



**NORTHWEST TERRITORIES
LEGISLATIVE ASSEMBLY**

4th Session

Day 6

12th Assembly

HANSARD

**WEDNESDAY, NOVEMBER 24,
1993**

Pages 127 - 170

Page numbers reflect printed Hansard

The Honourable Michael A. Ballantyne, Speaker

MEMBERS PRESENT

Mr. Antoine, Mr. Arngna'naaq, Hon. Michael Ballantyne, Hon. Nellie Cournoyea, Mr. Dent, Mr. Gargan, Hon. Stephen Kakfwi, Mr. Koe, Mr. Lewis, Mrs. Marie-Jewell, Hon. Rebecca Mike, Hon. Richard Nerysoo, Mr. Ng, Mr. Patterson, Hon. John Pollard, Mr. Pudlat, Mr. Pudluk, Hon. John Todd, Mr. Whitford, Mr. Zoe

ITEM 1: PRAYER

---Prayer

SPEAKER (Hon. Michael Ballantyne):

Thank you, Mr. Lewis. Orders of the day. Item 2, Ministers' statements. Madam Premier.

ITEM 2: MINISTERS' STATEMENTS

Minister's Statement 14-12(4): Resignation From Cabinet

HON. NELLIE COURNOYEA:

Mr. Speaker. Statements made by Mr. Allooloo that were broadcast this morning over CBC radio have placed me in a position of having to elaborate on the circumstances surrounding my decision to ask for the Member's resignation.

While I had hoped that this matter would have already been dealt with and that we could get on to other business, I believe that I must respond to the public reports.

As you know, Mr. Allooloo told this House last week that he attended a federal/provincial meeting in Saskatoon. During a meeting I had with him the next day to review a comprehensive chronology that was being prepared, Mr. Allooloo repeated his remarks and added further details.

Mr. Allooloo reported that he left Edmonton at 7:00 am on November 15 to attend the meeting in Saskatoon, and that he returned to Edmonton in time to catch a late evening flight to Yellowknife. He did not travel to Saskatoon to attend the meeting.

Mr. Allooloo told me he met with his deputy minister of Renewable Resources in Edmonton the evening before his departure to Saskatoon. He didn't. He

hadn't spoken to his deputy minister since November 9.

Mr. Allooloo subsequently admitted that he had missed the flight to Saskatoon and that he didn't attend the meeting. Mr. Allooloo then stated he participated in a conference call at noon hour on November 15 with delegates to the federal/provincial meeting. There is no record of a conference call taking place.

Mr. Speaker, in a statement on Monday I explained that the House and the public must be able to rely upon the truthfulness of statements given by Members of the Executive Council. I emphasized that this is a principle that I am not prepared to compromise.

Furthermore, my decision to ask for the Member's resignation from Cabinet had nothing to do with his handling of the Iqaluit situation. It was based entirely on the misrepresentation he made to this House about the Saskatoon meeting and to myself the following day during preparation of the chronology I had promised to table in this House.

MR. SPEAKER:

Item 2, Ministers' statements. Mr. Todd.

Minister's Statement 15-12(4): Organizational Review of Economic Development And Tourism

HON. JOHN TODD:

Thank you, Mr. Speaker. Since the introduction of the economic development strategy in 1990, there have been dramatic changes in the environment in which the Department of Economic Development and Tourism operates. In response to this changing economic environment, the department commissioned an independent consulting firm to undertake a review to identify major issues, concerns, priorities, opportunities and constraints which face the department today.

This review considered: the organizational structure of the department; the function of headquarters and the regional offices; the department's approach to meeting client needs and expectations; and, the department's funding policies to identify gaps, deficiencies and overlaps in programming.

During the review, the consultant conducted 103 interviews with regional and headquarters staff

members, clients and representatives of other departments and non-GNWT agencies.

Mr. Speaker, I will be providing copies of the executive summary of this review to the Standing Committee on Finance. I would like to take a few minutes to outline some of the highlights of the document to the House and talk about some of the changes which have already been implemented as a result of the review.

The review shows that the department was becoming a rule driven organization. It seems that administrative requirements were extremely time-consuming and overly burdensome to both staff and clients. Time was being spent serving the system rather than effectively serving clients.

The consultants also report that the department rarely measured the benefits which were generated from grants and contributions. However, it is absolutely imperative to track grants and contributions and measure the results of these expenditures in order to effectively determine whether we are achieving our goals and objectives, and whether the economic strategy and our funding programs are still relevant.

Page 128

The report also revealed that the public viewed the department as being too bureaucratic, ineffective and inefficient. Too many levels of management slowed down the decision-making process, usually at the client's expense.

Also, the department was viewed as a reactive organization, spending money to solve problems rather than an organization which studies current economic circumstances and trends, and plans activities and expenditures to effectively address these circumstances.

Mr. Speaker, based on the findings of the review, it is clear that the department needs to make changes in the way it operates to respond to the unique economic circumstances in the NWT, address the needs and expectations of the small business community and recognize regional priorities for economic development initiatives.

Mr. Speaker, I am happy to report that already a number of the recommendations outlined in the review have been implemented.

A participatory management structure has been introduced into the department. Regional

superintendents are now included as an integral component of the senior management team. Regional superintendents are front line managers and have the knowledge and expertise to address local objectives and initiatives. By having the regional superintendents involved in policy development as well as program delivery, departmental activities will better reflect reality in the regions and communities.

At headquarters, some senior management positions have been eliminated and some staff positions realigned. Headquarters is now responsible for coordinating territorial-wide activities, developing economic sector strategies and implementation plans, and monitoring and evaluating policies and funding programs. Significant emphasis will be placed on developing new, or updating existing sectoral and regional economic strategies. These changes are in direct response to the demands from communities and this House, that the department plan expenditures according to relevant regional and sectoral economic plans.

An important accountability system for all the department's funding sources has been introduced and a more effective program evaluation system will be developed.

In order to better inform clients of the funding programs and economic development activities, the department is developing a public relations plan. More emphasis will be placed on face to face communication rather than printed promotional material which our clients have found too bureaucratic and too difficult to understand. And I don't blame them.

Although each of these changes are essential to effectively address client needs and to meet expectations, Mr. Speaker, the key element to the success of any organizational change is not only a change in the structure and functions within the organization, but the creation of new tools which will allow the organization to do a job better.

Therefore, the department is reviewing all its policies and funding assistance programs to better reflect the unique economic circumstances in the NWT and establish a program delivery and decision making authority at the regional level where it is closest to the client base.

Program approval and expenditure authority has already been delegated to the regional superintendents. Most applications for funding

assistance will be considered in Yellowknife and not forwarded to Yellowknife. Therefore, clients will receive a quicker response and decisions will be more reflective of local and regional economic circumstances.

Already changes have been made to some funding programs to better address the business needs of all NWT entrepreneurs, from the very small individual arts and crafts producer or commercial renewable resource harvesters to the larger, more sophisticated businesses.

Human and financial resources will be redeployed within the department to ensure that the regions will be fully qualified to assume the new program delivery responsibilities. Staff members who are assigned new duties will be provided training so they are fully capable of performing these duties and skillfully serving clients.

In closing, Mr. Speaker, it is clear that many positive changes to the way the department operates have been implemented and more are yet to come. However, all these changes have one goal in mind, to serve the NWT business community more effectively.

In the days to come, I will speak in more detail about some of the changes made to the department's funding programs and various departmental reorganization activities. Thank you.

MR. SPEAKER:

Mr. Todd.

