good leadership in that system, and I introduced earlier today Sharon Carry of Bow Valley College and Séamus O'Shea of the University of Lethbridge. I was able to meet with them about the work that they're doing. They've brought together a committee of all the universities and public colleges in this province. The representatives of those colleges meet on a weekly basis. As I understand it, they have an independent consultant working with them looking at what the potential barriers to success are, what the issues that need to be addressed are. They've made a huge commitment to meet this goal.

The common application system will be in place, hopefully, on a pilot basis by next year and fully implemented by 2008 if all goes well. I must say that it's one thing for me as Minister of Advanced Education or for this House through the Access to the Future Act to say that this is a very important project. It's quite another thing to get the colleges and institutions working together, as they have been collaboratively over the past year, to develop a very strong system for the benefit of learners in Alberta.

Dr. Brown: Can the minister assure Alberta students that the single point of entry will be available to benefit all Alberta students, including those applying from rural areas?

The Speaker: The hon. minister.

Mr. Hancock: Thank you, Mr. Speaker. In fact, that is one of the huge benefits of having a common application system. All of us who've had children know how difficult it is to not only get the information you need but to send the applications to various numbers of institutions, pay the fees, and do that. The common application system will allow any student from anywhere in the province and, for that matter, students outside the province to access all of our public education system through one point of access, hopefully through one application fee. That system will be able to draw from other elements of our system in terms of getting, for example, transcripts attached to the student finance system, so it will be a very robust and complex system but will give every Albertan, regardless of where they live, access to all of our public postsecondary institutions.

2:10

Dr. Brown: Can the minister advise whether any money has been allocated to move this process forward? How much is it going to cost to get it up and running?

The Speaker: The hon. minister.

Mr. Hancock: Thank you, Mr. Speaker. Yes, indeed. The postsecondary application system is an important building block in creating an innovative and seamless process. It has been done elsewhere but not together, as we're proposing here. Ontario has a college application system. What we're talking about is putting all of the public postsecondary institutions on the same system. We've invested a million dollars in it this year. We're looking forward to a proposal from the group that's putting it forward in terms of how much it will take to complete the process and to ensure that the process is built so that we can add functions to it on an ongoing basis. So we've invested a million dollars this year, and the budget over next year will come forward at that time.

The Speaker: The hon. Member for Edmonton-Decore, followed by the hon. Member for Bonnyville-Cold Lake.

Home Building Contractors

Mr. Bonko: Thank you, Mr. Speaker. When buying a home in Alberta, it's buyer beware. All my questions are to the Minister of Government Services. Last week the minister admitted that there are people having difficulty with home contractors. Can he elaborate on what these problems are?

Mr. Lund: Mr. Speaker, if that was asked on our side of the House, it would be called a puffball. But the fact is that some of the problems – for example, finding a contractor is a big problem. The issue, as well, is that we've seen reports where there's a disagreement between the contractor and the individual who is having the work done.

One of the things I would highly recommend before someone starts a renovation or the building of a new home is to be very specific in a contract as to what exactly is covered, what kinds of materials you are using. Any time you ask for any change in the contract, make sure that it's documented, whether it be the contractor that's asking for a change or the individual that is having the renovation or the new structure built.

The Speaker: The hon. member.

Mr. Bonko: Thank you, Mr. Speaker. Is the minister suggesting that people contract with lawyers to read over the fine print because they're first-time homeowners? Is that what he's suggesting?

Mr. Lund: Well, Mr. Speaker, no, I'm not suggesting that. Having gone through this personally – and I'm not a builder – the fact is that if you sit down and talk with the contractor, you can work these things out. There is some legislation in place that deals with the signing of contracts and what a contract means. For example, you have up to 10 days after a contract is signed to exit the contract at no charge. The fact is that during that time frame if a person wants to talk to some other folks that are familiar with contracts, they're able to do it. It doesn't necessarily have to be a lawyer.

Mr. Bonko: Given that the Alberta Home Builders' Association states that "not all contractors play by the same rules," why is this ministry passing on the problems to the consumers instead of solving them?

Mr. Lund: Well, Mr. Speaker, it's not a case of not doing anything. We have through the licensing process, for example, many of the

trades having to be licensed. They have to have gone through apprenticeship. There are those kinds of things that we put in place. But government cannot hold the hand of everyone all the time, under all circumstances. That just can't be done.

The Speaker: The hon. Member for Bonnyville-Cold Lake, followed by the hon. Member for St. Albert.

Health Care Reform (continued)

Mr. Ducharme: Thank you, Mr. Speaker. On Saturday the Minister of Health and Wellness and myself met with Bonnyville-Cold Lake constituents to discuss health reforms. All of the groups we met with identified abuses of the health system by unwarranted visits to family physicians. Most requested the implementation of user fees in order to reduce this abuse even if it contravenes one of the principles of the Canada Health Act. My question is to the Minister of Health and Wellness. Is the implementing of user fees being requested elsewhere in the province as you go through the consultation process?

Ms Evans: Mr. Speaker, I have had a number of people petition that we should be looking at something like this in order to avoid the potential for abuse. We are not looking at user fees at this time. We are not contemplating that, nor am I aware of any place in Canada where that takes place. But I will cite that some people are very frustrated by long waiting times in emergency, for example, or by people that they feel go repeatedly to doctors' offices, perhaps without cause, their neighbours. Those are the kinds of things that people bring forward because they do want us to have an efficient system, and they want us to as much as possible reduce the opportunity to have to wait in the system by responsible attitudes. I think the part of our policy that talks about putting patients first, discussing the self-empowerment rather than self-entitlement is a good watchword for this.

The Speaker: The hon. member.

Mr. Ducharme: Thank you, Mr. Speaker. To the same minister: given that the fee-for-service agreement with our family physicians only allows for the diagnosis and/or treatment of one ailment per visit, therefore requiring subsequent appointments for extra ailments, will the new health proposals address this very expensive form of health delivery service?

Ms Evans: Mr. Speaker, in our health policy framework document, policy 3, talking about new compensation models, we look at the compensation by team rather than a fee-for-service model that could lead itself to that. It is not dictated or it's not required that a physician would only look at one particular service to a patient, but many choose to do so relative to their appointment schedules, which we are not responsible for. We are going to as much as possible encourage a way of compensation so that these kinds of things, this needless cost and inconvenience to patients, can be avoided, and we are working with that in mind.

The Speaker: The hon. member.

Mr. Ducharme: Thank you, Mr. Speaker. To the same minister: given that Alberta teens can access health services at no cost without the knowledge of their caregivers and in whatever health facility, be it a doctor's office or an emergency room, will the minister commit to commencing a program to educate Alberta youth on the costs

associated with accessing health care services for minor ailments such as colds?

Ms Evans: Well, Mr. Speaker, there are several things that we have to deal with with all Albertans. For example, the use of advanced nurse practitioners in greater numbers could actually deal with some of the colds and flu-like symptoms that people face. At one point there were nurses in school systems, which actually were visiting nurses, that undertook that kind of service. What we are looking at are programs built on the same kind of theory as our Do Bugs Need Drugs?, where we teach elementary children that you don't always need to have a drug in order to solve a problem. We will expand that both through teaching and sensitivity to what actually takes place in doctors' offices and the very real opportunity to get that kind of treatment from another source.

The Speaker: The hon. Member for St. Albert, followed by the hon. Member for Edmonton-Calder.

Schoolchildren with Anaphylaxis

Mr. Flaherty: Thank you, Mr. Speaker. There is a safety threat in our schools that threatens the lives of about 1 in every 60 schoolchildren. This threat comes to school in brown bags in the form of peanut butter sandwiches and other allergens such as seafood. This was such a threat that the province of Ontario recently developed Sabrina's law, ensuring that children are safe from these hidden risks in school. My question to the Minister of Education: has the minister considered the risk of anaphylactic shock to children in Alberta schools?

Mr. Zwozdesky: Yes, Mr. Speaker, I have. We've been gathering data on this for the past little while. The background to this in a nutshell is that a couple of parents did come and talk to me about this – it's a very serious issue – before Christmas, and I undertook in follow-up to that meeting to consult the school boards, who actually develop local policies in this respect, to find out what preventative measures they already have in place. There are a number of things that the school boards do already to try and prevent the circumstance from impacting a child in a negative way, and I'll be working even further with those same school boards and other ones who perhaps don't yet have as sophisticated a policy in place.

The Speaker: The hon. member.

Mr. Flaherty: Thank you, Mr. Speaker. I'll go right to my third question. The minister has answered the second question. Will the minister commit today to conduct a province-wide consultation with many parents, especially rural parents, of children with these life-threatening allergies, to meet with them and see the problem that they have and do something directly about it?

2:20

The Speaker: The hon. minister.

Mr. Zwozdesky: Thank you. Mr. Speaker, I will be putting in motion very soon a process through the Alberta School Boards Association to do a consultation piece, and I can ask them to roll that in as well. It's a sensible suggestion, and I'll certainly take it under advisement.

Mr. Flaherty: Then am I understanding that the minister is telling me that we have policies right now across the province? Is that what you're saying, Mr. Minister?

Mr. Zwozdesky: Yes. In fact, Mr. Speaker, there are policies in place right now amongst all the school boards. To what extent those policies have been fully fleshed out or not I don't have at my fingertips, but I did pursue this issue with a few just to do a dry run, if you will, on what those policies look like.

The policies in some cases include notification at the entrance to the school where they know that they have a child that suffers from anaphylaxis of whatever nature it might be. In other cases I know that parents have taken the responsibility quite directly, and they have consulted with school principals to make sure that the principals are there. In other cases they have a special injection where they can provide a shot of adrenalin to a child who maybe has come down with an allergy symptom or is reacting to something. I just forget the exact name of that particular injection. Nonetheless, those schools that know in advance that children who have this anaphylaxis condition are attending do have those kinds of policies and procedures already in place.

The Speaker: The hon. Member for Edmonton-Calder, followed by the hon. Member for Lacombe-Ponoka.

Physician Input on Health Care Reform

Mr. Eggen: Thank you, Mr. Speaker. The Alberta Medical Association to its credit has, despite considerable political pressure no doubt, declined to support the government's privatized, two-tier health care proposals at its policy meeting last weekend. The AMA president said that it's unfortunate that neither the AMA nor the public has detailed information needed to make informed choices about the proposals. My questions are to the Minister of Health and Wellness. Why does the government continue to keep hidden not only from the general public but even from the province's doctors detailed information on its so-called health care reforms that would allow informed choices to be made?

Ms Evans: Mr. Speaker, I suppose it's always a risk, if you release a policy, that you will be confronted with allegations that you are not providing details. The policy framework, all 10 policies, is a broad framework for addressing concerns that have been raised over the last several years in terms of how we structure our system: putting patients first, the discussion about implementing new fee models, the discussion about the role of hospitals, expanding system capacity. All of those other things that we're doing in the context of the health policy framework are but one step of the 13 strategies we announced last July.

Mr. Speaker, I think it's clear, having talked to the Alberta Medical Association representatives last week, that they do want to have some more detail, but it is certainly no attempt to reduce their opportunity to receive it. It's another stage of the process. We will continue to speak to them.

The Speaker: The hon. member.

Mr. Eggen: Thank you. Given that the factually challenged minister persists in making incorrect claims about health care spending rising faster than government revenues, how can the province's doctors put any stock in the information they're getting from the government?

Ms Evans: Well, Mr. Speaker, I really hope that by the time we come forward with a response to both the AMA and Albertans relative to our consultation process the hon. member will see that I'm not factually challenged.

Mr. Eggen: The information in the paper was not correct.

Why won't the minister admit that her don't worry, be happy routine that she's spreading around the province is actually spreading confusion and is no substitute for open, public hearings on her government's radical, two-tier health care proposals?

Ms Evans: Well, Mr. Speaker, I will take his comments under advisement. I know that many of his comments were less of a question and more of an editorialship on the kinds of consultations we've had. I've been privileged to listen to the views of Albertans. I'll continue to do that to the best of my ability, as will all of the Members of the Legislative Assembly.

The Speaker: The hon. Member for Lacombe-Ponoka, followed by the hon. Member for Edmonton-Meadowlark.

Agricultural Research Spending

Mr. Prins: Thank you, Mr. Speaker. As many members of this Assembly have pointed out recently, Alberta's grains and oilseed producers and farmers are facing one of their most challenging years ever with input costs rising and commodity prices being kind of low. While this government has been hard at work improving already existing programs like crop insurance and CAIS, there are some groups that insist more immediate help is needed. My first question is to the Minister of Agriculture, Food and Rural Development. While I was encouraged to see an announcement of nearly \$30 million for additional research and development funding, why are we spending this money on research instead of continuing to help primary producers directly?

Mr. Horner: Well, Mr. Speaker, it's a good question given that a lot of producers are looking for help immediately, and it's a question that's been addressed in this House several times about the close to half a billion dollars that is available to producers this spring. But coupled with that, when you talk about the hardships that we've had in our entire ag industry over the last three or four years, we came out with a BSE recovery strategy, and we're working on a grains and oilseed recovery strategy. All of those consultations with industry pointed to the fact that we need to also look to the future. When we look to the future, we need to have research and development as a primary focus of that, so we view this \$30 million not so much to help our producers out this spring but to help our producers to that next level of generating revenue out of the marketplace as opposed to programs.

The Speaker: The hon. member.

Mr. Prins: Thank you, Mr. Speaker. To the same minister: what sorts of projects will be funded through this additional research money?

Mr. Horner: Well, Mr. Speaker, primarily the research dollars are going to be going into the grains and oilseed sector through the Alberta crop industry development fund as well as additional funds into the livestock industry development fund as well as some funds that are going to the Agriculture Research and Extension Council of Alberta. It's very important that when we take lab science in agriculture, we have to be able to apply it to the field in an efficient and economical manner. We have a number of applied research groups around the province that are very good at doing that, but they need some help with regard to the capital for the equipment, and they need some help with regard to some of the research projects that are ongoing.

The Speaker: The hon. member.

Mr. Prins: Thank you, Mr. Speaker. To the same minister again: how soon will we see results from this program?

Mr. Horner: Well, Mr. Speaker, I think that in terms of the capital allocation that we are putting out to the extension groups, we should see some results of that fairly soon because those are the types of projects where we can put some equipment out on the ground over the course of the next year. But, again, it's extremely important that we are looking to the future. Today producers are enjoying the benefit of some research that was done five, 10, 15 years ago. We anticipate that the research that we're now embarking on will be of benefit to producers five, 10, 15 years from now in addition to the biofuel-type research that we're doing, which may even be sooner than that.

The Speaker: The hon. Member for Edmonton-Meadowlark, followed by the hon. Member for Calgary-McCall.

First Nations Input on Health Care Reform

Mr. Tougas: Thank you, Mr. Speaker. Last week the assembly of treaty chiefs of Alberta came out in opposition to the third way because they believe further privatization will hurt aboriginal people. My first question is to the Minister of Aboriginal Affairs and Northern Development. Does the minister agree with the chiefs that further privatization of our health care system is bad for Alberta's aboriginal people?

Ms Calahasen: Well, Mr. Speaker, first of all, there was actually an all-chiefs meeting last week, and the all-chiefs came forward with some recommendations which the Minister of Health and Wellness will receive and be able to take into consideration with all the recommendations that they're bringing forward. We have requested that the chiefs – and I've written to all the chiefs in Alberta – make sure that we get their views as to what needs to be done, what the impact will be on any other treaties, and once we receive that information, that information will go straight to the Minister of Health and Wellness so that we can take into consideration their concerns.

Mr. Tougas: To the same minister: is the minister concerned that the privatization proposals will lure doctors away from northern communities, worsening an already serious shortage?

Ms Calahasen: Well, Mr. Speaker, as you know, in northern Alberta we have an issue relative to retaining and attracting doctors, and the RHAs within our northern regions have been exemplary in terms of making sure that we retain those doctors that we do have. We have the rural physician action plan, which has been working very well, to ensure that the doctors that we have will stay, and I know that the Minister of Health and Wellness has certainly ensured that that rural physician action plan will continue and address the shortages that we do experience in northern Alberta. We have a number of plans in place to be able to help those areas, the municipalities that have been looking at doctors, and make sure that we continue to do that.

On the issue of the First Nations, Mr. Speaker, the First Nations certainly do have a concern when it comes to retaining and attracting doctors. As you know, on the federal level we have agreements with the ministry of health and wellness, and those federal agreements address the concern of doctors on reserves.

2:30

The Speaker: The hon. member.