Minister's Statement 16-12(4): Northern And Local Content In Transportation Contracts

HON. JOHN TODD:

Mr. Speaker, I believe that my position on northern and local involvement in government contracts is well known to most Members of this House. Government contracts are the major force in our economy. We must take all reasonable steps to maximize the benefits these contract dollars provide, in terms of northern and local training, employment and business opportunities.

I would like to let the Members know what the Department of Transportation has done and plans to do in this area.

For the fiscal year 1992-93, the department awarded 512 contracts valued at almost \$48 million. Over 92

per cent of the dollar value went to northern contractors.

---Applause

Thank you. Of course, Mr. Speaker, the question I asked the department, is what are they doing with the other eight per cent? On review, it turns out that most of these contracts were for specialty services not available from northern businesses, like highway line painting, structural steel and the purchase of calcium and chloride. Taking these contracts into account, northern firms won 97 per cent of the contracts they bid on. In fact, only one major contract was awarded to a southern firm

Page 129

when northern firms had also bid. In that case, the price premium was simply too high.

Results so far for 1993-94 are similar. As of September, northern firms have been successful in gaining over 94 per cent of the \$35 million in contracts. Once again, most of the remainder appears to be in the specialty areas where no northern firms are established.

Mr. Speaker, I think this record of northern involvement is a remarkable achievement for government contracting policy, for the department and, not least of all, for northern companies.

My objective is now to do better in the area of local involvement. For 1992-93, 29 per cent of our contract dollars went to local companies. The results for 1993-94 show 31 per cent. I want to see more of our contract dollars flow to local economies. I believe that local business, particularly aboriginal businesses, can do more in providing jobs, experience and training to local residents.

We have the tools to achieve this objective. We have the business incentive policy which is constantly being refined and improved. In addition, we will continue to use a variety of special contracting procedures which incorporate training programs and incentives to maximize local employment and subcontracting opportunities. As Minister, I have not been reluctant to seek Cabinet approval to negotiate contracts directly with local development companies, where appropriate.

We often pay a premium for these special approaches, but I believe this is an investment worth taking. Negotiating contracts involves an element of

risk, like any business venture. There have been some failures and I am sure there will be more. Again, I believe the risk is worth taking.

I trust when the Members examine our record, they will look at the overall picture and see the many successes, along with the few that did not work well.

In conclusion, Mr. Speaker, I hope my colleagues in the House are as pleased as I am with the contracting record of the Department of Transportation. More importantly, I hope the Members will continue to support our efforts to improve local benefits of our contracting expenditures. Thank you.

MR. SPEAKER:

Item 2, Ministers' statements. Mr. Kakfwi.

Minister's Statement 17-12(4): Victims' Assistance Committee

HON. STEPHEN KAKFWI:

Mr. Speaker, later today I will table the 1992-93 annual report of the victims' assistance committee, as required by the Victims of Crimes Act. This committee administers the victims' assistance fund, which generates its revenue from surcharges on fines imposed for offences under federal and territorial statutes.

Last year, the committee recommended to me, and I approved, contributions totalling \$120,000 to 55 territorial organizations, community agencies and individuals for victim related activities in training, direct service delivery and public information.

Highlights of the report include contributions to non-government organizations for sending staff or volunteers to national and territorial conferences and workshops dealing with child abuse, childhood sexual abuse, family violence, traditional healing and victim assistance. Other recipients were helped to start a child care advocacy program, provide self-defence training for women, or to publish a sexual assault legal handbook.

I find it encouraging to see the victims' assistance fund being used as one of the many links to developing community-based victims initiatives. I would like to thank the committee members, Miss Thelma Tees of Yellowknife, Julia Putulik of Chesterfield Inlet and Rebecca Williams of Arctic Bay, for their services to victims of crime in the north. Thank you.

MR. SPEAKER:

Item 2, Ministers' statements. Madam Premier.

Minister's Statement 18-12(4): Fort Providence/Cambridge Bay Strategic Planning Workshops

HON. NELLIE COURNOYEA:

Mr. Speaker, caucus met in Fort Providence on April 4-6, 1993 and in Cambridge Bay on October 4-8, 1993. These strategic planning workshops were held to provide Members with a less formal setting to deliberate the many issues related to division of the Northwest Territories and the operation of the legislature and the Government of the Northwest Territories in meeting the challenges of the future.

Later today the caucus chairman, Mr. Fred Koe, will table a report summarizing the results of the Fort Providence and Cambridge Bay deliberations, principles of agreement and the ongoing work of caucus on these matters. The report will serve as a foundation for further work by the Legislative Assembly and the Government of the Northwest Territories and as a guide for the work of the Nunavut Implementation Commission and the western constitutional process.

Minister's Statement 19-12(4): Minister's Absence From the House

Mr. Speaker, I also would like to advise the House that I'll be leaving the House today at 4:00 pm to attend the western premiers' conference in Canmore, Alberta. I will be back on Friday, November 26 at approximately 11:00 am. Thank you.

MR. SPEAKER:

Item 2, Ministers' statements. Mr. Nerysoo.

Minister's Statement 20-12(4): Creating Two Colleges

HON. RICHARD NERYSOO:

Thank you, Mr. Speaker. Mr. Speaker, in October of last year, the Financial Management Board approved the decentralization plans of Arctic College to divide into two institutions, one serving Nunavut and the other serving the western Northwest Territories. I would like to bring this Assembly up to date on the progress made on this project.

The establishment of two colleges requires considerable organizational change, which is occurring while normal business continues. The college is currently undergoing a year of transition, during which the staff are working to establish two new head offices -- one in Fort Smith and one in Iqaluit - while

Page 130

continuing to administer college operations in the current headquarters in Yellowknife.

The first phase of the transition has already been completed, with the transfer of responsibilities for financial administration to the new head offices in November.

Other college staff will begin work in the new head office locations during the first half of 1994. Mr. Speaker, there is still much to be done to establish two colleges in the Northwest Territories, but this work is well under way and will be completed in the coming months. Thank you, Mr. Speaker.

MR. SPEAKER:

Thank you, Mr. Nerysoo. Item 2, Ministers' statements. Item 3, Members' statements. Mrs. Marie-Jewell.

ITEM 3: MEMBERS' STATEMENTS

Member's Statement On Dissatisfaction With Accuracy Of Information Re Iqaluit Situation

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. Mr. Speaker, on behalf of the Members of the Ordinary Members' Caucus, I want to advise this House that Members are very concerned about the process which took place leading to the dissolution of the town of Iqaluit. The chronology of events tabled in this House yesterday, the various answers given to this House on this issue, and news reports call into question the accuracy of information we have received to date.

Our perception of the chronology of events is as follows. The previous Minister of MACA brought forth an option paper on Iqaluit to FMB on September 22. Departmental officials, who had worked on the issues and situation in Iqaluit, did not recommend the dissolution of the town council. However, Cabinet advice regarding the indication of clause 192 of the Chartered Communities Act was given. As a result of

the Cabinet's advice, the town council was dissolved by the Minister.

Mr. Speaker, the decision to dissolve the town council was made on November 5 and the MLA for the Iqaluit riding was not informed until November 12, one week later. To date, Mr. Speaker, no clear explanation has yet to be given as to the reason the MLA was not informed. Press reports suggest that the Minister was told by Cabinet not to inform the MLA about the dissolution of the town council and the appointment of the public administrator.

Mr. Speaker, Members of the Ordinary Members' Caucus are very concerned and disappointed with the chronology of events tabled in this House. The Premier stated in this House that a detailed chronology would be made available. This document is vague at best.

Ordinary Members will pursue this issue in the House until the truth and the facts are obtained. This is a very serious matter, Mr. Speaker, and we hope to get to the heart of it. Thank you.

MR. SPEAKER:

Item 3, Members' statements. Mr. Whitford.

Member's Statement On 15th Anniversary Of Federation Franco-Tenoise

MR. WHITFORD:

(Translation) Thank you, Mr. Speaker. I would like to make my speech in English. Thank you. (Translation ends)

Mr. Speaker, on November 2, I had the honour of addressing the Federation Franco-Tenoise at their annual general assembly, to mark the 15 anniversary of their founding. This was on behalf of the Premier and it was quite an honour, Mr. Speaker. I would like to share with you what I said that day in recognition of the 15 years. I said, "As you know, Members of the Legislative Assembly act somewhat differently than other legislators, as we are part of a consensus government. This means that Members will join in support of causes which unite us all. Language does unite us all. Many of us are minority language speakers and most of us use a language other than our mother tongue to communicate with others. This is why I must speak to you in English, as my French would not help us communicate."

---Laughter

"FFT has been a common and consistent element over the past 15 years, which francophones in the Northwest Territories have identified with and have been identified by. Much has happened since its beginning. As we know here in the NWT, we have an Official Languages Act, which gives French, aboriginal languages and English, equal status. This represents the biggest step taken toward multilingualism made by any province or territory in Canada to date. The recognition of the rights of francophones was an important factor in the adoption of the Official Languages Act. This act provides for many government services to be offered to the public in French. These services cover a wide range of government activities such as interpretation of debates in this legislature, the erection of signs and the presence of bilingual staff in many hospitals." Mr. Speaker, I seek unanimous consent to continue my speech.

MR. SPEAKER:

The honourable Member is seeking unanimous consent. Are there any nays? There are no nays. Please proceed, Mr. Whitford.

MR. WHITFORD:

Merci, Monsieur President. "These, however, do not quite accurately reflect the important role that the FFT has played in the ever-changing and growing society of the Northwest Territories. FFT has done much more than just lobby the government for services and resources. It has cooperated with the Government of the Northwest Territories in implementing its French language programs. More than that, the FFT has been the catalyst for many francophones in other NWT communities. Over the years, and thanks to the efforts of the FFT and its members, the NWT can pride itself with having a French language newspaper, L'Aquilon, community theatres and also a French school and day care. During the past 15 years, much has been done to make Francophone language and culture a positive presence in the NWT. The north will change over the next decade. Nunavut, for example, is one of the major upcoming positive changes. And the Francophone community will also change to reflect a new northern reality and the changing needs of the francophones it represents. Regardless of the choices we make, it is hoped that the FFT

Page 131

will continue its part in one of the most unique, multi-lingual societies in Canada. I would like to take this

opportunity to recognize the energy and commitment demonstrated by the members of the FFT in the past 15 years. (Translation) Good luck for another successful year. Thank you."

---Applause

MR. SPEAKER:

Thank you, Mr. Whitford. Item 3, Members' statements. Mr. Gargan.

Member's Statement Re Truckers Operating On Highways

MR. GARGAN:

Mr. Speaker, I was going to make a statement on aboriginal policing, but the information that I gave to research didn't reflect what I was going to say. So I will do one on trucking.

Today I wish to speak on some of the regulations that affect truckers operating on highways in the Northwest Territories. I believe some of these regulations do not deal realistically with operating conditions found in the Northwest Territories during its short construction season. For example, truckers who are working on a construction project are only allowed to work 70 hours per week before they must take a day off. Persons working as grader or bulldozer operators can work 12 hours per day, seven days a week for a total of 84 hours without taking a break or taking a day off. They are working on the highway. They are working for the same contractor.

In Alberta, truckers can work up to 13 hours per day, seven days a week if they have the right exemption from the Alberta Labour Board. Why can't we have something like that, except that we limit it to vehicles working on construction projects only? In the winter-time the government has made allowance for truck drivers involved in winter road hauls because of the short season. Why can't we do the same for truck drivers involved in the equally short construction season?

Now, you might say that the truckers have to be restricted in the amount of hours they work in the interest of highway safety. But, I submit that we are not dealing with long-haul drivers who need to be legislated, as to how much they work, to keep the road safe for all of us. We are dealing with a group of drivers who drive from the gravel pile to the job site, a distance that is rarely more than ten miles away.

They are already in the construction zone. People should be watching for them.

I think with a little bit of common sense, we can deal with the problem of how many hours a truck driver can work in the Northwest Territories.

Another thing about the regulations that govern truck drivers in the Northwest Territories...

MR. SPEAKER:

Mr. Gargan, your allotted time has elapsed.

MR. GARGAN:

Mr. Speaker, I would like unanimous consent to continue my statement.

MR. SPEAKER:

The honourable Member is seeking unanimous consent. Are there any nays? There are no nays. Please proceed, Mr. Gargan.

MR. GARGAN:

Thank you, Mr. Speaker and honourable Members. Another thing about the regulations that govern truckers in the Northwest Territories -- that doesn't make much sense -- are the rules that govern running overweight. I can see obtaining an overweight certificate to run a heavy load from Hay River to Yellowknife. But, to have to obtain a certificate to run a load of gravel ten miles down the road is ridiculous, especially when the gravel truck operator is working on a government project.

Nine times out of ten, the roads the gravel truck drivers are driving over are going to be reconstructed that summer anyway. There is no way that a trucker can do any permanent harm. I think that if the Department of Transportation engineers running the job concur that truckers should be allowed to run overweight in a construction zone, they should be allowed to do so. This Member's statement will serve as formal notice that I intend to address these problems to the satisfaction of myself and the truckers. Mahsi cho.

---Applause.

MR. SPEAKER:

Thank you, Mr. Gargan. Item 3, Members' statements. Mr. Pudlat.

Member's Statement On The Late Tommy Manning

MR. PUDLAT:

(Translation) Thank you, Mr. Speaker. I am bearing sad news in my statement. Recently a person passed away due to illness. He was in his prime. His name was Tommy Manning. I'm not trying to remind his relatives of his death, but Tommy Manning was well-known within the NWT. He worked in the territories for a long time. He began his employment with the Hudson's Bay Company, now known as Northern Stores, many years ago. We send our condolences to his family and to his children, and especially to Joe Arlooktoo, his younger brother, who was a previous Member of the Legislative Assembly.

I stand before you, Mr. Speaker, to remember this person who worked with a great many of the people of the eastern Arctic and who was well-known. He was especially helpful as an interpreter for many of us who are unable to speak or understand English. He was helpful right up to the day of his death. Mr. Speaker, in closing I want to remind people to think about his family and the contributions that he made during his lifetime. Thank you, Mr. Speaker.

MR. SPEAKER:

Thank you, Mr. Pudlat. I would like to take this opportunity to welcome to the Legislative Assembly delegates attending the Keeping the Circle Strong in Northern Communities conference. Welcome to the Assembly.

---Applause

Item 3, Members' statements. Mr. Antoine.

Member's Statement Re Concerns Of Alcohol And Drug Workers

MR. ANTOINE:

Thank you, Mr. Speaker. Mr. Speaker, community people and leaders of the Legislative Assembly are all aware of the problems that exist with substance abuse. I just want to say something about the community workers who

Page 132

deal with this issue. It is a very frustrating problem. I'm told there are many problems that exist in dealing in this field. One of the frustrating problems that front line workers have is dealing with the Department of

Social Services and their staff at the headquarters level.