Mr. Tougas: Yes. To the minister of health: can the minister tell Alberta's First Nations people why their specific health concerns have not been addressed by the third-way proposal?

Ms Evans: Mr. Speaker, I'm very glad for that question. The third-way proposal, or the policy framework for the third way, is somewhat unique in that it looks at the system in a broad context for health policy delivery, but if you look at the 13 strategies released last July for getting on with better health care, one of the strategies there is a whole strategy featuring support for aboriginal health and for the aboriginal people. There are many initiatives that we're undertaking, not the least of which are advocating on behalf of aboriginal people and the aboriginal policy framework dealing with health and more health and more collaborative approaches between the federal government, who are responsible for ensuring that health is provided, to the local providers and other partnerships we can arrange.

Mr. Speaker, this morning I met with a member of the aboriginal community who asked quite specifically about some of the supports for infectious diseases.

Pediatric Services in Calgary

Mr. Shariff: Mr. Speaker, in the midst of all the confusing information floating over the third way, the residents of northeast Calgary for a second time are hearing that the 15-bed pediatric unit at the Peter Lougheed Centre may be closed down. This has caused a great deal of stress and grief among residents of northeast Calgary. My questions today are to the Minister of Health and Wellness. Can the minister tell my constituents and the residents of northeast Calgary if there is any truth to the allegations that the Calgary health region is contemplating closing pediatric beds at the Peter Lougheed Centre in Calgary?

Ms Evans: Mr. Speaker, one can assure the residents of northeast Calgary that the Peter Lougheed Centre and the 15 beds there play an important role in delivering pediatric care. There is absolutely no truth to the rumour that those beds will be closed, nor are we contemplating that.

Mr. Shariff: Well, I hope that this is an ironclad guarantee that those beds will not be closed. What assurances can the minister give to residents of Calgary as a whole that they will be able to continue to access pediatric services city-wide despite the opening of the new Children's hospital?

Ms Evans: Mr. Speaker, I think that it's clear that Calgary, in its delivery plans, has tried to cite the region's various service deliveries; in fact, not consolidating all of the service delivery for any one particular group demographically or any one particular disease but making sure that various neighbourhoods have access. Referrals come from the Alberta Children's hospital. They come from the emergency department. They are in the case of the Peter Lougheed receiving children from a variety of places, but there are absolutely no plans to change the structure to reduce the opportunity in community centres. In fact, I see quite the opposite: a prevalence and attitude and philosophy of management of the Calgary system that can assure that in regions quite specifically children's services and pediatric services will be delivered throughout the city as the planning and new facilities come on board.

Vignettes from the Assembly's History

The Speaker: Hon. members, shortly I'll call upon the first of six hon. members to participate today, but before we get to that, our historical vignette of the day.

From Tony Blair to Winston Churchill to Benjamin Disraeli to Lord Palmerston, parliamentarians of the British House of Commons have always had the need to sit while in committee and in the Commons. The chair to my left is an original chair from Westminster. The chair design, done by Augustus Welby Pugin, dates from about 1845 and has remained unaltered to this day. If this chair could talk, it could tell us about all the wars the British people have been in since Crimea, the creation of the British Empire, and developments in the United Kingdom and the world over the past 161 years.

This chair will soon be returned to the British House of Commons. To my right is an identical copy of the original Westminster chair. As an Alberta Legislative Assembly centennial project three dozen Westminster chairs were expertly built by skilled and dedicated craftsmen in the province's Ministry of Infrastructure and Transportation. These new chairs are intended to last well over a hundred years, perhaps 161 years. Individually numbered, the chairs will be placed in the three lobbies of this parliament. They will serve as a visible and very practical reminder of our valued connection with the Mother of Parliaments at the Palace of Westminster.

I would like to thank the minister and the outstanding craftsmen for their support of this project. [applause]

In 30 seconds the first of six.

head: **Members' Statements**

The Speaker: The hon. Member for Bonnyville-Cold Lake.

Les Rendez-vous de la Francophonie 2006

Mr. Ducharme: Merci, M. le Président. Aujourd'hui c'est un plaisir pour moi de présenter à la Chambre une explication d'un événement canadien qui s'appelle Les Rendez-vous de la Francophonie. Neuf millions de francophones se rassemblent à la grandeur du Canada sur une base annuelle pour célébrer Les Rendez-vous de la Francophonie. Cette année Les Rendez-vous ont lieu du 10e au 26e mars. Durant cette période de temps on célèbre les communautés francophones afin de promouvoir la langue et la culture françaises tant par ses activités sociales et ses célébrations que par sa dimension humaine et communautaire.

Les Rendez-vous contribuent à renforcer les liens entre les anglophones et les francophones du Canada et favorisent un plus grand respect entre ces deux communautés. De plus en plus nos municipalités albertaines se joignent aux Rendez-vous en tenant des cérémonies pour reconnaître leur communauté francophone; parmi ces municipalités cette année on compte Red Deer, Lethbridge, Edmonton, et Fort McMurray. Félicitations à ces municipalités.

Comme je le mentionnais lors de la présentation de mes invités spéciaux ce matin à la rotonde de la Législature, le Président de la Chambre était hôte d'une belle célébration dédiée à la reconnaissance de la contribution des francophones à notre province. C'est un geste que la communauté apprécie beaucoup si on en juge par la participation importante de la communauté. Je tiens aussi à remercier mes collègues de l'Assemblée qui ont participé à la célébration.

Cette huitième édition des Rendez-vous revêt une signification spéciale parce que le thème de cette année porte sur les échanges, le dialogue, et le rapprochement entre les communautés francophones et francophiles du pays entier. Alors que l'Alberta recrute de la main-d'œuvre qualifiée de partout à travers le Canada et à travers le monde, ce thème est particulièrement pertinent pour nos communautés francophones, qui accueillent parmi eux un nombre croissant de nouveaux arrivants qui parlent français. Cette diversité vient renforcer notre communauté francophone et nous rend plus dynamique.

Vibrante comme elle l'est, la communauté francophone célèbre sa langue et sa culture tout au cours de l'année par l'entremise de festivals de la chanson, festivals de film, carnivals d'hiver, et j'en passe. J'aimerais profiter de l'occasion pour inviter tous mes collègues à apprendre à connaître la communauté francophone en participant aux événements qui ont lieu dans leur circonscription pendant l'année.

Merci, M. le Président.

[Translation] Thank you, Mr. Speaker. Today it is my pleasure to provide the Assembly with information on a wonderful Canadian event called Les Rendez-vous de la Francophonie. Nine million francophones will get together for the annual Rendez-vous de la Francophonie, which runs this year from March 10 to March 26. During that period of time attention is focused on francophone communities with the idea of promoting French language and culture as much through community and human relations as through social activities and celebrations.

Les Rendez-vous contribute to the reinforcement of links between francophones and anglophones in Canada by fostering greater respect between the two communities. More and more of our municipalities are joining in Les Rendez-vous by holding ceremonies to recognize their francophone communities. Red Deer, Lethbridge, Edmonton, Fort McMurray are some of the municipalities that held flag-raising ceremonies to mark the launch of these celebrations. Congratulations to all of them.

As I alluded to earlier while introducing my special guests, this morning the Speaker of the House hosted a wonderful ceremony in the rotunda to recognize the contributions of the francophone community to our province. Judging by the large attendance, it was very much appreciated by the francophone community. I also want to thank my fellow MLAs who took time off from their busy schedules to stop by.

The eighth edition of these Rendez-vous takes on a special meaning because the theme of this year's event is centred on interaction, dialogue, and connections among francophone and francophile communities across Canada. As Alberta recruits skilled labour from all over Canada and across the world, this is especially relevant for Alberta's francophone communities, who are welcoming among them an increasing number of new Albertans who speak French. This diversity is making our francophone communities stronger and truly dynamic.

Vibrant as they are, francophone communities celebrate their language and culture throughout the year through music and film festivals, winter carnivals, and other celebrations. I would like to take this opportunity to invite all my colleagues to get to know the francophone community and to take in some of these events in their own ridings throughout the year.

Thank you, Mr. Speaker. [As submitted]

The Speaker: The hon. Member for Calgary-Varsity.

Les Rendez-vous de la Francophonie 2006

Mr. Chase: Merci, M. le Président. Les francophones ont contribué au développement et à la culture de notre pays pour plus de 400 ans. Les explorateurs, les marchands, et les habitants ont influencé l'histoire de cette région de l'Alberta.

L'été passé ma femme et moi nous nous souvenions de la contribution culturelle des francophones en Alberta. Pendant que nous visitons le Fort d'Edmonton, nous nous sommes arrêtés au marché. J'aimerais les ceintures de plusieurs couleurs que les coureurs des bois ont porté. Ces ceintures avaient une intention utile. Ils ont protégé et supporté le dos des coureurs pendant qu'ils

ont porté des ballots lourds de fourrures et leurs grands canots de voyageur à travers les portages. Maintenant ils servent comme un rappel historique décoratif.

2:40

La longueur de la ceinture symbolise la longue histoire française dans l'ouest. Les couleurs brillantes représentent les cadeaux riches des arts, de la musique, de la danse, de la langue, et de la culture, qui continuent d'éclairer les environs de l'Alberta. Les filets entrelacés, qui ajoutent la force à la ceinture entière, représentent les contributions des francophones qui ont partagé pour rendre forte cette province.

Aujourd'hui je voudrais reconnaître et remercier les francophones, qui améliorent la qualité de la vie en Alberta en partageant leur culture. Merci, M. le Président.

[Translation] French-speaking people have contributed to the development and culture of this country for over 400 years. French explorers, traders, and settlers have influenced the history of the Alberta region.

This past summer my wife and I were again reminded of the cultural contribution of francophones in Alberta. While visiting Fort Edmonton, we stopped at a market where I was admiring the colourful sashes worn by the coureurs de bois. These devices served the very utilitarian purpose of protecting the backs of men as they carried the heavy fur bales and their voyageur canoes across the portages. Now they serve as a decorative historic reminder.

The length of the belt represents the long history of the francophones in the west. The bright colours represent the rich gifts of art, music, language, and culture, which continue to brighten the Alberta landscape. The interwoven threads, which add to the strength of the whole belt/sash, represent the contribution that francophones have shared to make this province strong.

Today I wish to recognize and thank francophones for improving the quality of life in Alberta by sharing their culture. [As submitted]

The Speaker: The hon. Member for Calgary-Shaw.

Common Student Application Process

Mrs. Ady: Thank you, Mr. Speaker. Today I rise in support of the minister's bold new initiative approach in using technology to make it easier for students to apply for postsecondary studies in Alberta. Although still in its developmental phase, the common application process will be designed to help a more user-friendly method of applying for various postsecondary institutions in one easy step.

Once it's fully operational, the advantages to students will be numerous. No matter where they live in the province, it will be extremely beneficial in serving rural and other underrepresented populations who may have social, cultural, and geographical challenges to deal with. This new, easier to use system will create a level playing field for students who have a harder time with the current, more complex processes. It will also help those learners by providing information on a timely basis and act as an electronic clearing house on available program opportunities.

Under the current application system a student who makes an application to, for example, four postsecondary institutions must fill out four separate applications, submit four separate nonrefundable fees. Under the new process that will all change. The Alberta postsecondary application system will eliminate the necessity for students to pay multiple application fees for multiple applications. It will be one point of entry and result in significant potential time and cost savings for students. While students benefit from a more user-friendly method of applying, there are significant benefits on the institutional and government side as well in terms of creating a standardized process that is more efficient and effective.

The development of this one-stop shopping approach for students is a true collaborative partnership between all the key players in the public postsecondary system. It just makes good sense that people responsible for delivering the programs and services and those enrolled at these institutions have their voices heard in the development of the framework. Working side by side with officials from Advanced Ed to identify and address potential issues or concerns that may arise, it ensures that this new application process will be tailor-made to meet the specific needs of learners, institutions, and government.

I think it's a wonderful system, and I compliment the minister on this.

The Speaker: The hon. Member for Calgary-Lougheed.

Mary Anne Jablonski

Mr. Rodney: Thank you, Mr. Speaker. The Soroptimist Making a Difference for Women award honours women who, through their professional and personal efforts, are making extraordinary differences in the lives of women or girls. This year's recipient is inspiration and encouragement personified, and she joins past honourees around the world such as the late Princess Diana and former Philippines President Corazon Aquino as well as local winners, including Gail Surkan.

Our honouree received a scholarship to attend Brock University in St. Catharines, Ontario, where she studied psychology and political science. She's been married to her husband, Bob Jablonski, for 35 years, and they have three grown children and five grandchildren. Prior to entering politics, she and her husband owned and operated a very successful fibreglass manufacturing company.

Her activism began in 1982, when she along with four other women successfully lobbied the federal government for medical and dental plans for the families of Canadian armed forces and RCMP as well as for the rights of spouses of military members. She's currently serving her third term as MLA for the Red Deer-North constituency and has worked tirelessly to enact changes for the current Protection Against Family Violence Act. This bill has gone to second reading. The hon. member has other bills that have been passed in the Legislature: the Victims of Crime Amendment Act and the Criminal Notoriety Act.

She's perhaps best known for Bill 202, the Protection of Children Abusing Drugs Act. The bill was passed last year, and through the court system it allows parents to force children into a five-day stay in a drug detox facility so they can get treatment. The legislation has been adopted in Saskatchewan and Manitoba, and it's modelled after Bill 202.

In her capacity as MLA she's chaired the Justice and Government Services Standing Policy Committee and the Youth Secretariat and also served as a member of Public Accounts, Members' Services, Health and Community Living, and the Crystal Meth Task Force.

The hon. member is an enthusiastic member of her community, with involvement in various community groups, sporting associations, church boards, the Catholic Women's League, Girl Guides for 20 years, and the chamber of commerce.

Mr. Speaker, I invite hon. colleagues to join me in congratulating central Alberta's newest winner of the Making a Difference for Women award, the hon. Member for Red Deer-North.

The Speaker: The hon. Member for Lac La Biche-St. Paul.

Health Care Reform Consultation in Lac La Biche

Mr. Danyluk: Thank you very much, Mr. Speaker. Numerous meetings were held in Lac La Biche-St. Paul constituency this past

weekend between representatives from many municipalities and communities and the Minister of Health and Wellness.

My constituents raised a number of issues and attributes of our health care system. Overall, they talked about issues relating to doctor recruitment and concerns about waiting times. They asked about having specialty services, like a diabetic clinic. Many talked about the opportunities for doctors to engage in rural communities, to increase their financial incentives. My constituents were concerned about the number of physicians in rural Alberta and felt that many spaces in medical schools should be given to rural Albertans. They felt that students will return to their home communities, and this will help increase the number of doctors in rural Alberta.

Some individuals felt that the improvement of the electronic health record helps rural physicians access information and helps curb misuse or abuse. There was considerable discussion about streamlining referrals and how this can be a better system. Some raised the fact that the increases in private MRIs can speed up waiting lists. They believed that this was a very positive direction.

Other comments raised related to regional psychiatric services and how the announcement of the mental health fund this year helps local support programs. They talked about future directions of our ambulance services and were very happy to hear that the government continued funding this year.

Many concluded that improvements on province-wide drug programs and consolidation of drug expenditures are a good idea. Many felt that local communities were working well together in determining which health services they would provide and serve in a partnership. Constituents further identified many cases where the private system could be good.

The Speaker: On that note, thank you very much.

The hon. Member for Cardston-Taber-Warner.

Tax Reforms

Mr. Hinman: Thank you, Mr. Speaker. With about a week to go before the budget day, there are some tax ideas I would like to address here today. One Alberta advantage could be lower tax rates. During our 100 years sitting in the legislative sessions, we have often debated where to spend money and how to best use public funds. Rarely has this Legislature thought about meaningful tax cuts. It sometimes seems like we forget that the public purse is made from the wallets of the workers.

My point today, Mr. Speaker, is that we should remember that people want us to spend responsibly, and most importantly we need to remember to return this money to help those who are struggling during Alberta's boom. Rather than talking about more programs, I think we can help the people of Alberta by offering tax cuts. Our people are overtaxed. It is time for us to make another step toward offering a global competitive advantage. The time has come to raise our personal exemption and eliminate health care premiums.

By raising the personal exemption to \$20,000, we return the money to the pockets of the people. This would give a typical family over \$1,000 and a single individual more than \$500 back in their pockets. For those on a lower income it would allow them to invest in themselves. Let us allow Albertans to decide how to spend their money. Let us acknowledge that bigger government is not better government. It would be a real prosperity bonus that people can bank on every year.