It has to do with the policy that they follow in the field of alcohol and drugs. I am told that the Department of Social Services is following recommendations that were made at a conference in Fort Churchill, Manitoba in 1984. This is what their policy in dealing with alcohol and drugs is based on.

Since that time, Mr. Speaker, many people in the communities of the north have taken up sobriety and are working in the field of healing their communities and in alcohol and drug awareness. Since that time, there have been many conferences on alcohol and drugs and related problems. A lot of important discussions have taken place and a lot of recommendations have been made about how best to deal with these problems.

The community people that work in this field are basing their recommendations on real experiences at the community level and I feel they are not being listened to by the department. One of the general questions I have is why have these conferences when their directions and recommendations are not taken seriously by officials in the Department of Social Services?

For example, last March when this House was still in the former building, there was a conference during session which I attended. I recall that many important recommendations on alcohol and drug treatment were made at that time. Since that time, a number of other workshops have taken place and again, recommendations have been made. Now, this week, there is another conference that was announced by the Minister...

MR. SPEAKER:

Your allotted time has elapsed, Mr. Antoine.

MR. ANTOINE:

I seek unanimous consent to conclude my statement.

MR. SPEAKER:

Please stand up, Mr. Antoine.

MR. ANTOINE:

I seek unanimous consent to conclude my statement.

MR. SPEAKER:

The honourable Member is seeking unanimous consent. Are there any nays? There are no nays. Please proceed, Mr. Antoine.

MR. ANTOINE:

Thank you. Now this week there is another drug and alcohol conference, as announced by the Honourable Rebecca Mike, called Keeping the Circle Strong in Northern Communities conference. All Members here support this and have agreed to keep the circle strong in our communities, Mr. Speaker. To make it even stronger, people who work on the front lines in this area draw from the experience and the recommendations that are made to try to better deal with the very real and serious problems in our communities.

However, the Members are concerned that our people in the field are getting frustrated with the lack of action on the recommendations they have made at these conferences. Mahsi.

---Applause

MR. SPEAKER:

Thank you, Mr. Antoine. Item 3, Members' statements. Mr. Ng.

Member's Statement Re Lack Of Education And Training For Employment

MR. NG:

Thank you, Mr. Speaker. Many of us recognize the importance of human resources as our most valuable asset. Generally, the NWT has a very young, undereducated, undertrained workforce. A small majority of us are fortunate to have employment with municipal or territorial governments, local housing associations or other government funded and sponsored organizations, or the private sector.

Mr. Speaker, unfortunately most of our residents do not have the education or training necessary to enter into the technical or senior management level positions that are currently filled from outside our communities, our regions and our territory.

Although we appreciate individuals relocating to the NWT when they fill the available employment opportunities, we should be filling these positions from our own available human resource pool. Mr. Speaker, there will be many more employment opportunities available with the future development of

mines and the establishment of two new territories in 1999. There are also hundreds of jobs that turn over within our current government. Our government must address the education and training needs of our existing and future workforce as its first priority. We must be prepared, in the immediate future, to fill a majority of employment opportunities from our own residents.

Mr. Speaker, we must invest the time and resources today in supporting our residents to acquire the education and training they need to participate in our northern economy in the future. Thank you.

---Applause

MR. SPEAKER:

Thank you, Mr. Ng. Item 3, Members' statements.
Mr. Koe.

Member's Statement On Work Of Special Committee
On Health And Social Services

MR. KOE:

Mahsi, Mr. Speaker. For the past year and a half, I've been a Member of the Special Committee on Health and Social Services. As a Member, I've had the privilege and opportunity to once again visit parts of our wonderful Northwest Territories.

I wish to thank all Members of the committee with whom I have travelled and worked, and all the staff who helped arrange our meetings, conferences and travel. I also wish to thank all the people with whom I've met and talked, and appreciate the trust which they have demonstrated in us and in our system to make changes.

Page 133

Mr. Speaker, I'd like to pass on some of my thoughts and impressions about our visits and meetings across the north. We have such a wonderful, beautiful, diverse country and the people who live in the various regions all identify with and appreciate where they live. However, they don't all live as happily and content as we are sometimes lead to believe.

The special report of the Special Committee on Health and Social Services which was tabled last week, identifies most of the issues and concerns raised by the people with whom we met. I know it doesn't cover every issue, but I am satisfied that the issues and recommendations, if accepted and

implemented, will have some far-reaching and long lasting impacts on the quality of life of our residents.

Mr. Speaker, there is a lot of hurt and a lot of pain out there. People are now beginning to cry out and reach for help. They rely heavily, and in most cases too much so, on government programs and services. Much of our society is totally dependent on government. I believe it is up to this Assembly, with the responsibilities and authority that it carries, to take a good, hard look at what is recommended by the people of the north, and begin immediately to start resolving the issues. One of the first ways of doing this is to begin to give the people in the communities and regions the authority and tools to take over the governing of their own lives. Mahsi.

---Applause

MR. SPEAKER:

Thank you, Mr. Koe. Item 3, Members' statements.
Mr. Patterson.

Member's Statement On Young Offenders On The
Land Programs

MR. PATTERSON:

Thank you, Mr. Speaker. Members will know that I've been a strong advocate of helping young offenders to gain knowledge of hunting and survival outdoors, and to regain pride and self-esteem through programs on the land. I believe incarceration in institutions in town should be avoided wherever possible, especially for young aboriginal people who are first offenders. I believe many of our elders are able and willing to look after young people in trouble.

At the last session, I expressed my strong support for the proposal of Atamie Family Enterprises to revive the highly successful Mingotuk outpost camp young offenders' proposal at Tonqait on the shores of Frobisher Bay. I rise today to commend the Minister of Justice and his staff, particularly Nora Sanders, Mary Lou Sutton-Fennel and Bob Cooke, for having had the determination to reconfigure existing institutional programs and funds to allow the on the land program to be revived and offered as an option to young offenders from Iqaluit and the Baffin region.

I thank the Minister for believing in the capability of Lucassie and Inookie to offer a meaningful program based on their vast knowledge of the land and Inuit tradition. The program began operations in September. It is running well. I hope it will continue

and that it will be an inspiration to the Minister of Justice, his department and other communities to do the same elsewhere. Qujannamiik.

---Applause

MR. SPEAKER:

Thank you, Mr. Patterson. Item 3, Members' statements.

Member's Statement On Victims Of Family Violence

MR. LEWIS:

Thank you, Mr. Speaker. I am aware that what I have to say has to be very carefully worded, since it covers a subject which is of tremendous political sensitivity in our communities. I agree that the major issues in many of our communities over the last several years, Mr. Speaker, have been on family violence. It has been covered by one of the reports tabled by Mr. Kakfwi yesterday. It concerns women and children as victims of violence. I agree that violence against women and children in our society is a symptom of the breakdown of many of our traditional family values. Over the past six years, however, I have received much information expressing concern about two other groups of very vulnerable people in our society. I refer to our senior citizens and to our disabled people. These groups are not always identified as victims of violence. But I am pleased, in the case of our seniors, that they are identified in our Special Committee on Health and Social Services report as being victims of violence. I fully appreciate that this is going to be given some exposure in the debates in this House.

It is my hope that when witnesses are called to comment on the issue of family violence in committee of the whole, that the Minister will invite representatives of disabled people and senior citizens to help us more fully understand the dimensions of family violence. When we discuss the whole issue of zero tolerance towards violence, we will come up with something that is very definite and concrete so we can understand how we intend to implement such a policy.

For example, in this House, if I am violent the Speaker will make sure that the Sergeant-at-Arms will take me out of this place. I will not be able to sit here. That is an example of something definite and concrete. So I am hoping that when we get to this

issue, we will nail down what it is we can do to find some resolution to the problem of family violence.

---Applause

MR. SPEAKER:

Thank you, Mr. Lewis. Item 3, Members' statements. Mr. Arngna'naaq.

Member's Statement On Cultural Inclusion Programs

MR. ARNGNA'NAAQ:

Thank you, Mr. Speaker. I would like to speak about an issue which I have raised in this House a number of times. This concern relates to the cultural inclusion programs in the schools. This is one of the major concerns raised by the people of my riding over the past two years. The general feeling is we are trying to push our children through a system, which conflicts in many ways with our own cultural beliefs. The manner in which our culture is trying to be taught to our children is not sufficient. Our traditional life-style or culture was never taught inside buildings, let alone classrooms. They were taught on site, which means they were taught on the land. The basic idea behind this is to remove the culture inclusion program from the schools and transfer them to local ethnic committees.

Page 134

This move will give back to the aboriginal peoples the ability to teach their children their traditional lifestyle. There are many occasions where young people do not have anything to fall back on when they have exhausted their imported skills. Mr. Speaker, many young people learn their traditional skills in an environment which is not conducive to their culture, therefore they try to fall back on their own culture by trying out their abilities on the land.

However, because their knowledge of the land has been limited to what they learned inside buildings, they are not able to succeed. When young people go out on the land, the parents end up worried about their hunters, rather than looking forward to welcomed meat -- which by the way, supplements much of their social assistance.

I know that the Department of Education has many concerns about the ability to insure students who are not within their realm. However, I know the Minister responsible has encountered a number of very complex problems and has been able to resolve

them. I believe he would be able to find a way around this issue. There has to be a way around this issue. There are a number of programs currently run by organizations such as the YWCA, Boy Scouts of Canada and Royal Canadian Army Cadet Corps which are run on the land.

I also know that the Department of Municipal and Community Affairs would appreciate knowing that they will have less to expend on searches.

MR. SPEAKER:

Mr. Arngna'naaq, your allotted time has elapsed.

MR. ARNGNA'NAAQ:

I seek unanimous consent to finish my statement.

MR. SPEAKER:

The honourable Member is seeking unanimous consent. Are there any nays? There are no nays. Please proceed, Mr. Arngna'naaq.

MR. ARNGNA'NAAQ:

Thank you, colleagues and Mr. Speaker. Mr. Speaker, I have stated that if an organization were to take on this responsibility, students in different classes would be able to go to a learning camp at different times of the year. For example, older students would go when it is colder and younger students would go early in the school year or late in the year when the weather is warmer. The other effect this will have is that it will leave schools more time to teach the southern curriculum.

I give this, once again, to the Minister for his consideration. Thank you, Mr. Speaker.

---Applause

MR. SPEAKER:

Thank you, Mr. Arngna'naaq. Item 3, Members' Statements. Item 4, returns to oral questions. Mr. Todd.

ITEM 4: RETURNS TO ORAL QUESTIONS

Further Return To Oral Question 55-12(4):
Water/Sewage Services Subsidy Program

HON. JOHN TODD:

Thank you, Mr. Speaker. I have two returns. I have a return to an oral question made by my colleague, Mr. Antoine, yesterday, regarding the water/sewage service subsidy program in the village of Fort Simpson. The Executive Council has approved amendments to the water/sewage services subsidy policy which will extend the coverage of the policy to all towns and villages, including the village of Fort Simpson, effective April 1, 1994.

Further Return To Oral Question 59-12(4): WCB
Outstanding Appeals

Similarly, there are no time frames imposed on injured workers, dependents or employers in which to file an appeal. The delays in the appeals tribunal hearing cases is regrettable. However, they do not violate the provisions of the Workers' Compensation Act, the rules of the court, or the charter. Nevertheless, the board and the appeals tribunal are concerned about the length of time taken to hear appeals. In an effort to streamline the process, a proposal from the appeals tribunal chairman, Mr. Jim Bourque, is before the board of directors at their meeting this week.

This proposal would allow the appeals tribunal to sit full time for a six month period, in an effort to resolve the backlog of appeals. Thank you.

---Applause

MR. SPEAKER:

Item 4, returns to oral questions. Mr. Pollard.

Further Return To Question 19-12(4): Memorandum
Of Understanding

HON. JOHN POLLARD:

Thank you, Mr. Speaker. Mr. Speaker, this is the return to a question asked by Mr. Koe on November 9, 1993. It concerns a memorandum of understanding. Mr. Speaker, the Department of Health is collaborating with health and hospital boards and the

Page 135

Northwest Territories Health Care Association (NWTTHCA) on the development of the memorandum of understanding (MOU). A joint steering committee consisting of representatives from the boards, NWTTHCA, and the department is guiding the process.

Western Health Planning Associates were awarded the contract in May, 1993. The consultants have met with key stakeholders from the health and hospital boards and the department. Background materials and a framework for the draft MOU have been developed by the steering committee. These consist of a preamble, explanatory notes, a core agreement, appendices relating to specific board agreements, references to legislation and other details.

The steering committee will meet in December 1993, to review progress. The draft MOU is scheduled for completion January 31, 1994, and will be discussed at a meeting between myself, the board chairpersons and the department in January.

I would be pleased to provide the honourable Member with additional information as it becomes available. Thank you, Mr. Speaker.

MR. SPEAKER:

Item 4, returns to oral questions. Item 5, oral questions. Mrs. Marie-Jewell.

ITEM 5: ORAL QUESTIONS

Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. Mr. Speaker, in reviewing the unedited Hansard on Thursday, November 18, 1993 and subsequent Hansards up to this date, it was stated in this House last week that -- on the advice of Cabinet -- the former Minister of MACA was to close the town of Iqaluit down. My question is to the Premier. Can the Premier advise this House why was it not part of the Cabinet's advice to inform the local MLA prior to the action taken? Thank you.

MR. SPEAKER:

Madam Premier.

Return To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, the decision to take the action that the previous Minister took was the previous Minister's decision. The Cabinet was not involved with the decision, as a decision. We were fully aware of the course the Minister was taking. The Minister made

the decision. We did not make a subsequent decision at Cabinet. We were informed of the course that the Minister was taking. Thank you.

MR. SPEAKER:

Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. I would like to quote the Honourable Nellie Cournoyea from page 45 of the unedited Hansard of Thursday, November 18. Her answer was, "Mr. Speaker, the decision and the option chosen was by the Minister of MACA who sought the advice of Cabinet." I recognize that the former Minister of MACA made the decision to close the town of Iqaluit, but it was upon the advice of Cabinet, according to the unedited Hansards.

Therefore, I would like to ask the Premier why was it not part of the advice -- that she stated in the House, according to the unedited Hansard -- to tell the local MLA about such a significant decision made by one of her Ministers? Why was it not part of that advice when they were discussing this issue? Thank you.

MR. SPEAKER:

Madam Premier.

Further Return To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, although the Minister may have sought the advice of Cabinet, the Minister made the decision on the course of action he wished to take. It was taken for granted that the Minister would inform the MLA or the people who are involved with the action. Thank you.

MR. SPEAKER:

Item 5, oral questions. Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

MRS. MARIE-JEWELL:

Thank you, supplementary Mr. Speaker. Mr. Speaker, the decision was significant and no doubt it may have been that the Cabinet and the Premier took it for granted that this decision would be relayed to the local MLAs. However, we now know the local MLA was not aware of the decision until a week later and it appears there must have been a severe communication breakdown somewhere in the process. So, I would like to ask the Premier, on significant decisions to close down a town, is there not a process in her Cabinet to ensure local MLAs are advised of such decisions. Thank you.