By raising the exemption and eliminating health care premiums, it would allow families to have over \$40,000 which they could protect from the vultures of government. We should be fiscal hawks who defend the taxpayers against a rising tide of taxes and fees, not

vultures who feed off the backs of Albertans. We could continue to lead Canada by example in helping people to help themselves.

The Speaker: Hon. members, before we go on to the next order of business, yesterday was the five-year anniversary of the election to this Assembly of a number of members, on March 12, 2001. Let's congratulate them.

head: 2:50 **Tabling Returns and Reports**

The Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much, Mr. Speaker. I have two sets of tablings. I rise today to table the appropriate number of copies of the many letters I have received from concerned parents, daycare owners and staff, and other concerned citizens voicing serious concerns with the cancellation of the national daycare program. The letters I am tabling today are from Arthur Schultz, Victoria Morisbak, Sidney Chan, Randy Allarie, Raquel Lara, and Katie Gamble.

My second set of tablings, Mr. Speaker, comes from Calgary-Varsity constituents expressing their concerns regarding the potential closures of Jerry Potts elementary school and the English program at Varsity Acres elementary. These closures are the direct result of the government's failure to adjust the space utilization formula to reflect its reduced class size initiative. The e-mails are from Janice Bauer, Mike Bateman, Joanne Morin, Rita David Shailah, Anne-Marie Polay, and B.D. Aggarwala.

Thank you, Mr. Speaker.

The Speaker: Hon. member and to others, remember that this is tablings; this is not Members' Statements.

The hon. Member for Edmonton-Gold Bar.

Mr. MacDonald: Thank you very much, Mr. Speaker. I would like to table a copy of a letter that I received on February 16, 2006. It is from the hon. Minister of Agriculture, Food and Rural Development. This letter is in regard to the CAIS program and the overpayments.

Thank you.

Mr. Flaherty: This is five letters, Mr. Speaker, from daycare owners and staff and concerned citizens, specifically Connie Kubinowsky*, R. Padmore*, Greg Gamba*, Tammy Stromberg, and Laura Chutny. I will table these.

Thank you very much, Mr. Speaker.

The Speaker: The hon. Member for Edmonton-Centre.

Ms Blakeman: Thank you, Mr. Speaker. More letters voicing concern with the cancellation of the national daycare program. They are from Heather Munholland, Cheryl Millar, Pam Lasuita, Tami Masterson, Leeann Turnbull, and Diane Clark.

The Speaker: The hon. Member for Calgary-Mountain View.

Dr. Swann: Thank you, Mr. Speaker. Two tablings today. The first is 52 names from the Calgary area petitioning the Alberta Legislature to urge the government of Alberta to "consider increasing funding in order that all Alberta Works income support benefit levels may be increased."

The second tabling is six more names from citizens requesting the protection of the national daycare program, including Tawa

*This spelling could not be verified at the time of publication.

Montessori Day Care, J. Waldo, Elzbieta Buszka, Jean Keenan, Kelly Hanrahan, and Pat Sharun.

The Speaker: The hon. Member for Edmonton-Mill Woods.

Mrs. Mather: Thank you, Mr. Speaker. I'm pleased to table six letters, with the appropriate copies, from citizens expressing concern about the cancellation of the national daycare program. They are Mrs. Emily and Dr. Christopher Herd, Susan Pointe, A. Graci, Keltie Ferguson, the Polish Bilingual Daycare, and Lorraine Smith.

The Speaker: The hon. Member for Lethbridge-East.

Ms Pastoor: Thank you, Mr. Speaker. I rise also to table six copies of letters that I have received from concerned parents, daycare owners and staff, and other concerned citizens voicing serious concerns with the cancellation of the national daycare program. The letters are from Vivian Smith, Tanis F. Eaker, Sherry Meyers, Ann Basualdo, Hollie Muskego, and M. Trottier.

Thank you.

The Speaker: The hon. Member for Edmonton-Glenora.

Dr. B. Miller: Thank you, Mr. Speaker. I have two tablings. One is a letter by Nella Callihoo on behalf of eight others in my constituency concerned about the future of health care in Alberta and concerned about the protection of the Canada Health Act.

Also, a letter from Ted Bishop, who is also concerned about the future of health care, especially towards a two-tier system. He lived in New Zealand and has experience to share.

The Speaker: The hon. Member for Edmonton-Rutherford.

Mr. R. Miller: Thank you very much, Mr. Speaker. I have two tablings this afternoon, the first being a letter from a constituent of Edmonton-Rutherford, Hugh Critchley, who is expressing concerns about the planned third-way changes. He says, "Please stop your 3rd way and improve on the way we now have."

I also have a further six letters regarding the cancellation of the national daycare program. They are from Jeanne Pesklewis, Ishrat Qureshi, Angela McIsaac, Al Ng, Sally Pham, and Mary Badu-Acheampong.

Thank you, Mr. Speaker.

The Speaker: You're okay, hon. Member for Calgary-Varsity?

Mr. Chase: Yes. Thank you. Those were all my tablings.

The Speaker: Okay.

The hon. Member for Edmonton-McClung.

Mr. Elsalhy: Thank you, Mr. Speaker. I have two tablings today. The first one is an e-mail from an Edmonton-McClung constituent, Ms Emily Brodeur, who states her concerns with and disapproval of the so-called third way. She believes those who are poor will receive inferior care and argues that our effort should be focused on improving the public health care system rather than privatizing it.

The second one is, again, six of the many letters that the Official Opposition received from citizens concerned about Mr. Harper's cancellation of the national daycare program. They are from Kelly Peloquin, Susan Suh, Pete Hurd, Megan McDougald and Erwin Hunke, Rob Reay, and Nahid Higgins.

Thank you.

The Speaker: The hon. Member for Edmonton-Strathcona.

Dr. Pannu: Thank you, Mr. Speaker. I've got two documents to table for myself, and, with your permission, if I may table two documents for my colleague from Edmonton-Calder. My first document is the March 2006 edition of Martha's Monthly. In it this magazine gives several pieces of advice regarding health reform, including that consultation requires actually consulting people and that rich people can get better meals in restaurants but shouldn't get better health care.

The second document, Mr. Speaker, is a piece from Sarah Boseley dated March 10, 2006. In the piece Boseley describes a growing trend where public hospitals in the U.K. are having to repair damage done during botched hip and knee replacements performed in private clinics.

Now the two documents on behalf of my colleague for Edmonton-Calder. The first one is a letter from Heather Mackay with the Edmonton Prochoice Coalition. She is very concerned about Bill 204 and warns that if this bill is passed and becomes law, there will be more deaths related to botched abortion and suicide and more suffocated newborns.

The second document is a letter from Canadian Youth for Choice, Mr. Speaker, which is associated with the Canadian Federation for Sexual Health. They are also very concerned about Bill 204. They envision a Canada where sexual reproductive rights are respected for everyone. They also note that young people under 15 years old who partake in high-risk sexual behaviours have a fundamental need for accurate, confidential, and nonprejudicial sexual health information.

Thank you, Mr. Speaker.

The Speaker: The hon. Member for Edmonton-Meadowlark.

Mr. Tougas: Thank you, Mr. Speaker. More letters of concern about the cancellation of the national daycare program: from Barb McCrea, Mellin Ong, Shanthi Thiagarajah, Madelene Collins, and Wendy Gaunt.

The Speaker: The hon. Member for Edmonton-Ellerslie.

Mr. Agnihotri: Thank you, Mr. Speaker. I have some more letters from concerned parents, daycare owners and staff, and other concerned citizens voicing their serious concerns with the cancellation of the national daycare program. The letters are from Tracy Franks, Amanda Miranda, Mary Asafo-Akowuah, Grace, Lisa Cottrell, and Vera Bluecloud.

Thank you.

The Speaker: Hon. members, I'll be tabling with the Assembly today a message from Her Majesty the Queen, head of the Commonwealth, entitled Health and Vitality: The Commonwealth Challenge, dated March 13, 2006.

head:

Orders of the Day

head:

Motions for Returns

The Speaker: The hon. Deputy Government House Leader.

Mr. Zwozdesky: Thank you, Mr. Speaker. Proper notice having been given on Thursday, March 9, I will now move that motions for returns appearing on today's Order Paper stand and retain their places.

[Motion carried]

head:

Written Questions

Provincial Protection Officers

Q2. Dr. B. Miller moved that the following question be accepted. What consultations, studies, research, or other information-gathering exercises pertaining to the use of provincial protection officers for traffic safety enforcement on primary highways under the direction of the Royal Canadian Mounted Police were conducted by the Ministry of the Solicitor General and Public Security prior to the implementation of the pilot project?

The Speaker: The hon. Member for Edmonton-Glenora.

Dr. B. Miller: Thank you, Mr. Speaker. This is a very timely request because the pilot project for highway 63 has already been announced. I believe that this is a change in respect to the traditional roles of policing. The RCMP have had the function of policing our highways, and now to turn a portion of that over to special constables represents a change. This question simply is inquiring about the preparation, the kinds of studies that were made that led to the proposal of this project.

3:00

My main concern all along has been the issue of safety of the public, because highway 63 is a very busy highway, and also the safety of special constables, who don't have the same training. Their training may be adequate; I don't know. That's, I suppose, what the pilot project is supposed to inquire into.

The question is really what kinds of consultations have been made with the RCMP. It has been their traditional role to police a highway like highway 63. Is this change, this pilot project, something that they really want? How have they been involved in the deliberations?

Also, it would be helpful just for the sake of the public to understand what is happening, what kind of research and what kinds of studies there have been in terms of what other provinces and other states south of the border are doing. Policing is evolving, and in terms of its evolution how is this particular change to have special constables doing highway traffic safety work warranted?

Thank you, Mr. Speaker.

The Speaker: The hon. Solicitor General and Minister of Public Security.

Mr. Cenaiko: Thank you, Mr. Speaker. I'd like to thank the hon. Member for Edmonton-Glenora for the comments made. Policing is evolving, and with that we're looking at new methods of service delivery. So on behalf of government I'd be more than happy and prepared to accept Written Question 2 and will respond in writing to the hon. member.

The Speaker: The hon. Member for Edmonton-Glenora to close the debate.

Dr. B. Miller: Yes. Thank you, Mr. Speaker. I would like to thank the Solicitor General and Minister of Public Security for his response. I look forward to the results.

[Written Question 2 carried]

The Speaker: Hon. minister, the response will become the property of the House, so the best way would be to table it in the House when the hon. minister has it.

The hon. Deputy Government House Leader.

Mr. Zwodzesky: Thank you, Mr. Speaker. What I'd like to do is simply now move that written questions appearing on the Order Paper beyond the one just discussed do stand and retain their places.

[Motion carried]

Public Bills and Orders Other than Government Bills and Orders Committee of the Whole

[Mr. Shariff in the chair]

The Deputy Chair: Hon. members, we'll call the committee to order.

Bill 201

Human Tissue Gift (Notification Procedure) Amendment Act, 2006

The Deputy Chair: Are there any comments, questions, or amendments to be offered with respect to this bill?

Mr. Liepert: Mr. Chairman,

be it resolved that when the committee rises and reports, it recommends to the Assembly that consideration of Bill 201, Human Tissue Gift (Notification Procedure) Amendment Act, 2006, be deferred until April 3, 2006, or until the first day for consideration of private members' business after that day.

This will allow for due consultation with stakeholders.

The Deputy Chair: Hon. members, before calling the question on the motion by the hon. Member for Calgary-West, the chair would like to provide a brief explanation to all members given that it has been a number of years since this type of motion has come before committee.

This motion if passed will postpone further Committee of the Whole consideration of Bill 201 until April 3, 2006, or until the first day for consideration of private members' business after that date. The chair wants to be clear that this motion is not a hoist, which can only occur at second or third reading and which has the effect of defeating a bill.

There are precedents for this type of motion. Some members may recall that a similar motion was moved by the Member for Calgary-Egmont in 1998 in connection with his private member's bill, Bill 204, Worker's Compensation Amendment Act, 1998, to allow time for further consultation in the preparation of an amendment for Committee of the Whole. This also occurred in 1996 in connection with the member at the time for Edmonton-Beverly-Belmont, who requested that Committee of the Whole consideration of his Bill 203, Family Dispute Resolution Act, be postponed.

This type of motion has emerged as a result of the 1993 changes to the Standing Orders with respect to private members' bills. Given that these bills must proceed on a strict timetable, there is no mechanism by which the bill can get off the treadmill to await the results of a consultative process. This process was clarified in Speaker Schumacher's ruling of February 11, 1997, where he confirmed that only the sponsor of the bill at issue could make this type of motion to accord with the principles of private members' business.

Finally, before putting the question, the chair confirms that this motion falls under Standing Order 18(2) and therefore is not debatable.

[Motion carried]

Mr. Zwozdesky: I would move that the committee rise and report progress at this time.

[Motion carried]

[Mr. Shariff in the chair]

The Acting Speaker: The hon. Member for Drayton Valley-Calmor.

Rev. Abbott: Thank you, Mr. Speaker. The Committee of the Whole has had under consideration a certain bill. The committee reports progress on Bill 201.

The Committee of the Whole has also agreed to the following motion.

Be it resolved that when the committee rises and reports, it recommends to the Assembly that consideration of Bill 201, Human Tissue Gift (Notification Procedure) Amendment Act, 2006, be deferred until April 3, 2006, or until the first day for consideration of private members' business after that date.

Mr. Speaker, I would also like to table a copy of this resolution for the records of the Assembly.

The Acting Speaker: Does the assembly concur in the report?

Hon. Members: Agreed.

The Acting Speaker: Opposed? So ordered.

head: 3:10 **Public Bills and Orders Other than
Government Bills and Orders
Second Reading**

**Bill 203
Railway (Alberta) (Heritage Railway)
Amendment Act, 2006**

[Adjourned debate March 6: Mr. Stelmach]

The Acting Speaker: The hon. Deputy Government House Leader.

Mr. Stevens: Thank you very much, Mr. Speaker. It's my pleasure this afternoon to rise and make a few remarks in support of Bill 203, Railway (Alberta) (Heritage Railway) Amendment Act, 2006, sponsored by the hon. Member for Wetaskiwin-Camrose.

Mr. Speaker, last year we had an opportunity to celebrate this province's centennial and at that time, of course, reflect on the history of our province and why it is that Alberta has become the great place that it is today. There's no doubt that the railroad and those associated with it played a significant impact on the development of our province, especially during the last 100 years. The railroad allowed settlers to come to this province across the land. It also joined our country from coast to coast, creating a truly united Canada. It allowed the shipping of products outside the province and importation of materials and people to support the thriving economy. As such, it's most important that we preserve this important part of our heritage so that future generations of Albertans and visitors to our province are able to appreciate the impact that the steam locomotive has had on our history.

We're fortunate in Alberta that we have a number of organizations that dedicate themselves in whole or in part to preserving this aspect of our proud history. One such organization is Calgary's Heritage Park, where annually over 400,000 visitors come to see the early days of Alberta brought alive. I know something of Heritage Park, Mr. Speaker, because formerly it was located in Calgary-Glenmore. As of the last election it became part of Calgary-Elbow.

Canada's largest living historical village showcases an impressive collection of over 150 exhibits, thousands of artifacts, and lively interpretive activities. The dedicated staff and volunteers of Heritage Park work very hard to give visitors a realistic look at what life was like in our province's early days. One of the central attractions of the park is its full-size, fully functional steam-powered railroad, which operates three steam locomotives on a one-mile loop of standard gauge track. The engines pull some very interesting pieces of history: a collection of rolling stock and 10 passenger cars, including two fully restored 1885 coach cars, a 1912 CN car, the Bowness summer car, and the famous car 76, which was an executive car that was used on the occasion of the last spike ceremony. Visitors to the park have the opportunity to experience the excitement of riding the rails just as Alberta's pioneers did. History truly comes alive, principally because of Heritage Park's attention to portraying historically accurate exhibits. That's why Bill 203 is a necessary piece of legislation, Mr. Speaker.

As I mentioned earlier, the railway employs three steam locomotives from the 1940s that stop at three historical stations located throughout the park. At one of these stops visitors have the ability to take the ride-the-rail tour. This exhibit allows the visitor to experience first-hand the development of the railroad in Canada. Mr. Speaker, given the importance of historical accuracy in exhibits such as this one, it's important that we ensure that those who have taken the initiative to preserve Alberta's railway heritage are supported.