MR. SPEAKER:

Madam Premier.

Further Return To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, to our knowledge the Minister was going to inform the MLA. We admit that there was a communication breakdown and that the MLA was not informed probably soon enough and we apologize for that, Mr. Speaker. We acknowledge that there was a communication breakdown, and both the former Minister and myself apologize. Thank you.

MR. SPEAKER:

Item 5, oral questions. Final supplementary, Mrs. Marie-Jewell.

Supplementary To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

MRS. MARIE-JEWELL:

Thank you. Final supplementary, Mr. Speaker. I want Members to be aware and especially you, Mr. Speaker, that I know the rules of this House do not allow us to

Page 136

ask for discussion which took place in Cabinet meetings, but I'd like to ask the Premier, in addition to the advice of Cabinet to close down a town, was it also the advice of Cabinet not to inform this MLA for Iqaluit. Thank you.

MR. SPEAKER:

Madam Premier.

Further Return To Question 69-12(4): Cabinet's Direction On Informing MLA Re Iqaluit Situation

HON. NELLIE COURNOYEA:

(Microphone turned off)

MR. SPEAKER:

Item 5, oral questions. Mr. Patterson.

Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

MR. PATTERSON:

Thank you, Mr. Speaker. Again, with reference to the decision to dissolve the council of the town of Iqaluit, my question is to the Premier. Mr. Speaker, is it true that the Department of Municipal and Community Affairs advised against dissolving the council of the town of Iqaluit? Thank you.

MR. SPEAKER:

Madam Premier.

Return To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, the Minister informed us of the decision he had made and the best course of action to take, or he was taking. The other options, or if there were options at the time, we were advised of the decision the Minister took. Thank you.

MR. SPEAKER:

Supplementary, Mr. Patterson.

Supplementary To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

MR. PATTERSON:

Mr. Speaker, I'm not referring to advice given by the Minister. This was a grave matter, I presume the Premier would agree. A matter not to be taken lightly, especially the week before an Assembly session and a Cabinet review. I'd like to ask the Premier again, did the Department of Municipal and Community Affairs and the deputy minister -- who is ultimately accountable to the Premier -- advise against the option of dissolving the council of the town of Iqaluit?

MR. SPEAKER:

Madam Premier.

Further Return To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, at the time, the Minister advised of the best course of action he thought should be taken. The Minister, upon his familiarity with the subject over a number of years, took that course of action. The other options were disregarded because that option was the desired option and what the Minister felt was the appropriate option at this time. Thank you.

MR. SPEAKER:

Supplementary, Mr. Patterson.

Supplementary To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

MR. PATTERSON:

Mr. Speaker, I'm sure the Premier is aware that in the November 19 issue of Nunatsiaq News, the deputy minister of MACA -- who was appointed by the Premier and is ultimately accountable to the Premier - is quoted as saying that his department had nothing to do with Cabinet's decision. The action Cabinet took was a "surprise" to him and that "we didn't recommend it." Is this an accurate description of the advice given by the Department of Municipal and Community Affairs who had been working intensively on this issue, according to the chronology, since 1987, and certainly intensively in recent months. Is this the advice given by the Department of Municipal Affairs on this issue, not to dissolve the council? Thank you.

MR. SPEAKER:

I'd like to remind Members that Ministers can't be expected to confirm or deny the validity of newspaper articles. Having said that, Madam Premier, if you like to respond to the question.

Further Return To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, I was just going to say the same thing. I can't confirm or express an opinion on a newspaper article. Thank you.

MR. SPEAKER:

Oral questions. Your final supplementary, Mr. Patterson.

Supplementary To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

MR. PATTERSON:

Mr. Speaker, then my question to the Premier is, on such an important matter -- the dissolution of the second largest municipality in the Northwest Territories -- in considering the matter and in considering how to advise the Minister of Municipal and Community Affairs who the Premier has already said sought the advice of Cabinet, did the Cabinet seek advice, on such an important matter, from the Department of Municipal and Community Affairs who have been intensely involved with this issue in making their decision? Thank you.

MR. SPEAKER:

Madam Premier.

Further Return To Question 70-12(4): DM's And Department's Advice On Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, the Minister represented the department. The Minister is in charge of the department and the Minister advised us the course of action he felt -- in the best of his ability in dealing with the issue over a long period of time -- he would take. That was the advice, or not even the advice, but that is what he indicated or he said was the direction he was going to take. The Minister is responsible and I know he was dealing with this issue for a long period of time. I believe at some point in time we have to take what the Minister feels is the best course of action. The Minister represented the situation over a period of time, and at the time he told us what he was going to do. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mr. Zoe.

Question 71-12(4): Reason For Iqaluit SAO Being Replaced

MR. ZOE:

Thank you, Mr. Speaker. Mr. Speaker, it's my understanding that the first action that the administrator who was appointed to the town of Iqaluit was to dismiss the current SAO, or senior administrative officer. Mr. Speaker, this action suggests that the administrator is perceived to have been the problem. My question to the Minister, or to the Premier, or to the Minister of Municipal and Community Affairs is, if the SAO was the problem why weren't efforts made to have the SAO replaced by council as a condition of the approval of the debenture refinancing proposal?

MR. SPEAKER:

Madam Premier.

Return To Question 71-12(4): Reason For Iqaluit SAO Being Replaced

HON. NELLIE COURNOYEA:

Mr. Speaker, we acknowledge there was a problem, and I believe the chronology would show as well, there were difficulties that we have had with the administrative arrangements of the town of Iqaluit. The Minister responsible at that time was also taking into consideration that problem when he made his decision. Thank you.

MR. SPEAKER:

Supplementary, Mr. Zoe.

Supplementary To Question 71-12(4): Reason For Iqaluit SAO Being Replaced

MR. ZOE:

Mr. Speaker, I realize the former Minister of Municipal and Community Affairs is not in the House, but it has always been the practice of MACA to work with elected officials to take every possible step to solve problems with municipalities even before terminating an elected official. I am wondering why that option wasn't taken by the Minister responsible for Municipal and Community Affairs.

MR. SPEAKER:

Madam Premier.

Further Return To Question 71-12(4): Reason For Iqaluit SAO Being Replaced

HON. NELLIE COURNOYEA:

Mr. Speaker, the whole issue of the financial problem of Iqaluit has been going on since 1987. The Minister responsible felt he had taken every opportunity with his department to resolve the situation, other than the final action he took. I believe the work that has been done with the department can show there was a lot of effort to try to help the community to resolve those issues. I believe what may have transpired...I trusted the Minister, because of the seriousness of the situation, that all the avenues were exhausted. This is why the past Minister decided to take that action. Thank you.

MR. SPEAKER:

Supplementary, Mr. Zoe.

Supplementary To Question 71-12(4): Reason For Iqaluit SAO Being Replaced

MR. ZOE:

Mr. Speaker, with the agreement of the mayor and town council, wouldn't it have been possible to have the public administrator appointed, replacing the SAO, but at the same time preserving the elected mayor and council? Wouldn't you

agree that would have been one of the options available to the previous Minister?

MR. SPEAKER:

Madam Premier.

Further Return To Question 71-12(4): Reason For Iqaluit SAO Being Replaced

HON. NELLIE COURNOYEA:

Mr. Speaker, I would assume that might have been one of the options. But my understanding is that all the areas of trying to resolve the problem were taken over a number of years. The Minister probably looked at other options, but he decided that the situation was such that he should remove the council. Mr. Speaker, I would assume the Minister would have looked at all the options over a number of years before taking this final course of action.

MR. SPEAKER:

Item 5, oral questions. Mr. Dent.

Question 72-12(4): NWTAM Concerns Re Dissolution Of Municipalities

MR. DENT:

Thank you, Mr. Speaker. It appears the Minister of Municipal and Community Affairs would like an opportunity to get involved, so I would like to address this question to him. Mr. Speaker, I have heard from the NWT Association of Municipalities that there is concern among many of their members that what happened in Iqaluit could happen in other communities. As a former president of that association, I am sympathetic to their concerns. Particularly, I would like to ask the Minister about the process being followed by the department, which might lead to this kind of decision. Specifically, what kinds of warning signs are municipalities given that this government is considering dissolution of a local government?

MR. SPEAKER:

Mr. Todd.

Return To Question 72-12(4): NWTAM Concerns Re Dissolution Of Municipalities

HON. JOHN TODD:

Thank you, Mr. Speaker. First of all, this decision is made as a last resort, as everyone knows. It comes about after significant discussions. In the Iqaluit situation -- if I can add to the issue from what I have read in the short time I have had this portfolio, 24 hours -- there were significant discussions between the department and the municipality, its elected council and its SAO. Issues were raised with respect to the financial situation on a number of occasions. The department asked them to take corrective action. It is my understanding that corrective action wasn't taken on a number of occasions. So it is not like this came out of the blue. There were significant discussions from when Mr. Patterson was the previous Minister of MACA. There were discussions going on in 1987, 1988, 1989 and 1990. No one likes to take the action that has been taken. We had no choice. This situation has cost this government a significant amount of money. I don't know what direction the department is going to take. The fact of the matter is we are in a position where we have to take the appropriate action that is deemed necessary to protect the interest of everyone in the Northwest

Territories. That is what is being done here. It is certainly not the demise of democracy.

Page 138

MR. SPEAKER:

Supplementary, Mr. Dent.

Supplementary To Question 72-12(4): NWTAM Concerns Re Dissolution Of Municipalities

MR. DENT:

Thank you, Mr. Speaker. It is interesting that the Minister does say, "We had no choice." I am not sure if he was speaking royally or for the Cabinet.

HON. JOHN TODD:

(Microphone turned off)

MR. DENT:

I think the important thing is other municipalities want to know that there is a process. As we recently saw, there is significant power within the government which can be exercised very quickly. Surely it would be of benefit for all concerned to have a better understanding of how and when the government might take this sort of action to dissolve a council. Specifically, what we need is a policy. Will the Minister consider preparing a policy that would set up the process and guidelines to be followed by government officials, when proposing to take action with respect to the removal of a municipal council and/or their administration?

MR. SPEAKER:

Mr. Todd.

HON. JOHN TODD:

Again, I say to the honourable Member, I have had this portfolio for 24 hours, I will take his question...

MR. SPEAKER:

Point of order, Mrs. Marie-Jewell.

Point Of Order

MRS. MARIE-JEWELL:

With respect to my point of order, the Member is indicating to this House that he has had this portfolio

for the past 24 hours. I believe he has been the Minister of MACA for 48 hours. Thank you.

---Applause

MR. SPEAKER:

It is not a point of order, but thank you for that information, Mrs. Marie-Jewell.

HON. JOHN TODD:

I was thinking, Mr. Speaker, of 24 waking hours.

---Laughter

Further Return To Question 72-12(4): NWTAM Concerns Re Dissolutions Of Municipalities

I think it is an important point that Mr. Dent has raised. It obviously has ramifications across the territories and no one is denying the seriousness of the issue. I will take his question under consideration and talk to the department. If there is not a process in place, we will attempt to bring back an answer to his question in the next two days. Thank you.

MR. SPEAKER:

Supplementary, Mr. Dent.

Supplementary To Question 72-12(4): NWTAM Concerns Re Dissolution Of Municipalities

MR. DENT:

Thank you, Mr. Speaker. I take it that the Minister didn't take my question as notice because he didn't use those words. I have a supplementary for the same Minister. Municipalities are unaware of any clear policy within the department which sets out how this process might take place, so that is one thing they do want to see. I am pleased to hear that he will take a look at it.

One other thing I would like to ask the Minister to consider is, will he consider recommending to his department to proceed with amendments to the legislation which would allow for a process of mediation before a dissolution of a council or administration could take place?

MR. SPEAKER:

Mr. Todd.

Further Return To Question 72-12(4): NWTAM Concerns Re Dissolutions Of Municipalities

HON. JOHN TODD:

I will consider it. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mr. Lewis.

Question 73-12(4): Options Open To Minister Of MACA Re Iqaluit Situation

MR. LEWIS:

Thank you, Mr. Speaker. From my examination of the chronology of events related to the dismissal of the mayor and council in Iqaluit, it seems as if there was considerable discussion in March and there was an exchange again in April. On both of these occasions the local MLA was informed. He was given letters to explain exactly what was going on.

This eventually led to a decision time. On September 22, a submission was made to the Financial Management Board to refinance the Iqaluit land development debentures. My question to the Minister of MACA is what options -- given the fact that the refinancing was turned down for this debenture -- did the Minister of MACA have?

MR. SPEAKER:

Mr. Todd.

HON. JOHN TODD:

I don't particularly like this, Mr. Speaker, but I would have to take that question as notice. Sorry.

MR. SPEAKER:

The question has been taken as notice. Item 5, oral questions. Mr. Ng.

Question 74-12(4): Reason For Timing On Iqaluit Decision

MR. NG:

Thank you, Mr. Speaker. My question is to the Premier. According to the information we have been provided with, in the chronology of events, the action of dissolving the town council in Iqaluit could have actually happened prior to December 31, because that was when the debenture was due for payment.

Why was the situation so drastic that Cabinet had to do this prior to the sitting of this House?

MR. SPEAKER:

Madam Premier.

Return To Question 74-12(4): Reason For Timing On Iqaluit Decision

HON. NELLIE COURNOYEA:

Mr. Speaker, the direction the Minister took was the direction he felt was necessary. Exactly

Page 139

why the timing was what it was...I would like to inform the Members of the Legislative Assembly that the chronology was put together at my request by the former Minister and his staff, because of the concerns around this issue. So, in terms of how and when and why it didn't happen before December 31, sometimes we are not in control of the timing. I know that, certainly, with the financial state of the community, there was some urgency pressed upon us to deal with that.

I suppose we could put off these decisions until a more politically appropriate time, after the session or after the mid term review, but at the time that the Minister made the decision, he felt it was imperative that we deal with it. It was important enough, so he did so. Thank you.

MR. SPEAKER:

Supplementary, Mr. Ng.

Supplementary To Question 74-12(4): Reason For Timing On Iqaluit Situation

MR. NG:

Madam Premier, was there not ample opportunity to brief the MLA prior to the decision being made, or to work with the municipal council in trying to rectify the problem before that action had to be taken?

MR. SPEAKER:

Madam Premier.

Further Return To Question 74-12(4): Reason For Timing On Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, my understanding is that over a number of years and up to that time, the department and the Minister had spent a great deal of time working with the council trying to resolve the issue. As I have said before, we apologize. Yes, we could have informed the Member. We have apologized for that and we acknowledge that we could have communicated a lot sooner. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mr. Lewis.