The goal of Bill 203 is to make sure that our legislation and regulation are appropriate to the intended target. At present, regulations which were designed for main line railroad track are being applied to our heritage railways. Main line railroad track handles a very high volume of traffic and carries trains with all types of cargo. Main line rail track crosses over highways and other public roads, goes over high bridges, and carries trains with a high tonnage at higher velocity.

Heritage railways, as proposed in Bill 203, Mr. Speaker, handle a very different type of train. Heritage railways operate in a historical manner, are travelled less frequently and at lower rates of speed. Additionally, heritage railways travel only on a defined loop of track that sits entirely within the confined space of a historical park.

Mr. Speaker, after looking at public railways and heritage railways it's easy to see that although there are similarities, they are clearly different in application and should therefore be treated accordingly. A historical railroad need not and should not require modern crossing arms and light fixtures, nor should the locomotives be required to have functioning speedometers and modern brakes when functionality dictates that the historical technology works. Speeds are easily judged by elapsed time markings, and old brakes can still be perfectly good brakes. We aren't talking about bullet trains here, Mr. Speaker. We're talking about steam engines puffing away. Requiring needless upgrades imposes unnecessary costs that swallow precious resources, and the overkill seriously impairs the historical accuracy of the exhibit. It's only a matter of common sense that we should be testing against proper objectives and not lumping all examples into the same category. What Bill 203 ultimately will achieve is a recognition that history should not be replaced by modern elements for the sake of needless update.

Public safety is clearly always a primary concern, but this debate is not about public safety. It's about cutting needless red tape by correcting an area of overregulation as it relates to heritage train operations. The facts show that in 42 years Heritage Park has operated its railroad without incident, so applying the same set of standards to both main line public railways and heritage railways

does nothing for public safety and needlessly burdens historical societies.

Bill 203 affords us the opportunity to take the time to study and properly develop sensible rules and regulations that fit the unique realities of heritage railways. Mr. Speaker, it's important that we apply fair and appropriate rules that respect these exceptions while maintaining an appropriate standard to ensure public safety.

Mr. Speaker, I urge the members of the Assembly to support Bill 203 as it is truly a very good piece of legislation. Thank you very much.

The Acting Speaker: The hon. Member for Leduc-Beaumont-Devon.

Mr. Rogers: Thank you, Mr. Speaker. It's a pleasure to rise today and join the debate on Bill 203, the Railway (Alberta) (Heritage Railway) Amendment Act, 2006. As has been mentioned by some of my colleagues, this bill is about creating a framework which will allow for a separate designation of railway under the act. The end goal of this is to allow the railways which would be affected by Bill 203 to work with the Department of Infrastructure and Transportation to develop a set of regulations which are more appropriate for the day-to-day activities which the new heritage railways undertake.

Now, Mr. Speaker, I realize that this has been mentioned before, but I feel that it cannot be stressed enough. A more appropriate level of regulation does not mean a lower standard of safety. It means maintaining the highest standard of safety while ensuring that the inspection and maintenance requirements are fitting to the operation.

Mr. Speaker, by affording specific railways in our province the designation of heritage, we will be recognizing the role which they play in giving Albertans the experience of riding on a vintage piece of railway equipment. However, a concern has been raised with respect to the use of heritage as a designation. While I think that it is a fitting title for the affected railways, the concern raised is that this designation under the Railway (Alberta) Act could be misconstrued in that it is a formal designation as a provincial historic resource under the Historical Resources Act, which is completely, as we know, a separate process and refers to buildings typically.

Mr. Speaker, the Historical Resources Act, which is administered by the Minister of Community Development, empowers the minister to designate an historical resource as a provincial historic resource or a registered historic resource if the minister feels that such a designation would be in the best interests of Albertans. A site or structure which is a registered historic resource generally has three of the following characteristics. It is most significant to a region or community, it is a good example of an aspect of Alberta's natural or human prehistory or history, and/or it has significant paleontological or archaeological or architectural merit.

An Hon. Member: That's a mouthful.

Mr. Rogers: Yes, that is a mouthful, Mr. Speaker.

The appointment as a provincial historic resource is a more significant designation under the designation program. Provincial historic resources are subject to protection under the act. No person may destroy, disturb, alter, restore, repair, or remove any historic objects from such a resource without written approval from the minister.

3:20

In order to be considered for such a designation, structures or sites must be of an outstanding provincial significance, associated with an

important aspect of Alberta's natural or human history, or of outstanding paleontological or archaeological or architectural merit, Mr. Speaker. In both circumstances, to be eligible for designation under this program, the resource must be situated on its original location. If it has been moved or if it has been a re-creation of a historic building, it is not eligible to be designated as either a provincial or a registered historic resource under the act.

Mr. Speaker, one of the most interesting parts of this program, in my opinion, is the provision for the fact that an historical resource may be owned privately and would remain private property after the designation. As these sites remain private property, they can be sold or inherited as any other property would be. The only restriction placed upon such a designated site is that the order giving recognition to the site is registered against the certificate of title. This makes prospective buyers aware of the designation and informs them of the requirements under the Historical Resources Act. By making provisions for private ownership, pieces of Alberta history can be maintained and preserved without the provincial government needing to purchase the resource or the site of this building. This type of flexibility would in my opinion give more incentive to private owners to apply to have a property of theirs receive official recognition.

The aforementioned guidelines are just that, Mr. Speaker: guidelines to be used by a person or an organization to make an application to the Ministry of Community Development in order for a structure or site to be given official recognition.

Following this, there is a five-step application procedure, which involves the applicants giving background information on the site and stating the historical significance of the site. This application is then evaluated by the appropriate staff, and a recommendation is made regarding whether or not official recognition should be granted to the site or building in question.

Mr. Speaker, as you can see, there exist a number of requirements, specifications, and procedures which need to be followed before official recognition can be granted to a site. By amending the Railway (Alberta) Act to include a new type of train called heritage, none of these steps have to be undertaken. I do not believe that this is the intent, nor will it be the outcome of this legislation to have the affected railways considered as a provincial or registered historic resource. The power to grant this designation falls exclusively under the jurisdiction of the Minister of Community Development through the power granted to him under the Historical Resources Act.

The concern which was raised surrounding this issue was and is valid. When implementing legislation, we want to avoid ambiguity and eliminate the potential for misunderstanding. Bill 203 seeks to recognize the role played by the affected railways, but it does not presume to supersede or in any way affect the authority held by the Minister of Community Development to administer and regulate Alberta's historical resources.

Mr. Speaker, Bill 203 has two objectives. First, the title of heritage more accurately reflects the nature of the railways it impacts than the current designation of amusement. Secondly, by creating another designation which new regulations can be attached to, altering regulations governing these railways will simplify the inspection and regulatory process in the future. It will eliminate the need for each individual railway to apply for exemptions from each regulation which does not necessarily apply to their operation.

In the future, if another two or three railways are characterized as heritage, Mr. Speaker, under the act there will already be a set of tailored regulations in place for this operation to adhere to. This will reduce the possibility of any confusion surrounding the safety and operational regulations which need to be adhered to and will eliminate the need to apply for exemptions from regulations which

were not designed for the operations in question. This clarity will serve in good stead both the Department of Infrastructure and Transportation and the operations involved in the years to come.

This legislation is well thought out in its simplicity, ensuring that the department with expertise will be able to work with stakeholders in the development of regulations in the future. Mr. Speaker, I support Bill 203, and I would ask my colleagues on both sides of the Chamber to support this initiative. Thank you.

The Acting Speaker: The hon. Member for Calgary-Lougheed.

Mr. Rodney: Thank you very much, Mr. Speaker. I'm very pleased to rise today to voice my support for Bill 203, the Railway (Alberta) (Heritage Railway) Amendment Act, sponsored by the hon. Member for Wetaskiwin-Camrose. I have in mind a special constituent who has special interests, and I know that others in my constituency and our province have special considerations as well for our treasured railways of Alberta.

Historically, the railways that line the coarse prairie terrain are symbols of resourcefulness and resolve of our forebears, who were dedicated to the advancement of our society. For them and for us today the direction of the future points west. Alberta's pioneers carved the path into the unknown with the ever present dream of a bright, vibrant, prosperous Alberta, and it was this vision, Mr. Speaker, which established the rock-solid foundation that our great province stands proudly atop today.

Vision has consistently proven to be a vital ingredient in providing the distinction between triumph and failure. The vision of our province has always been a marvel, a panoramic view that stretches with immeasurable ambition from the Great Plains right to the Rocky Mountains. However, that vision is of little consequence without the will and perseverance of a people that possessed that vision: optimistic, dedicated men and women who selflessly stamped those steel lines through our province to make that vision of Alberta a reality. The ideals that Albertans hold dear today – strength, persistence, resilience, just to name a few – were forged many years ago by those same individuals. They devoted their lives and personal safety to plant the seed that would enable our province to become Canada's industrial and economic leader.

Mr. Speaker, there's always been debate regarding the necessity of implementing the legislation proposed in Bill 203. It's been suggested that the proposed amendment toward heritage designation seems redundant, clouding for some the intent of what is to be accomplished from the modifications to the bill. I for one believe that Bill 203 will not only broaden the distinction between the assortment of Alberta's railways, but it will also enhance the effectiveness of their regulation and maintenance. Furthermore, it will serve to ensure that the railways that have become such an essential ingredient to our identity as Albertans will be given due recognition to exist as valued memorials to our heritage.

Under current legislation there are three types of railways: industrial, public, and amusement. Now, focusing on the latter, a railway that operates for the singular purpose of providing recreational rides to individuals is generally considered an amusement railway, and as such these particular railways are subject to many of the same requirements and safety regulations of other railway classifications. However, the ways in which these various railways operate are fundamentally different, and it's due to these differences that the management and enforcement of a great deal of regulatory principles have proven to be logistically unsuitable in regard to the historically significant railways involved in Bill 203.

Currently railways identified for amusement purposes, which include railways operating on historic sites, generally receive far less

traffic over a given period of time when compared to other types of railway. Even so, they're still subject to the same frequency of inspections and maintenance checks as the main line operators. At this point I'd like to quote a fine constituent of mine, Mr. Don Totten, who is an expert in the field. He says: right now inspectors are using old legislation that does not apply to these machines; heritage equipment in this province is well maintained. And he knows that from a personal and professional standpoint. He says: new legislation is needed if we're going to continue to maintain equipment. An interesting note for members of the Assembly and people in the province: Alberta has the vast majority of steam locomotives in Canada, that is 70 per cent, something that's very important and definitely worth knowing.

Mr. Speaker, to better serve the public in our province, I believe that the resources of time, energy, and funds which are required to sustain such a practice would be more appropriately utilized at the discretion of the operator, and I know that Mr. Totten agrees. This could be accomplished through heritage designation regulations, while continuing to maintain sound and effective safety procedures. Bill 203 would do exactly that. It would ensure that these valuable machines would remain operational through a standardized regulatory process, enhancing the effectiveness of said process in relation to Alberta's railways. This act would help a great deal in enabling the streamlining of regulations for these specific types of railways and save a considerable amount of time and energy that could be devoted to other more suitable causes.

3:30

It's important to note, Mr. Speaker, that Bill 203 does not aim to sever the connection between stringent regulation and responsible safe practice. The well-being of passengers on these rail cars along with those who operate them is of paramount importance and most not be underestimated. Bill 203 will ensure that the security measures followed to protect all parties involved is in direct relation to each railway's usage rate. This act will allow operators to focus their attention on exactly what's required to keep each railway as safe as possible.

The educational value of these railways must also closely be considered. They can help our children take a glimpse into the 19th century of Canadian culture, offering insights about our history, demonstrating the raw majestic beauty of our province as well as the physical nature of working-class life on the prairies. This wisdom is projected even further, Mr. Speaker, by way of helping Albertans to truly understand our industrial background, the labour and toil painstakingly devoted over so many decades, elevating our province on the way to becoming the economic superpower that it is today. These steel giants are the figurative reflection of a people who in their day possessed an unwavering desire to improve their quality of life, allowing all who were to follow in their footsteps to proclaim the most beautiful and accomplished province in Canada as their home.

It's been argued, Mr. Speaker, that the aforementioned amendment and the issue of requirements could be placed in the hands of the railway administrator and could be dealt with through administration and policy rather than through legislative change. Although in some cases legislation is critical to ignite the process of change, doing so with purpose and conviction with the intent of administration can become caught in the web of formula and procedure. In addition, under the current situation the operators of heritage-themed railways who wish to become exempt from certain forms of regulation must proceed with an application process that requires the operator to clear a series of hurdles along the way, making the progression towards change slow and tedious. It's our duty as

members of this House to provide all Albertans with the most efficient, responsible governance possible. It's in situations where administration becomes delayed or stagnant where legislation must lead the way in providing adequate change in policies.

Mr. Speaker, the case of our provincial railways provides this House with an excellent opportunity to expedite this transformation in management of these invaluable icons of our heritage. It's clear that the four provincial railways in question operate in a very unique manner relative to the public and industrial modes of transport. In order to facilitate a process that will continue in an equitable and proficient fashion, we must be diligent in supporting the legislation brought forth in Bill 203.

I urge all hon. members as leaders and citizens to support this bill, and I urge them to join me in ensuring that these instruments that have stood the test of time will remain operationally sound in the face of overregulation. I urge they join me in pledging that the education of each and every individual who chooses to support these sites, paying homage to Alberta's ideals and traditions, will never cease. Let's respectfully enshrine our treasured railways through the legislation brought forward by this act.

Thank you, Mr. Speaker.

The Acting Speaker: Are you ready for the question?

Hon. Members: Question.

[Motion carried; Bill 203 read a second time]

Bill 204
Parental Consent to Medical
Treatment for Minors Act

The Acting Speaker: The hon. Member for Drayton Valley-Calmar.

Rev. Abbott: Thank you, Mr. Speaker. I am honoured to move second reading of Bill 204, the Parental Consent to Medical Treatment for Minors Act.

In a nutshell, Mr. Speaker, Bill 204 will help parents in the increasingly difficult job of protecting and nurturing their children. I'm a parent myself. I have three wonderful children, that mean the world to me. Everything I do as a parent is done with the aim of keeping them safe, happy, and free from the consequences of bad decisions. Parenting is without a doubt the best job in the world, but it's also the most difficult. I try as every parent does to give my kids a positive foundation of wisdom and values that will hopefully shield them from harm and help them make good decisions. I give them my guidance, my support, my prayers, and my input because these things are essential to their development and safety.

Mr. Speaker, as a loving parent I also set limits and boundaries on what is acceptable and what is not. When it is necessary, I enforce these rules. Why do I do these things for my children? Why do I protect them and nurture them? The answer is very simple: because children are often not capable of making important decisions on their own. As a parent, to guarantee the well-being of my children, I must often make decisions for them to protect their best interests. When I am allowed to, that is.

Generally, I feel that the law does a wonderful job in aiding parents. We have in place countless statutes that dictate a minimum age of responsibility for various activities. These allow society as a whole to place and enforce restrictions on the actions of children. For the most part these are reasonable and proper, and I am glad to have them. For example, Mr. Speaker, I don't have to worry about my children buying cigarettes. Of course, I've taught them about the

dangers of smoking, but I sleep easier knowing that this extra barrier exists. I can say the same thing about alcohol. The fact that they are not allowed to buy it not only reinforces what I've taught them about drinking; it also provides an extra level of security. Once again I'm glad to have it. Thirteen-year-olds aren't allowed to drive. Is it reasonable that we don't allow a child to pilot a two-tonne vehicle in traffic? I think so. I'm glad that that law sets an age of capacity in this case.

I could elaborate at length about the other things that our children are not allowed to do, like voting or entering into marriage without their parents' permission and, of course, several other things, but I won't. Instead, I'd like to address what they are allowed to do, Mr. Speaker, and why it should shock every parent and why I am addressing this issue with this bill.

There exists in this province and in this country, Mr. Speaker, a system that allows children to make important, life-altering decisions without any involvement from their parents whatsoever. I find it alarming that a child can seek medical treatment of any kind without his or her parents' knowledge. I find it downright frightening that the same child can obtain medical treatment in the same way. How is this possible?

Well, for anyone to obtain medical treatment, they must first give consent. This consent can only be given after all the aspects and consequences of the intended procedure are explained and understood fully by the patient. In short, the consent must be informed. The patient must also have the ability and capacity to understand the consequences of getting or not getting the treatment. Now, these are good principles, and I don't have any problem with them whatsoever when they are applied to adults. What I do have a serious issue with is the notion that a child can be seen to have the same capacity as an adult.

Essentially, Mr. Speaker, if a doctor determines that a minor of any age understands the intended procedure or treatment and its consequences, they can consent to it independently. Is this reasonable? Well, I find it strange that the same young person who has to take a taxi to the doctor because they're not old enough to drive there potentially has the ability to make major health care decisions on their own. Should they really be considered mature enough to do so, especially when they're already considered immature in so many other areas by our society?

A minor that is deemed able to consent to treatment does so under what the common law calls the mature minor doctrine. The maturity, meaning the ability to consent of each child, is assessed on an individual, case-by-case basis by a medical professional, not by a definite and legislated minimum age. This bill seeks to enhance this doctrine by establishing such a minimum age under which a minor cannot make independent medical decisions without the consent of a parent. The concept is not radical. It's not extreme. It's simply an attempt to give parents a measure of involvement in the lives of their children when important decisions are being made.

How will this happen? Well, Bill 204 proposes that any minor aged 15 and under obtain the written permission of at least one parent before they can obtain medical treatment. Now, this is not unreasonable. This bill is not presented with the intention of restricting the rights of anyone or dramatically changing the entire system of medical consent. It's a small change, a simple change, but it is a change that will have a positive effect on children and on parents and families alike.

3:40

Now, I realize that 16- and 17-year-olds, especially in today's society, are usually considered to be mature in most cases. They are

not included in the scope of the bill because I think the vast majority of people in this age group are mature enough to make health care decisions on their own if they so choose. I also realize that some children are independent due to a variety of reasons. Any child who isn't subject to guardianship under the Family Law Act is also exempt from the provisions of this bill. I'm aware of the unfortunate fact that some children have a bad or unworkable relationship with their parents. This is often not the fault of the children, and I don't think they should be penalized for it. This is why there's also a provision in the bill that allows a minor or a third party on behalf of the minor to appeal a parent's decision. This allows an independent review by the courts of a controversial parental decision and protects the children whose parents aren't acting in their best interests.

Finally, the bill does not apply to any situation that requires immediate medical attention or a medical emergency. The restrictions in the bill are presented with reason, Mr. Speaker, and requiring consent for a child whose life or safety was in immediate danger is the last thing that any reasonable individual would ever want. What the bill does do is provide a measure of clarity to a confusing situation while at the same time protecting a specific vulnerable group of children who desperately need guidance and help in making major life-altering decisions.

In essence, the bill would remove the burden of determining a child's capacity to consent from our medical professionals, and it reassigns this to the child's parents. This is an appropriate change, Mr. Speaker, and an appropriate responsibility for parents to have. Now, some may view this move as a challenge to the capability of our doctors and nurses. It isn't. These people are among the most capable, dedicated, and intelligent members of our society. We trust them with our health and with our lives and justifiably so. This bill simply seeks to recognize that the parents of a child are more intimately aware of their child's abilities and level of understanding.

Parents deal with every aspect of a child's life on a constant basis. They know their child at a level that nobody else can even begin to approach. As such, I believe that they are the best equipped to possess the power to determine a child's capacity. As the people who have raised, nurtured, and been responsible for their children from day one, it's only natural that parents be assigned the ability to make capacity judgments about their children as well. I think it's reasonable to assume that parents will make these decisions with the best interest of their children at heart. If a child wants to obtain a beneficial medical treatment, there will be no problem in obtaining consent from their parents. If they're seeking a treatment that has serious and negative consequences, this bill will give parents the opportunity to voice their concerns and to intervene if necessary. I think it is vital that we extend this right to parents, Mr. Speaker.

If any of the members here today are unsure about the merits of this bill, I guess that I simply ask them to place themselves in the shoes of a parent whose child makes a vital, life-altering medical decision of any kind without their knowledge or permission, a parent that must live with the aftermath of that decision and the knowledge that they were powerless to stop it.

Our children are our future, and as legislators I believe we have a duty to protect them. Those who need this legislation need it desperately. I urge all of the members of this Assembly to join me in offering this bill your support. Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Edmonton-Glenora.

Dr. B. Miller: Thank you, Mr. Speaker. I rise to speak to this Bill 204, Parental Consent to Medical Treatment for Minors Act. While there are many issues concerning this bill which we need to raise questions about, right at the outset I think there's a lot of ambiguity around the term "medical treatment." This is a very ambiguous

term, medical treatment. It's left undefined. When we consult something like the Alberta Health Care Insurance Act, there are many definitions concerning the whole area of health care, and specifically the term "medical services" is used in respect to the services offered by a physician. But what this bill is referring to seems to be not just medical services but a very, very broad, undefined term, medical treatment.

There's a curious reference to, quote, other health care providers. It's physicians, nurses, and other health care providers. Presumably the other health care providers can provide medical treatment, but all this remains undefined. Now, I suppose that is left to the regulations to make those kinds of definitions, but I think the Legislature should not approve a bill blindly without knowing what the scope will be of something that is called "medical treatment."

The most important issue here in respect to medical treatment is that this bill demonstrates, clearly, a disrespect to physicians and undermines the authority of physicians. This bill makes a doctor or a nurse guilty of an offence and subject to a fine of up to \$10,000 if they provide medical treatment without getting the consent of a parent. It doesn't matter what the service is, whether it is good or bad, needed or not needed, if the consent is not given, the physician is in the wrong.

Well, Mr. Speaker, I find this to be an insult to our physicians and our nurses in this province. Does the mover of this bill have any evidence to show that physicians and nurses are giving inappropriate medical treatment to minors? I think we need to have that kind of evidence. Otherwise, why would we make this decision to undermine the relationship of minor children and their physicians? Why would we as legislators make doctors and nurses into lawbreakers when they are just exercising their calling to heal a young person? We should not legislate unless we have studies to demonstrate that such a bill would be in the interest of the good of our society; otherwise, such a bill is quite irresponsible.

The second major problem with this bill is the issue of consent. I appreciate the hon. member mentioning the importance of parental involvement. I, too, am a parent, and my two sons are now adults, but to go with them through all the difficult decisions that they make in their lives is, indeed, a challenge. In an ideal world, of course, parents ought to be involved in the welfare of their children. I have no problems with that. But is legislation insisting on parental consent warranted? In insisting that a parent give consent, it restricts the ability of a minor to give consent, and here's where we come up against the tradition of common law.

A minor in this bill is defined as "a person who is 15 years old or younger." That in itself seems to be quite arbitrary. Why 15? I think Quebec fixes the age at 14. Why 15 and not 14, or why not 16 or 17? There is already precedent on this issue, however. For example, the Alberta Court of Appeal in the case *C.U. versus McGonigle* in 2003 stated that

the parental right to determine whether or not a minor child will receive medical treatment terminates when the child achieves a sufficient understanding and intelligence to provide an informed consent.

So that is the law as it is now. A mature minor can give consent to health care. In fact, there's a booklet produced by the Canadian Medical Protective Association which also concurs in this point, saying that

as a result of consideration and recommendations by law reform groups as well as the evolution of tort law on consent, the legal concept of the "mature minor" has become widely accepted and firmly entrenched.

So I think that we have real problems with this bill. It wants to change the common law and move it in a completely different

direction. Of course, one recognizes that when we're talking about mature minors, as the age of the child lowers and the difficulties of choice increase, it becomes more difficult to show the necessary understanding and intelligence. But surely the right decisions can be made within the relationship of the mature minor and his or her doctor, and we don't need any legislation to kind of impose itself on that relationship.

Now, this bill doesn't actually mention the minor child's capacity to give consent except in the preamble, but the effect of the bill is to deprive the minor child of his or her right to give consent. Is this not to deprive a 15-year-old of a Charter right? I would make the claim, Mr. Speaker, that section 7 of the Charter of Rights and Freedoms guarantees to every Canadian, irrespective of age, the right to life, liberty, and the protection of the person.

Can we conceive of situations where this right might be compromised? I think we can. For example, what might happen if a young person is brought into a hospital emergency department? The doctor would have to decide if the situation is a medical emergency or not. If it is a medical emergency, then of course he proceeds, but if it is not, then he would have to find the parent or be subject to a fine. I find this really quite awkward.

3:50

The line between medical treatment and medical emergency is not defined in this bill. What if a young person is brought to a school nurse or a summer camp counsellor, and they say, "Well, we cannot bandage your cuts and bruises until we contact one of your parents." In fact, there's nothing in this bill to indicate that maybe parents can give someone else the authorization to give consent on their behalf.

Of course, there are many, many more complex situations, and the hon. member didn't mention the most complex situation, and that is the abortion issue. I'm surprised the hon. member didn't bring that up because that seems to be the main issue behind this bill. Well, of course, abortion is extremely complex. I think that in terms of this bill there are complications on both sides. Whether parents consent to an abortion or whether they're against an abortion, there's still a problem, and it's still an intrusion into the relationship between the young person and the doctor who gives advice.

Anyway, if it is the intent of the mover of this bill to limit the number of abortions, if that is what is behind this bill, then depriving a child of his or her rights is simply, from my point of view, bad social policy. I think we must make a distinction between the morality of the act of abortion on the one hand and the construction of social policy on the other hand.

It is not necessary, I think, to argue about the right or the wrong of abortion. That would get us into a huge debate, and probably none of us want to go to in that direction. But even if one accepts that abortion is the destruction of life and is a great and terrible tragedy, as I would, the question that is all important is: what kind of social policy is needed to limit the number of abortions in our society?

For me, it is a societal good that we both enhance women's well-being and minimize the necessity of abortions. I have no interest in promoting an abortion culture. What is important for me is a good social policy, and I don't think this bill is a good social policy. It will actually endanger the lives of many young women who are desperate to have an abortion. It will limit young women from obtaining safe abortions and will have dire consequences for women who do not have parental consent but who are desperate and will seek abortions whether legal or not, with all of the risks of injury and death and also suicide and the suffocation of newborns. I'm talking about minors: 15-year-olds, 14-year-olds.

A good social policy in reducing the number of abortions would place greater emphasis on medical research in the area of contracep-

tives, would emphasize, of course, education, the need for a good, solid sex education, teaching both boys and girls that they share in the moral responsibility for preventing pregnancy. One could go on and on and outline what would be the ingredients of a powerful social policy.

Mr. Speaker, in conclusion, this bill has way too many problems. It's too vague and ill defined. It's simply bad social policy, and I recommend its withdrawal or its defeat. Thank you.

The Acting Speaker: The hon. Member for Red Deer-North.

Mrs. Jablonski: Thank you, Mr. Speaker. The purpose of Bill 204 is to protect the well-being of children and the rights of parents by requiring parental involvement in a young minor's decision to obtain nonemergency medical treatment. Any child aged 15 or under wishing to receive nonemergency treatment would require the written consent of at least one parent or guardian before treatment could take place.

Mr. Speaker, I strongly feel that parents need to be involved in the lives of their children and that they have the right to nurture and protect their children from anything that may cause physical, emotional, or psychological trauma. If, for whatever reason, a child 15 years old or younger must undergo any medical procedure, I believe that it is important for parents or guardians to be there to support children through difficult moments.

You see, Mr. Speaker, I believe that there are more good parents than bad. I believe that children 15 years and younger still need the love, understanding, and support of their parents to thrive and succeed. I believe that all medical procedures for children are traumatic and require the love and support of their parents. I believe that good parents will guide and direct their child in the best interests of the child.

I remember holding my daughter's hand just before and after she had eye surgery and reassuring her that everything would be fine and that the pain was just temporary, and she was 23 years old. I remember holding my son and helping him to cope with a rollerblade accident that damaged his spleen. He was 15 years old. I remember looking for my 12-year-old child in the outpatients' ward at the hospital when he kind of disappeared just before he had to have day surgery, because he was afraid of the unknown.

I remember helping all my children to take their antibiotics on time and to be sure to finish all the pills and to take their daily vitamins. I cannot imagine that any child would be encouraged to go through any medical procedure without the support of a parent. I cannot imagine that after dedicating our lives to protecting and nurturing our children, after teaching them to use bike helmets and kneepads, after taking them out of a room filled with second-hand smoke, after taking them to hockey and swimming and baseball and dance and music lessons, and after showing them that we would always be there for them, they would be encouraged to go through any medical procedure without our support.

Mr. Speaker, it is essential to the physical, mental, and emotional health of any child to have the support of their parents to help them to cope with the aftermath of any crisis, medical or otherwise, and especially for any serious procedure that can have lifelong implications. Bill 204 addresses children 15 years old and younger. The majority of children this age are still under the care of their parents and are the responsibility of their parents or guardians. There are age limits on drinking, smoking, driving, voting, joining the armed forces, and getting married. Doctors and nurses recognize the importance of parental consent because they require written consent now in most procedures before they begin. I even required written consent for senior Girl Guides in order for them to be able to have a Tylenol during camping trips.

The laws that enforce these age limits are not considered to be a denial of a child's rights. The 20th century began with children having virtually no rights and ended with children having a very powerful legal instrument that not only recognizes but protects the rights of the child. This powerful legal instrument is the United Nations convention on the rights of the child. The United Nations convention on the rights of the child is ratified by 191 nations from around the world, including Canada.

Article 5 states that the child has the right to be protected by parents. Article 7 states that it is the right of the child to "be cared for by his or her parents." Article 14 states that a child has the right to have parents or legal guardians "provide direction to the child." The United Nations convention on the rights of the child also states that every child has the right to develop to the fullest; the right to protection from harmful influences, abuse, and exploitation; and the right to participate fully in family, cultural, and social life.

Mr. Speaker, I know that there are children who do not have the benefit of parents capable of making a good decision for them for whatever reasons and are in the care of the government. In these cases I believe and expect that the guardians of a child 15 years and younger will make decisions in the best interest of the child and be there to support them and encourage them in whatever is needed.

I know that there will be much debate about the rights of the child who may not receive good parenting and that a child who is loved will have the support of their parents anyway. It is wrong, however, to think that parents and guardians have no business in the health and welfare of their children, especially those just 15 years old and younger. I know this for sure: good parenting is a lifelong commitment, and there are more good parents than bad or mankind would not have survived this long.

Mr. Speaker, I want to point out one more time that this bill does not speak to youth older than 15 but only to children 15 years old and younger. A child 15 years old and under still needs the love and support of his or her parents and guardian, and to require them to make mature decisions that will affect them physically, emotionally, or psychologically for the rest of their lives is unconscionable.

Mr. Speaker, I will support this bill, and I ask others to support this bill simply because it is in the best interests of all young children.

The Acting Speaker: The hon. Member for Edmonton-Calder.

Mr. Eggen: Well, thank you, Mr. Speaker. I rise with some interest to speak on Bill 204 this afternoon. It's an interesting bill because of its scope and what it tries, I guess, to cover. My difficulty lies in a number of different areas, not the least of which includes just, somehow, in a basic way excluding or prohibiting certain individuals in our society from receiving medical treatment without a certain caveat placed on that treatment. This is a fundamental difficulty that I have in regard to freedom that would preclude most of these other arguments that I will bring forward here this afternoon.

4:00

I can tell you that we've had quite a number of constituents from all across Alberta phoning us and sending messages in regard to this bill, both from individuals and community health organizations. Everyone that I have received information from is testifying to the fact that somehow legislating medical treatment – right? – which goes undefined in this proposed bill and, therefore, could be everything from anything to do with sexuality to abortions and sexually transmitted infection treatment, counselling, et cetera – restricting all of these things and more, really anything as far as it

seems to be described in the bill, would definitely do more harm than good.

If teen sexual behaviour, specifically abortion, is the target of this bill, there are other much better and less dangerous ways to go about addressing this issue instead of presenting a blanket coverage and really and essentially an exclusion of certain people that might be seeking medical treatment. We do know that we have a very sad and long history of medical treatment laws in regard to, let's say, abortion. Right?

History has shown us how desperate a female can become when she is set on terminating a pregnancy; there are more deaths related to botched abortion and suicide as well as suffocated newborns: that's a quote that I received from the Edmonton Pro-Choice Coalition. The American Medical Association confirms this, in fact stating in a 1992 report that parental consent laws result in an increase in pregnant teen runaways, back alley abortions, and self-induced abortions as well. A host of other reputable medical associations have reached the same conclusions, including the American Association of Pediatric Surgeons and the American College of Obstetricians and Gynecologists.

If infanticide, suicide, late-term abortions, botched homemade abortions are a result of such legislation, I must say that I would rather see children receiving some professional medical care when terminating a pregnancy than reading about things in perhaps an uninformed way or receiving treatment that otherwise can put risk to their lives.

Currently abortion is available to young women after a thorough assessment by a professional social worker; it is the social worker's professional duty to ensure that the young woman has not been coerced into having an abortion and that she is competent enough to consent to the procedure; she is given a chance to explore her feelings and receive information about fetal development and the details of the procedure itself: that's again from the Edmonton Pro-Choice Coalition.

Under the proposed legislation it appears that the social worker who counsels the young woman and makes an appointment for her would be otherwise guilty of an offence and fined \$10,000 just for making available health information that each individual in our society has a right to have.

For making the argument that abortions are used as birth control, statistics show differently, showing a steady decline in abortion rates over the last 30 years. Even if this was not the case, such an argument assumes that all teenage pregnancies are in fact terminated on a whim by irresponsible young women who failed to take proper precautions. Social workers can testify to the number of teens who then find themselves unexpectedly pregnant after engaging in what they thought was safe sex. This also does a disservice to young women who, upon careful consideration, may terminate pregnancies after concluding that they're not responsible to raise children at that point in time.

Incidentally, less than 1 per cent of all abortions are in fact had by young women under the age of 15. Such numbers beg the question why legislation is needed to make the lives of maybe, assuming we have 3.2 million people in this province, 30 individuals more difficult, especially when we consider that teens are 24 times more likely to die from childbirth than from an abortion performed in the first trimester.

If abortion is the issue, then let's take other steps to provide our youth, whether at risk or not, with information about risk reduction where sexuality is concerned. At stake here is not simply informed access to abortions but treatment for sexually transmitted infections, birth control, other abuse, and prostitution related health problems. The solution is information, education, care, and options, not restrictions and regulations.

Let's not forget that there is an unfortunate culture of abuse in our society that also contributes to sexual problems amongst children. There is a consensus in North America that single teens who find themselves in an unwanted pregnancy should seek support of empathetic, caring, and knowledgeable adults. Ideally, this should be their parents. Absolutely. Parental involvement laws make such notification and/or consent of one or both parents mandatory. Unfortunately, not all teens live in such a supportive home environment. Some are in dysfunctional families where the news of their pregnancy could precipitate emotional abuse, physical abuse, or ejection from the home. This is information that we received from the women's issues group from the United States.

According to the recent figures from Planned Parenthood, close to 85 per cent of teens coming in for services of any sort come accompanied by a parent. It is the reason of the remaining 15 per cent for not bringing a parent that we should focus our attention on rather than forcing them to. The Alan Guttmacher Institute found that the vast majority of young women in fact involved their parents in an abortion decision. A group that successfully overturned a consent law stated that

the statute operates only on young women who do not consult their parents with the news of pregnancy because the family is unsupportive, in crisis, dysfunctional, or abusive . . . For these young women, the statute tests the already difficult relationship between parent and child, undermining the very goals it purports to promote.

We certainly do not contest that parents have a legitimate interest in and responsibility for the well-being of the children, be that mental, spiritual, and physical; however, the sad facts are that while in most cases parents are caring individuals who take their responsibilities very seriously, many are not as well. One in four females, one in six males have been the victim of sexual exploitation as a child, and now statistics show that 85 per cent of abuse victims are of a family member or a close family friend. Additionally, 20 per cent of the substantiated sexual child abuse is consummated sex, unfortunately. As uncomfortable as we are facing this horrifying fact, pregnancies and STDs do result from incestuous and abusive relationships.

Therefore, the issue remains that in too many cases parents are involved in child abuse. In such a case to whom is the child meant to turn? We cannot force children in these situations to legally confront their abusers, but we can provide them with medical services that do not require the consent from those same abusers. On average children tell 10 adults of an abuse before someone believes them. Let's help them to get that 10th person by allowing access to a medical professional who may be a nonjudgmental authority figure that they will feel comfortable telling and getting assistance from as well.

It's interesting that we have discussions of children's rights and, specifically, the United Nations convention on the rights of the child, which I don't know if this Legislature recognizes or not. I think maybe they don't for some reason. Anyway, there are some articles that are very important from that document that I think need to be brought up in regards to this particular bill, and I will do . . . [Mr. Eggen's speaking time expired]

The Acting Speaker: The hon. Member for Olds-Didsbury-Three Hills, followed by the hon. Member for Edmonton-Mill Woods.

Mr. Marz: Thank you, Mr. Speaker. I am pleased to rise today to speak to Bill 204, Parental Consent to Medical Treatment for Minors Act. I believe the Member for Drayton Valley-Calmar has brought forth a piece of legislation which, if passed, would positively affect

Albertans in many ways. This bill will ensure that any minor aged 15 and under wishing to procure nonemergency medical treatment is required to obtain written consent of at least one parent before the treatment could take place.

4:10

It's clear that the reason for the bill and the thought behind Bill 204 is the protection of children. Protecting our children is a concept that is not foreign to any of us. It's a natural and constant force that drives us to safeguard the vulnerable future generations of our society. This concept of ensuring the safety of our youth is also not foreign to the legislation that is in place today in Alberta and throughout the country.

For example, I believe this bill can be compared to the Protection of Children Involved in Prostitution Act, which was enacted in February 1999. This Alberta legislation, which is commonly known by its acronym PCHIP, was the first of its kind in Canada. The purpose of this legislation is to protect children involved in prostitution by enabling social services and/or police to apprehend and secure them in a safe environment.

Part of that PCHIP act is the establishment of programs which are designed to assist children in ending their association with prostitution. These community support programs are an important provision of this legislation, but in order for the child to become involved in them, a voluntary services agreement must be reached. Under the definitions of the act a child is a person under the age of 18 years, and if the child is 16 or 17 years old, they can access support services without parental or guardian permission. If, on the other hand, the child is under the age of 16 years, a voluntary service agreement can only be entered into with the child if a guardian also consents. Through this measure parents and caregivers are also encouraged to be involved in the programs.

Upon reflection, many pertinent examples where age is a stipulation for participation exist. Perhaps you yourself are thinking of some of the other things right now, and the reason you are able to do so is because such legislation is quite commonplace. Principles such as these have been passed to protect our children from activities which have the potential to pose them harm, many of which they are often unable to see or manage themselves.

I've yet to hear any weighted arguments in favour of abolishing such laws, and I do not foresee any arising in the future. These ideas are not controversial, they are not criticized, they are not protested, and they are instead widely accepted and even praised. That's because such legislation is in the best interest of our children and, essentially, all of society. These concepts are helpful to us, they are a necessity in society, and they are important to all of us. Bill 204 is simply an addition to the list promoting these same values and concerns that we hold so dear.

It's logical to have medical procedures in the same class as community support programs administered under PCHIP because they, too, pose a threat to the well-being of children. Personal medical procedures, including cosmetic alterations, which are often viewed by minors as they watch some of the television shows, are very popular to get involved in themselves to make themselves more popular amongst their peers. They're often very difficult and sometimes impossible to reverse if they have them done without parental opportunity to consult with them and let them know about the long-term and even the short-term implications of those types of procedures.

The complications in both the long and the short term involved with some of these undertakings are often quite serious. There can also be damage done that goes far beyond the surface. The emotional scarring that can result from these physical procedures is

extreme as well. Traumatization of this nature can lead to a lifetime of negative thoughts, feelings, and acts. Our children may not fully consider all the long-term ramifications of the physical, emotional, or even spiritual impacts that these nonemergency medical procedures may have on them.

For those in the adolescent years such consequences are sometimes ignored, dismissed, or minimized. Often the appropriate weight is not given because such things seem to be part of the distant future when the reason for the treatment may be impacting them right now. Having all gone through the trials and tribulations of adolescence, I think we can all relate to the feelings of our children as they experience the same things at this age. However, we also know with the wisdom of age that this stage is not permanent. Braces will come off, skin blemishes will clear up, the right girl or guy will find you, and none of these dilemmas require surgery to solve. As some of you may have experienced, logic of this nature is not understood by some of our children. Comments from us in this regard are often countered by replies such as, "You don't understand," or my personal favourite: "How would you know what it's like? You're too old to remember."

When our children have the option of deciding matters such as the need for nonemergency medical treatment without our knowledge, there is a chance, no matter how hard we try as parents, that the concerns of today will dominate their decision, and the realities of their entire lifetime will be trumped by their perceived immediate needs. It is essential that there is a guaranteed and appropriate check in this scheme of short-term thinking. We can take a step towards creating one here today for the parents of Alberta by supporting Bill 204. It's important to note that through the passing of this legislation and the creation of such a check, we will not be unduly limiting the rights of anyone involved. If this was the purpose of 204, I personally wouldn't support it myself as I believe strongly in human dignity and liberties. I would certainly not be supporting it if that was the case.

Human rights are, of course, one of the fundamental institutions upon which this country was built. They are important in more ways than I can express at this point in time. However, it is also important for us to recognize that Bill 204 is not unduly infringing upon these rights. This bill is not trying to prevent treatment, just add awareness, something every parent cherishes and every family needs. By having parents more fully involved in the lives of children, we will help create stronger family ties.

Bill 204 promotes active parenting by increasing the degree to which parents are involved in the personal medical decision their child is making. Once this dialogue is opened in these instances, it creates an atmosphere of trust that is conducive to discussion and consultation in other areas. If through the passage of the legislation we can open up the lines of communication between parents and their children, should we not all feel obliged to do so? Such action could produce a multitude of positive effects in the families of our province and, consequently, the whole of society.

The health of the family goes well beyond the home. It creates a cascading effect in the lives of our children, wielding positive forces in terms of self-esteem, education, and friendships. A positive family environment today goes well beyond tomorrow. Momentum of this kind is carried not for months or days but for generations as the cycle of well-being is passed on.

For the safety of our children, for the strength of our families, and for the well-being of our society I would ask all members to support this bill. Thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Edmonton-Mill Woods, followed by the hon. Member for Calgary-Lougheed.

Mrs. Mather: Thank you, Mr. Speaker. Bill 204, Parental Consent to Medical Treatment for Minors Act, gives us the opportunity to consider what we mean by independence, self-direction, informed choice, life competencies, and other aspects that are foundational to a free and democratic society. We need to look at the quantitative limits such as age, IQ, and performance standards we use to determine these competencies, measures that are themselves limited yet that we cannot escape in a changing and imperfect society.

In traditional Jewish and Islamic thought a child became an adult legally at the age of 12 years, but this was not an overnight leap from infancy to adulthood. Those societies provided many supports: apprenticeship, religious tutoring, mentoring, and monitoring of growth to maturity. In western societies we set a later age, 21, when one could vote, leave home, get married, and enter other contracts without parental consent. Under Protestant influence in the North American west the right of passage was not a bar mitzvah but often became the first legal trip to a bar.

[The Deputy Speaker in the chair]

There were some anomalies to this age of adulthood. One could be drafted into military service at a younger age, years before he could vote on national issues such as conscription, and he could be sentenced as an adult in criminal court for crimes such as murder when we still had capital punishment. Then there was the age of sexual consent. It was realized that there was a discrepancy between biology and the law and that it was unrealistic even in the most puritan times to prohibit sexual activity before age 21. So the law acknowledged that one could engage in sexual activity but could not commit to another in marriage without parental consent until the legal age of adulthood. Recognition of these anomalies led to a gradual lowering of age: first to 19 for voting in Alberta, which was accompanied by the government setting up of a ministry of youth, then to age 18 and, in some cases and jurisdictions, to 16.

4:20

There was another factor contributing to this down-pull of the time that one came of legal age. This was the 1950s and the discovery of adolescence as a market. The word "teenager" became big then, and fashions, movies, and music were crafted to capture youth as a separate culture. With money to spend, whether parental allowance or their own earnings, and marketers ready to part them from that money, another parting took place: the opportunities for interaction with elders and adult mentors. This happened not mainly because youth wished to cut these ties but because marketers wished to be free of other influences that might interfere with their sales pitch to the new target audience.

In the 1960s the gulf between the generations became deeper, and scientific and medical developments provided youth with contraception, abortion, and other options that had not been available to their parents. In the last decade there's been a retreat to the mentality of: everyone for himself or herself. Generations are talking, sometimes indirectly, and trying to understand each other. Perhaps this comes out of the ecological crisis as we realize that we must hang together and support each other on Earth. It is not surprising that this trend first became apparent among our First Nations, who have a greater sense of connection to the earth. In that culture the word "elder" carried respect and did not have the negative connotation of old fogey or outdated, that it had acquired in the mainstream.

About this time the words "mentor" and "mentoring" came to prominence in our own culture. It is from this perspective of mentoring that I speak against Bill 204. I would prefer to see the

opportunity for youth to consult with others of experience and complementary perspectives so that they can make wise and informed choices that they can live with even though that process for decision-making may not include a parent. Sometimes, as in this bill, the advisory person will be the parent or legal guardian. Other times it may have to be a teacher, counsellor, coach, aunt, uncle, wise grandparent, or family friend. Ultimately, I'd like to see the range of mentors expanded to allow for alternate or surrogate advisers when parents are unavailable, unable, or unwilling to provide this kind of presence and support. I understand that this situation is more common than many of us realize. I've certainly experienced it in my work as a high school administrator.

We all need such advisers we can turn to whatever our age. We are not providing this for seniors in the form of surrogate or substitute decision-makers to help them in dealing with changes in their lives. It is not simply in dealing with those who have an apparent limitation of age or youth or medical or mental need that require such back-up. To see others only in this light puts us in a position of unspeakable arrogance. We all need each other. For every position of strength or skill there is a corresponding downside. For every vision or viewpoint there is a blind spot.

I do not support Bill 204 because, first, we need a clear definition of medical treatment. Are we including headaches with broken bones, allergic reactions, abortions? What is the scope?

Some children do not have a healthy relationship with parents. Some parents have abdicated that responsibility either because they are unwilling or unable to fulfill the role. These children need advice and assistance from someone else, someone they can trust. Perhaps it is a doctor. Legislation must recognize all children, even those without the protection of parents or other guardians.

I have concern about the erosion of the trust relationship that can exist between patient and physician. Children may not go to a doctor when they need to if parents have to be involved. That is, they may not get the help they need. I'm concerned also that this bill will make doctors and nurses lawbreakers for assisting a child.

The bill, which appears reasonable at first, will have dire effect on the health of young women seeking abortion. This will affect young women from every single community in Alberta. No matter what we think about abortions, they do happen. About 30 to 50 women aged 15 years and younger each year seek abortions in Edmonton. These are women from all over northern Alberta. Indeed, many women come with a parent to have an abortion, but for those who do not have parental support, there will be horrible consequences if they feel that they cannot go to a doctor.

Currently abortion is available to young women after a thorough assessment by a professional social worker. It is a social worker's professional duty to ensure that the young woman has not been coerced into having an abortion and that she's competent enough to consent to the procedure. She's given a chance to explore her feelings and receive information about fetal development, the details of the procedure itself, and the aftercare. This legislation can erode the rights of Alberta women to safe and fully funded abortion. It's a wolf in sheep's clothing and will have terrible consequences for some young Alberta women. History has shown us how desperate a woman can become when she's set on terminating a pregnancy. There will be more deaths related to botched abortions and suicide as well as suffocated newborns. This is a reality. It's unfortunate.

Although as a parent I support this bill because I am a responsible parent and I believe that its intent is to protect children and promote good parenting, the bill suggests something that is complex and needs further consideration and amendment in order to be good social policy. It is not comprehensive, and I cannot support it.

Thank you.

The Deputy Speaker: The hon. Member for Calgary-Lougheed.

Mr. Rodney: Thank you, Mr. Speaker. Thank you for the opportunity to be part of this interesting discussion on Bill 204, the Parental Consent to Medical Treatment for Minors Act. This is an important bill. It will allow parents to have more involvement in their children's lives and in their decisions to obtain nonemergency medical treatment. As such, parents will be in a better position to assure the overall safety and well-being of their children.

Mr. Speaker, I would not prefer to live in a world in which a child can enter a plastic surgeon's office and request breast augmentation surgery or liposuction or rhinoplasty or any number of other cosmetic surgeries without their parents' knowledge. I believe that children are not mature enough to make life-altering and body-altering decisions solely on their own. In order to better protect their children, parents need to have the right to be consulted when their child has decided to obtain nonemergency medical treatment. Bill 204 will help to achieve this goal. By involving parents in their children's medical treatment, we're giving back to parents the right to monitor and safeguard the well-being of their children.

[Mr. Shariff in the chair]

Today, Mr. Speaker, there's a very serious societal set of pressures that encourage people to look a certain way. Young singers and actors regularly alter their physical appearance through surgery, and our children, obviously, are commonly influenced by these stars. This can sometimes be seen simply in the clothing that they wear. Is it unreasonable, then, to think that these children may also be influenced by the actions of these celebrities to take more serious measures? Well, I don't think so. Our children may be tempted to take these measures to alter their physical appearance just as their favourite star has. How can parents be asked to simply stand back and watch their children as they become chameleons based on what they see in the media and in the popular culture, which changes flavours every day of the week?

In the majority of cases children under the age of 16 are still growing physically and mentally, and as such they may not always possess the necessary maturity to consider the very real future consequences of their actions or appreciate that their bodies may change considerably between the present and when they themselves fully become adults. Now, having witnessed fads come and go over the years, parents are in a better position to consider the long-range benefits and drawbacks of certain treatments as well as what's in their child's best interests. Therefore, they should be the primary individuals consulted when their child is considering nonemergency medical treatment.

What Bill 204 is advocating is the collaboration of determination of capacity to consent with the attending medical professional and the child's parent. Parents are mandated by law to provide the necessity of life for their kids, yet they do not have to be consulted as to whether or not their children obtain these or any other types of treatments. Personally, Mr. Speaker, I don't feel that this makes any sense at all. In order to take care of our children as best we possibly can, as parents we must be made aware of our children's decisions and offer our input to assist in managing their overall health. I can't stress that enough. If parents don't know about something, they can't be of assistance. It's as simple as that.

4:30

The system that we currently follow does not allow parents to become involved in their children's treatment to the extent that I feel that they should be. If they were, the criteria for consent for medical

treatments would be considered valid, and it would include three distinct steps. The first requirement is that patients must be properly informed by their attending medical professional. Their condition is properly explained, and the recommended treatment is offered, and the effects of having or not having the treatment are delineated. The second requirement for consent to be deemed valid is that the consent must be given voluntarily by the patient. The third requirement is that the patient must have the capacity to consent to that treatment. By capacity I mean that the individual must be able to understand the character and anticipated effects of the treatment.

Any minor meeting these requirements for capacity consent is regarded in the same manner as an adult, as has been referred to in the mature minor doctrine of people who have spoken prior. This is the doctrine that established that children of any age can make rational, informed decisions about their health if they have the capacity to give said consent. I believe, Mr. Speaker, that parents are in a better position to judge what's best for their child's overall health. I would argue that our children need the guidance of their parents when considering medical treatment, and I would go further. After having taught thousands of students over the years in various countries at all levels, I know that our children actually want that guidance from their parents.

Now, in the past when the system of allowing children under the age of 16 to consent to treatment came into practice, it could be argued that it was functional and it was practical at that time. I don't feel, however, that this is the best practice for us in our present day and age, nor do I believe that it will serve us any better in the future. Yes, this may be common law and practice, but I believe that our legislation by its nature simply must evolve to match our evolving society. Legislation should also reflect public interest, and I feel that Bill 204 would do exactly that.

At the present moment our children are dealing with a great number of issues that did not seem so prevalent when we as adults were growing up. From the proliferation of drugs such as methamphetamine, which is showing up in our communities and schools at an alarming rate, to the media's bombardment of their viewers with images of the so-called perfect body and face, things are quite different today. Another thing that's quite different today is the amount of disposable income that our youth possess. Many of our young people have jobs, and since they have minimal expenses, they can presumably use this money for whatever they choose, including cosmetic procedures. Parents should have the ability to participate in the activities of their children. They should also have some measure of input into these activities as such involvement is vital to the role of what it means to be a parent.

Mr. Speaker, Bill 204, the Parental Consent to Medical Treatment for Minors Act, would allow parents to regain some control over their children's health and well-being. Given current societal changes, it is more important now than it ever was before that parents help guide the decisions of their children. Any time an individual is considering medical treatment, the utmost thought and care must be given to that decision, and I simply do not feel that children should have to make these decisions all by themselves. In my opinion, parents are in the best position to advise their children and assist them in considering the long-range benefits and drawbacks of any medical procedure. After that, perhaps the procedure would continue. It would simply continue in a better informed fashion.

Therefore, because of the bill's ability to improve parental involvement in Alberta, I am very happy and honoured and feel obligated to support this bill, and I encourage all members of the Legislature to do the same. Once again I thank you, Mr. Speaker.

The Acting Speaker: The hon. Member for Cardston-Taber-Warner.

Mr. Hinman: Thank you, Mr. Speaker. It's a great privilege that I'm able to rise at this time and speak to Bill 204, and I thank the hon. Member for Drayton Valley-Calmar for his thought and the desire to bring this bill forward early in this sitting. There's no question that the most important unit in our society is the family. There's also no question that it's the parents who have the greatest interest of the child at heart and would look after them better than anyone else. There have been many excellent points brought out about the importance of parents, about consent, and I'd just like to bring out a few other ideas that we haven't maybe discussed.

What is the purpose of having minors if, in fact, we want to talk about free rights and privileges and not needing parents? Why is it that we have put in regulations that prohibit minors from buying cigarettes, pornographic magazines, alcohol, and entering drinking establishments let alone gambling casinos? Those are minor details compared to that of having surgical procedures and free access to do as they so desire.

There's a reason why they're minors, and that's because under the family unit they're raised and protected and taught by their families. Points have been brought up of the desperate situation that many pregnant teens find themselves in, that they are not able to go and discuss things with their parents and therefore need to bypass them and supposedly go to people that have their best interest at heart when that is the furthest thing from the truth. We know that there are cases of abuse, but that doesn't mean that we shouldn't put in legislation to protect minors in our society. There are some abusive parents out there. We need to deal with them on that level and to be vigilant in going after abusive parents.

There have been many points brought up on the negative side about the desperate situation of pregnant women needing to be able to go and have access to a doctor. I would like to just refer everyone to a book called *Forbidden Grief* by Dr. Theresa Burke. It's a very eye-opening book. It talks about after an abortion: what happens and the struggles that women go through. I think every woman should be counselled and see both sides before they make such a dramatic decision, especially without the consent of a parent. It just isn't a good emotional or physical situation for them to be in.

[The Speaker in the chair]

In counselling groups of women, she found that there's a very high percentage of those women that participated in an abortion that, when she went back, had gone on to have eating disorders, to be suicidal, have drug addictions and various other abusive situations, all going back and rooted in the fact that these young women had participated in an abortion and weren't informed to realize the long-term effects of it. So it's very important that parents are, in fact, the guardians of our minors in our society. If we want to throw away parental rights, surely our society would fall apart. It would become decadent, and we wouldn't have the social organizations and the laws that we do have and the peace that is here. It would become chaotic and not a great place to live and be a part of a community.

I appreciate the opportunity to stand up and give my full support behind Bill 204. It's something that we need here in the province. We want to protect our children, and the parents are definitely the best situation to protect them. Despite the fact that we have some parents that fail to do that, that isn't the reason to give minors full rights to do as they please.

Thank you very much.

The Speaker: The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much, Mr. Speaker. While I appreciate the intent of the mover of the bill, I don't believe this bill can accomplish it. This bill can't roll back time. We can't return to a *Leave It to Beaver* or a *Father Knows Best* time period. There is, unfortunately, an ugly reality in Alberta. We have among the highest divorce rates in Canada, almost a 50 per cent rate, and we have definitely among the highest, if not the highest, suicide rates. So the idea that, you know, Father comes home with his lunch pail to Mother, who has been making brownies all day, and the kids all were able to go home for lunch, and Suzy is going to Brownies and Johnny is going to Cubs: that world does not exist for many children.

Having taught for 34 years and having coached for a large amount of that time both within the schools and within the communities, I know that age 15 for some children is a lifetime. I'm not talking about child soldiers in Sudan or children working in Third World sweatshops; I'm talking about the reality that exists within this province.

4:40

The government seems to be sending mixed messages. Last year this government approved allowing 12-year-olds to go to work, but it's saying that those same 12-, 13-, 14-, and 15-year-olds aren't old enough to make some key decisions. This government does not take into account the reality that we face on a daily basis that more and more children are seeking a sad sanctuary on the streets because their dysfunctional families have driven them there, not by their choice. This bill does not deal with the dysfunction. It deals with parents as one whole, and therefore it fails to meet the needs of the most vulnerable.

As a teacher I would receive phone calls at my home at night from children whose parents were abusing them, and the slow process of getting that abuse from the reporting period to the actual trial was a terribly painful process. A child had to be physically beaten so that you could see the exterior wounds or a parent practically had to be caught in the act of sexual abuse before the law had sufficient cause to pursue the parent. So this bill just does not address the children who are living on the street, and there is a growing number of them both in Calgary and in Edmonton and, I would assume, in Red Deer and our other cities as well, our new city of Brooks. We can't deny that these street children exist, and forcing them to have the parents' approval before they receive medically necessary intervention just adds to the abuse.

We have people who come from different countries and different religions where young brides are killed because potentially they have dishonoured their family. We have people from countries where it's still the practice for sexual mutilation. In our society we would consider cutting a girl's vagina a form of mutilation, but in other countries that's part of an accepted religious practice.

We need to protect children. Within our province we have a variety of different religions. We've had very controversial cases with the Jehovah's Witness faith about blood transfusions. We had the situation where a father wanted his daughter to have a blood transfusion. Neither she nor the mother wanted that blood transfusion to take place. In the end, basically, it was too late for that blood transfusion, if it would've worked, to have done any good because the young lady, unfortunately, died. We cannot change the reality, so what we have to do as a Legislature is protect children to the best of our abilities.

We have voted in this Parliament, in this Legislature to pass such bills as the crystal meth bill. That bill, unfortunately, went from 90 days of in-house treatment and counselling to basically five days.

Part of the reason that bill failed is that we don't currently have the facilities. We don't pay for the base operational funding for programs like those intervention programs to take place. We've recently gone through a series of stages for the environmental cleanup of crystal meth lab areas, and particularly with the environmental cleanup these are more on the punishment end of things rather than on the preventative end of things.

In Calgary – and I'm sure there are examples here in Edmonton. I believe the girl was 15. She was so afraid of what her parents' reaction would be to the fact that she'd delivered a baby that she put this baby in a green plastic bag. Fortunately for the baby, obviously, and for the young mother who made a mistake, the baby was found, but for every baby that is found and rescued, there are a number of babies who aren't, who end up in trash bins because the children are so afraid to tell their parents. Isn't it sad that embarrassment, a lack of relationship or a lack of understanding or a desire to please the parent takes precedence over life?

This bill with all its intentions cannot turn back the clock. If we're going to help children, then we need beds for them in a variety of programs in all our cities and in our rural areas, which will take them out of these abusive homes, provide them with counselling, provide them with support. We've heard about the bond between physician and patient. How much less is that bond between the role of a parent who is not fulfilling their paternal or maternal obligations and the role of the doctor-patient confidence?

I have seen junior high school students, in my experience over 34 years, going to junior high dances dressed up as pimps, as prostitutes, a variety of costumes. Obviously, they left their parents' door wearing these costumes. In some cases the mothers came up with this combined sort of cute cheerleader aspect or the French maid costume, highly inappropriate for junior high.

But that's the reality: 15 There are a number of 15-year-olds at the junior high level. There are a number of 15-year-olds who have been out on the street already for two years. This bill does not address those needs. This bill cannot turn back the clock. What we need is legislation that addresses the reality of today's Alberta world. This bill does not do it. I speak against it.

Thank you.

The Speaker: The hon. Minister of Innovation and Science.

Mr. Doerksen: Thank you, Mr. Speaker. Bearing in mind that we are in second reading of this bill and speaking to the principle of the bill, I'd just like to actually read into the record the preamble to the bill and then speak to a couple of the issues. The bill says:

Whereas the health, safety and well-being of children and families is of paramount importance to the people of Alberta;
Whereas parents have a legitimate interest in and responsibility for medical treatment provided to their minor children; and
Whereas decisions about a child's capacity to consent to non-emergent medical treatment are more appropriately made by the child's parents,

and then the bill goes on to describe what it does. I think that is the essence of the debate of the principle of the bill, and I want to speak to two of the issues there.

One would be the second one where "parents have a legitimate interest in and responsibility for medical treatment . . . to their minor children." That particular clause speaks to the paramountcy of parental rights and responsibility. In one sense, Mr. Speaker, we dealt with that issue during last session with Bill 202, when we discussed the mechanism whereby a parent could forcibly take their minor child into treatment for drug issues. That paramountcy was supported and, in fact, loudly endorsed throughout our country as an

appropriate mechanism. So I think that is a very important issue that we are dealing with.

4:50

A number of people have made some comments – and they're accurate – that not all parents are good parents, and that does present challenges to this bill. I do want to question one of the arguments that says that this is an intrusion into the relationship between a youth and its doctors, nurses, and social workers. In fact, Mr. Speaker, allowing young people to make decisions without the involvement of their parents is actually an intrusion into the relationship between a parent and their youth.

That leads me to the second issue to deal with, and that's capacity. In Alberta there are a number of criteria that must be met for consent to be valid. One is that the consent must be voluntary, so that implies that consent is given without coercion, without compulsion, and that it's based on factual information. The second element – and I just alluded to it – is that the patient must be properly informed. In other words, medical consent is by definition informed consent. Before medical treatment can be consented to, the attending physician has a duty to disclose any and all possible ramifications that may result from the treatment or lack thereof. Treatment undertaken without informed consent can constitute battery and/or negligence. Mr. Speaker, that is important, but I would also argue that not only is information about the medical system important; there are also a number of other factors whereby a parent can bring to bear things of importance to their own belief system, their own family situation, any number. So informed consent has to be larger than just medical consent, and I think that's really where parental involvement is necessary.

Thirdly, the patient must have the capacity to consent. In other words, we make a determination whether an individual is able to understand the nature and anticipated effects of the proposed treatment and the alternatives to said treatment and is deemed to be competent to give valid consent.

Now, obviously, the bill is somewhat arbitrary in that as soon as you pick an age, it does become an arbitrary decision. Given that some teens at 15 are much more capable than other teens or have the capacity, the truth is that in many of our laws we do pick an arbitrary age because that's the only really effective way you can do it. Clearly, I don't think anybody in this Assembly would argue that a five-year-old has the capacity to make decisions about their medical treatment. So age is arbitrary, but I think it's a reasonable age considering all the circumstances.

The point has been raised that minors may not have confidence in their parents, and that is true. I think that's an issue that all of us as parents have dealt with. There's a certain age with our children. I recall quite distinctly that one of our children in particular insisted at the junior high age that we should not come and watch her play her sports activities. I mean, she might be embarrassed by the fact that we showed up. Mr. Speaker, I have to tell you that I did not take her advice. I showed up for all of her games, and now that she is well into adulthood and has three of my grandchildren, I think she's quite happy, in fact, that we insisted that we would show up and show her support. She was actually, I think, glad that we showed up.

There is the issue of coercion, and certainly this is a valid argument for those on the opposite side of the position I'm taking, that you can't coerce co-operation from your teens. It's a challenge that all parents face. In fact, I'm reminded of a well-known story where a young man took half of the inheritance and left his father to go live in a different country and squander all of his money. The story goes on to say that when he came to his senses, he came back,

and his father received him with open arms. I think that's a true picture of the feeling and passion that parents, in this case a father, have that really desperately want the best for their children.

Mr. Speaker, despite reasonable arguments to the contrary – and there are valid reasons to the contrary – on balance for me the paramountcy of parental rights and responsibility trumps those arguments, and I certainly am in support of the principle of this bill.

Thank you.

The Speaker: The hon. Member for Calgary-Shaw.

Mrs. Ady: Thank you, Mr. Speaker. It's a privilege to be able to rise today to speak to Bill 204, and I compliment the Member for Drayton Valley-Calmar for bringing it forward. As we've been discussing this afternoon, this bill is to protect the well-being of children and the rights of parents by making parental involvement mandatory in young minors' decisions to obtain nonemergency medical treatments.

You know, Mr. Speaker, I'm reminded of when I was a teenager. There were six kids in our family, and we were all about a year apart in age, so we were quite a herd. My father had a wonderful way of controlling our behaviour. He had four vehicles, none of which was very nice. In fact, I think we could see the ground through the floorboards on the old family station wagon, but he held the keys.

An Hon. Member: It was a motorcycle.

Mrs. Ady: Oh, it was a motorcycle?

He held the keys to these four vehicles, and every Saturday morning he would get us up early, and depending on how pleased he was with us or not, he would distribute the four sets of keys amongst the six children. You always knew when you were out of favour because you did not get a key. You were digging in your purse for bus fare. I bring that up as a point that keys sometimes are important things, and they were certainly important in our lives at that moment.

When I look at this bill, I look at the keys that we give parents to help them raise their children. We certainly give them the responsibility. In fact, I mentioned earlier that while I was in Australia, an hon. member was bringing forward a bill to make parents have to sign contracts to say that they were in charge of their children and responsible for them. I thought it was a fairly different looking bill but still being brought forward. So we want parents to be responsible. In fact, when things go wrong with kids, we always ask the question: where are the parents? Why aren't the parents involved? Haven't they trained their children? Aren't they checking? Aren't they observing? You know, we give them all those responsibilities, but sometimes we don't give them the keys that they need in order to assist and aid their children when they're trying to raise them and help them turn into responsible adults.

Now, Mr. Speaker, I have a wonderful family doctor. She's been involved in my life and my children's lives for some 20 – well, my oldest son is 26 now. I would say that we have a high degree of trust in each other. She's been involved in all the different adolescent ailments that my children have had, and I would say that they have a lot of trust in her as well. But does that mean that it's primarily her responsibility to raise my children, or is it mine? I think about that. She's a mother. She has children, and I think she probably would want to have that responsibility not taken from her to be involved in those really important decisions that kids make.

Earlier I heard people talking about cosmetic surgery. I am very concerned today with the way young women are starting to mutilate their bodies in order to try and capture some ideal. We're seeing a huge escalation in those kinds of surgeries. As a parent I think it's

important that we be involved with our young people in those decisions. I've heard certain members talk about the fact that there are some ugly realities. There are kids out there who do not have involved parents. I heard the word "divorce" mentioned, which we know is at epidemic proportions in some ways. I would say to you, Mr. Speaker, that I know of a lot of divorced families where even though divorce has occurred, those parents are still very involved in their children's lives and really doing good things as parents in their lives.

5:00

I used to always say to my sons, "You know, if you need a rule, I'll make you a rule. I don't know that your brothers all need to have the same rule because they're not having problems. Just you are, so I'll make you a special rule if you need a rule." They hated that, but it's kind of how I felt about parenting. Most of us are trying really hard to be good parents, albeit imperfect. We make mistakes, and sometimes, like the former hon. member mentioned, our kids go through phases where they don't communicate well with us. I, too, had children that would not walk with me in the mall. They wanted to be, like, five stores behind or five stores ahead. They wanted to be dropped off a block from school. They went through those phases, and fortunately they didn't last overly long.

I would say to you that most parents that I know truly want to be good parents. They're trying their very best, and they need as many keys as possible in order to assist and aid their children as they develop. That's one of the reasons that I am attracted to the principles of this bill. I think it does give those keys to parents.

When I look at a 15-year-old, and I look at what that means in grade 9 – I think we're about at grade 9 at the very most. I have young adult sons right now, and I can tell you that even though they're 26 years old, they are still calling me, and we're still solving problems together, and they're a lot more mature than 15. At 15 on the range of where their intellect stood or their capacity to make great decisions, I don't know if I had great confidence then that they should be making life-altering decisions or even minor ones at that point in their lives. I mean, I just felt like it was a good thing to be involved in.

I recognize that all kids do not have the ability to communicate with their parents and that sometimes only a doctor is there, only a social worker, only a teacher, but I would say to you that most kids still do have parents that do care, and we should give them every key that we can in order for them to carry out that responsibility. You know, we celebrate with our kids, we suffer with our kids, we support our kids, but mostly we love our kids. I think we should protect children and let parents do their job.

So I'd like to support this bill and thank the hon. member for bringing it forward.

The Speaker: The hon. Minister of Infrastructure and Transportation.

Dr. Oberg: Thank you very much, Mr. Speaker. I, too, rise to discuss this bill. Quite simply, I don't want to reiterate a lot of the things that have been said. I don't believe that anyone can go against parents being involved in their young children's lives. I think that for people under 15 it's quite legitimate for parents to be involved, for parents to be concerned with what is happening to their child, and I agree, quite frankly, with the majority of things that have been said.

The only comment that I would suggest – and this is a comment that I made to the sponsor of this bill as the bill was coming forward – is that they really should give a much narrower definition of medical treatment. Medical treatment should be defined as a

specific thing. I'll give you an example. If a 14-year-old comes to see a physician for an ear infection, there's no problem with the mother simply dropping them off, the child sitting in the doctor's office waiting to see the physician, and subsequently having treatment rendered to him.

So I do agree with the principles of this bill, and this is something that I have stated to the sponsor of the bill. I believe in the principles. I believe in parental responsibility. I believe in parental advice. I believe in parental knowledge for those children that are under the care and auspices of the parent. However, I do believe as well that the terminology of medical treatment must be clearly defined and must be clearly laid out. I believe the intentions of the hon. sponsor of this bill are extremely good. Therefore, I will be supporting it, but I would hope that in committee there would be a definition given to medical treatment in this bill and that it would be altered as such, Mr. Speaker.

Thank you very much.

The Speaker: The hon. Member for Edmonton-Castle Downs.

Mr. Lukaszuk: Thank you, Mr. Speaker. I read the bill very carefully and listened to the comments made on both sides of the aisle very carefully. In the bill the whereas clauses of the bill appear very innocuous, and I don't imagine that anyone in this Chamber could agree on what those particular sections of the bill mean.

When one actually reads the bill and realizes what the bill aims at accomplishing, I think it would be very difficult to argue that this is not about any and all medical procedures. I hear mention of plastic surgeries, for example, being touted as one of the procedures that could be prevented from being done without the consent of a parent. Well, perhaps in some cases, although the cost of those plastic procedures usually in themselves cause them to be prohibitive to young people to be done without the consent of a parent. We're not also talking here about eye surgery.

I may be going out on a limb, but I think we're talking about abortion over here, that the intention of the bill is to regulate children's ability to obtain abortion without the consent of the parent. Now, if that is the case, that may be right or it may be wrong depending on one's personal convictions and the convictions of his or her constituents. However, if that is what we are to debate here in this Chamber, then let's draft a bill that speaks directly to abortions, and then we can debate this bill in a coherent way and know what we're all talking about.

Mr. Speaker, there are several problems with this particular bill. If those, quote, medical procedures, unquote, are not available to the children, what options will the children have if they choose not to disclose the need for such a procedure to their parent? What alternative options will the children have, and how will they self-administer alternate medical procedures to achieve the same goal if, indeed, they are not in a position or choose not to or cannot – because in many cases they cannot – share the need for that medical procedure with their parents? Are we willing to accept the alternatives and accept the repercussions of legislating this bill into being and then accepting the repercussions of kids self-medicating and providing themselves with alternative medical procedures?

Mr. Speaker, the essence of the bill really lies in the relationship between a parent and a child. I imagine that in this Chamber most, if not all, parents have good relationships with their children. As a matter of fact, probably most of our families, if not most of our constituents, have good relationships with our children where our child would come to us and disclose a need for a medical procedure. For us, then, we don't need this bill. Our children will come to us anyhow; they will disclose the need for a medical procedure anyhow. Indeed, if it's a procedure that they need, by virtue of the

fact that they're coming to us and asking for it, we'll either grant it or not, and the problem issue is resolved.

Now, this bill will only be addressed for those children who choose not to or who cannot go to their parent or a guardian to obtain permission. If they cannot or will not go to their parent to obtain permission, it doesn't matter how many laws we pass in this House. They still won't do it. Now, by compelling them to do it, what you really are doing is depriving them of their ability to go to their doctor, seek sound medical advice, and obtain whatever treatment or surgical procedure they may require, Mr. Speaker.

Now, the question lies in: do we trust our doctors? Do we trust our doctors in the absence of a parent's consent to provide a child with sound medical treatment or sound medical surgery? Well, I suggest, Mr. Speaker, that in this Chamber at least all of us ought to because we are the ones who legislate doctors into place. We are the ones who legislate the body that governs doctors' procedures in place, and we are the ones where the buck stops if doctors do something wrong. Now, if we don't trust our doctors to provide our children with sound medical treatment, then I think we should re-examine the whole process by which we put doctors in place and whether they are governed by proper ethics and codes of conduct.

I suggest to you, Mr. Speaker, that we do trust our doctors. We trust them in our absence to provide our children with the treatment that they do require and that will not render them seeking alternative medical treatments outside of the medical community and putting their lives in hazard.

Lastly, Mr. Speaker, lawyer I am not, but again I would venture to say that Charter arguments could very easily be formulated against this bill. I heard the United Nations proclamation of children's rights being quoted. One of the main aspects of the proclamation is to provide children with medical treatment. Well, this bill deprives children of obtaining medical treatment where they are not willing or able to obtain consent from a parent.

5:10

As a teacher, as an educator, Mr. Speaker, I can tell you – and I believe I heard the Member from Calgary-Varsity mention that it is not uncommon to have a student come to a teacher and say: "Teacher, I want to talk to you one-on-one. I have something embarrassing I want to tell you, something that I cannot share with anybody else." You'd be surprised how often teachers in our classrooms learn of personal situations that children go through at home or with their family or just personally that parents never are privileged to find out because of the fact that there is that sense of anonymity in their ability to obtain advice.

As such, Mr. Speaker, I am moving that the motion for second reading of Bill 204 be amended by deleting all the words after "that" and substituting the following: "Bill 204, Parental Consent to Medical Treatment for Minors Act, be not now read a second time but that it be read a second time this day six months hence."

Thank you, Mr. Speaker.

The Speaker: Hon. member, I'd ask that copies of that amendment be circulated to all, and we'll just wait for a fraction of a second until it is.

Hon. members, we have an amendment on this particular bill before the House generally referred to as a hoist amendment. Those who would like to may participate in this debate. The hon. Member for Calgary-Varsity.

Mr. Chase: Thank you very much, Mr. Speaker. I just want to have it registered in *Hansard* that the reality of hoisting this bill and suggesting that it be discussed six months hence basically kills the bill because six months hence the Legislature is not likely to be open.

I would like to think that when we debate within this House, our debate has meaning, that we speak from the heart, that we lay out our personal beliefs, and to the greatest extent possible we attempt to lay out the realities and the feelings and sentiments of our constituents. If this just simply becomes a platform for marketing our religious or moral beliefs to our constituents, then a large part of the purpose of this Legislature is lost. So I'm hoping that this was not an exercise in discussion and debate but that it was based on the member opposite's belief that this bill did not meet the requirements and, therefore, was basically taken out.

Thank you.

The Speaker: Hon. Member for Drayton Valley-Calmar, interestingly enough, we have a Standing Order 25(2), which states: "Except as otherwise provided in this Standing Order, no reply is allowed the mover of an amendment or a superseding motion" with respect to this matter. The hon. member brought to my attention an event that occurred in this House on March 6, 2006, when, in fact, the chair at that time did recognize the mover of the superseding motion. So I'm going to recognize the hon. Member for Drayton Valley-Calmar and permit him to participate with respect to this hoist amendment, and we'll spend some time redoing this in the future.

Rev. Abbott: Thank you, Mr. Speaker. I appreciate that, and perhaps we're making a little bit of history this afternoon. Maybe we'll have to change our Standing Orders in the future to reflect what's happening.

On the hoist amendment I want to say that I do sincerely appreciate the debate that has happened in this House this afternoon. This, I feel, is what the Legislature is all about. I'll be honest with you: I learned a lot this afternoon, Mr. Speaker. I've seen the contents of this bill, what I'm trying to do, from different sides that I had not heard even amongst discussions within our own caucus. I heard some new viewpoints today, and I would have to say that I was very enlightened about some of the different difficulties with this bill as well as some of the positives, obviously. When you put a bill forward in the House, you tend to see only the positives. You tend to think that it is a bit of a cure-all. When it hits the floor of the Legislature, then there is an opportunity to see what other people think, perhaps to get some outside views through various interest groups and through various cards and letters, et cetera. Certainly, I think the debate has been extremely valuable.

I was a little scared to introduce this bill, Mr. Speaker, because it is a socially conservative bill. It is a pro-life bill. I'm not trying to spread my religion to anybody. I'm trying to do the right thing, I believe, for all Albertans. Many of our laws in this land are based on moral traditions. They're based on the Bible, quite frankly. "Thou shalt not steal." "Thou shalt not kill." A lot of the laws that we have today are based on tradition from the Holy Scripture. Although this bill certainly doesn't go that far, there's no doubt that because of my Christian and religious convictions I felt that this bill was very, very important.

I will also say that there are a lot of social conservatives in Alberta. There are a lot of pro-lifers in Alberta, Mr. Speaker. I have received a lot of cards and letters and e-mails, et cetera, asking for this kind of thing to be done. This bill is not a bill that would end abortion. It's certainly not a bill that would defund abortion. It's simply a bill that would try to get parents involved in a major decision, such as an abortion, but it could also be obtaining contraceptives through a doctor's prescription, or it could be cosmetic surgery, as was mentioned in several speeches here. Quite frankly, it's simply a bill that is trying to get more parents and children communicating with each other.

As I said, there a lot to think about with regard to the hoist motion. Perhaps six months from now there will be some more information that would come to light that would help us to make a better decision on this bill. I know that some of the points that were brought up about the mature minor doctrine – well, that's a doctrine that was established for a 20-year-old back in the early '70s, when the age of majority was 21. A 20-year-old was trying to get some medical treatment without their parents' consent, and they were able to get that. So that's when the mature minor doctrine was established. To say that it should apply to 15-year-olds I think is ludicrous, and that's why I brought this bill forward.

Bill 204 is not a slam on doctors or health professionals. It's simply a strong endorsement of parental rights and responsibilities. As I said, we do this kind of thing: we set age limits with smoking, with cigarette purchasing, with the consumption of alcohol, and with other things. I felt that it was reasonable to try to do it with regard to medical treatment.

There were some speeches that talked about a situation of desperation. That's why I tried to put in a judicial bypass here, that you could go to a social worker or a teacher or a counsellor. You could go to a third party, and you could try to have them advocate on your behalf as an adult in order to receive whatever medical treatment you felt you needed.

I think it's pretty sad that in some of the speeches that were against this bill, you know, some of the points that were brought out were maybe not fair to the bill. But, again, that's the whole value and beauty of debate. There were many people asking for this through e-mails, petitions, letters, and calls.

With regards to the Charter issue, well, the Charter is there to protect individual rights, so all bills are subject to the Charter. I mean, if you feel that the bill isn't coinciding with the Charter, then let it be tested in the courts. That's what the courts are there for. That's what the Charter is there for. We don't assume that something is going to go against the Charter before we know the full implications of it.

5:20

Lastly, I guess, just defining medical treatment, Mr. Speaker: that seemed to come up in a few speeches. Sections 3 and 4 clearly

define medical treatment as any nonemergency procedure or service that involves medical personnel, not a teacher or a school secretary administering a band-aid. That's just ridiculous to bring up examples like that. It's talking about a medical person doing a medical procedure. That's what the definition is. Again, it's very, very clear in the bill.

In closing, Mr. Speaker, I'll just tell a little story about my own son. I have a son who is 14 years old, and when he reached a certain age, he was allowed by his school to go uptown and go to 7-Eleven. A note came home, and it said that they have to have the parents' consent in order to allow the child to leave the school grounds and go to 7-Eleven. So we took the note, and we sat down with my son. We had a good chat with him about all the pros and cons of going to 7-Eleven. We talked to him about some of the things that he would face at 7-Eleven, some of the temptations, such as stealing, such as maybe being offered drugs or such other things, maybe the temptation to skip out of school once you got off the school grounds. Anyhow, we had a good, long chat with my son, who is 14, and, lo and behold, we decided to give him permission to leave the school grounds. I thought that was really reasonable.

I think it's unfortunate that in Alberta we don't have to have permission for our 15-year-old or our 14-year-old daughters to go and get an abortion so that we can have the same opportunity to discuss the pros and the cons and the good and the bad of such a decision. That's what this bill was trying to do, but I understand that we need to give it more thought. I understand, Mr. Speaker, that maybe we need to have more debate on this issue.

So, in closing, I do support the hoist motion. Thank you.

[Motion on amendment to second reading of Bill 204 carried]

The Speaker: The hon. Deputy Government House Leader.

Mr. Zwozdesky: Thank you, Mr. Speaker. In view of the hour I would move that we now call it 5:30 and adjourn until 8 this evening.

[Motion carried; the Assembly adjourned at 5:22 p.m.]