Question 75-12(4): Financial Options Available Re Iqaluit Situation

MR. LEWIS:

Thank you, Mr. Speaker. I appreciate that Mr. Todd has only been in his job for 48 hours, so I would like to ask the Chairman of the Financial Management Board, when Mr. Allooloo was turned down on his submission to refinance the Iqaluit land development debenture on September 22, what options did he have? This debenture had to be refinanced by December 31, of this year.

MR. SPEAKER:

Mr. Pollard.

Return To Question 75-12(4): 75-12(4): Financial Options Available Re Iqaluit Situation

HON. JOHN POLLARD:

Mr. Speaker, there was no question that the Department of Finance realized that Iqaluit could not meet its financial obligations. This was the issue we were dealing with, but we were also aware that it was not all of the issue. We were faced with the task of having to write off some \$4 million in interest payments that the town of Iqaluit could not pay us.

We were also aware that there were some other problems at that time. We were talking about up to another \$1 million that this municipality may not be able to cover. As late as yesterday, I was told by somebody from Iqaluit -- and not a government employee, I might add -- that amount may go as high as another \$2.4 million. The Department of Finance was gravely concerned about the state of the finances of the town of Iqaluit.

To answer the specific question that Mr. Lewis has put to me through you, Mr. Speaker, Mr. Allooloo's

options were to come back to the Financial Management Board with more information. The board did not turn down the issue, simply because we knew that, sooner or later, we were going to have to make an arrangement with this particular municipality for at least \$4 million.

There was just no way they could actually pay us. We knew that. So, what we were requesting from Mr. Allooloo at that time was for the consideration and further information. We felt we did have some more time to enable him to go away and to come back with that particular submission. His options at that time were to go away and come back to us and fulfil the information that we requested. Thank you, Mr. Speaker.

MR. SPEAKER:

Supplementary, Mr. Lewis.

Supplementary To Question 75-12(4): Financial Options Available Re Iqaluit Situation

MR. LEWIS:

Thank you, Mr. Speaker. My question is again regarding the events of early to mid October, 1993. After failing to convince the Financial Management Board that this debenture issue should be resolved by helping Iqaluit get out of their financial difficulty, would the Minister not agree that the statement in the chronology of events which states that, "approval for debenture re-financing the town, it would still face financial problems," constitutes turning down the request, as he understood it?

There are other events, for example, information collected even yesterday about a further \$2 million. Would he not agree that, at the time, it was turned down and that the position that was presented to the board wasn't adequate to resolve the issue?

MR. SPEAKER:

Mr. Pollard.

Further Return To Question 75-12(4): Financial Options Available Re Iqaluit Situation

HON. JOHN POLLARD:

Mr. Speaker, when something is turned down at the Financial Management Board level and it is rejected, then it is off the table, it is gone. "No" would be the

answer, and it would be gone. In this instance, this didn't

Page 140

happen. What happened was that the issue was still alive with the Financial Management Board. It is just that, at that particular time, there was not enough information to make a decision about that issue. So, it was realized that it would have to be dealt with at a later date.

A rejection to me is when we say no, it is off the table and don't bring that thing back here any more. That didn't happen. Everyone knew that issue was going to come back to us again. So maybe I am splitting hairs, Mr. Speaker, but I cannot say it was rejected because that doesn't meet what we term a rejection at the Financial Management Board. I hope that clarifies the issue, Mr. Speaker. Thank you.

MR. SPEAKER:

Supplementary, Mr. Lewis.

Supplementary To Question 75-12(4): Financial Options Available Re Iqaluit Situation

MR. LEWIS:

All right. Assuming this was still on the table, Mr. Speaker, and it wasn't rejected, did Mr. Allooloo, at any time after that, come back to the Financial Management Board with any other proposal?

MR. SPEAKER:

Mr. Pollard.

Further Return To Question 75-12(4): Financial Options Available Re Iqaluit Situation

HON. JOHN POLLARD:

Mr. Speaker, when the issue came back, it was deemed there was sufficient information to deal with that issue at that time. FMB chose to make a decision in that regard. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mr. Patterson.

Question 76-12(4): Alternate Approaches To Resolving Iqaluit Situation

MR. PATTERSON:

Mr. Speaker, I am heartened to hear from the Premier and the new Minister of Municipal and Community Affairs that democracy would not be suspended except as a last possible resort, after all other steps had been taken. Everything I have learned about this situation, from talking to officials, is the real problem was the Department of Municipal and Community Affairs did not have confidence in the senior administrative officer in the town of Iqaluit. They acknowledge the duly elected town council had inherited a situation that had developed long before they were in office. In fact, since 1987. Given that, the Premier has said we took every last possible step. I would like to specifically ask this. Was it not available to the Cabinet to say to the Minister of Municipal and Community Affairs -- who asked their advice -- "We are prepared to provide a \$3 million or \$4 million rescue package," but to meet with the mayor and council and say, "Our people cannot work with your senior administrative officer. Deal with that person, replace that person, we will even offer you an administrator, otherwise, we are considering the drastic step of dissolving the council." Isn't that the last step that could have and should have been taken, Mr. Speaker? That is my question to the Premier. Thank you.

MR. SPEAKER:

Madam Premier.

Return To Question 76-12(4): Alternate Approaches To Resolving Iqaluit Situation

HON. NELLIE COURNOYEA:

Thank you, Mr. Speaker. The Minister responsible, at that time, made a decision because this was an outstanding, long, extended issue. To my understanding, this had previously been done. This option was offered to the council, or suggested to the council, that they must do something about that issue. I don't have the chronology, but that was also part of recommendations that had been given to the town of Iqaluit at a previous occasion. Thank you.

MR. SPEAKER:

Supplementary, Mr. Patterson.

Supplementary To Question 76-12(4): Alternate Approaches To Resolving Iqaluit Situation

MR. PATTERSON:

Mr. Speaker, is the Premier saying that the mayor of Iqaluit was asked to deal with the problem of the senior administrative officer? Were they told to replace that person or further drastic steps would be taken? Thank you.

MR. SPEAKER:

Madam Premier.

Further Return To Question 76-12(4): Alternate Approaches To Resolving Iqaluit Situation

HON. NELLIE COURNOYEA:

Mr. Speaker, the short answer is yes.

MR. SPEAKER:

Supplementary, Mr. Patterson.

Supplementary To Question 76-12(4): Alternate Approaches To Resolving Iqaluit Situation

MR. PATTERSON:

Mr. Speaker, that is not the information I have received from the mayor of Iqaluit and I will be asking him for clarification on that point. Mr. Speaker, I will leave it at that. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mr. Whitford.

Question 77-12(4): Actions By Department To Resolve French Association's Court Actions

MR. WHITFORD:

Thank you, Mr. Speaker. Mr. Speaker, earlier on today, I talked about how important official languages are in the territories. We are all aware how many we use here and how important they are to the people they serve. The French language is very important to the Francophone people who live in the Northwest Territories. It is enshrined in the Charter of Rights and Freedoms. It is requested that certain rights be respected by provinces, in relation to language. I have a question I would like to direct to the Minister of Education. In 1991, the Association des Parents Francophones de Yellowknife and the Federation Franco-Tenoise, along with section 23 of the Charter, filed a legal action against this government and Yellowknife Education District No. 1, to ensure the rights of French education, as guaranteed under

section 23 of the Canadian Charter of Rights and Freedoms, be respected in the Education Act. Mr. Minister, it is my understanding that the Department of Education is attempting to resolve this issue

Page 141

through negotiations. What action has been taken by your department to resolve this issue?

MR. SPEAKER:

Mr. Nerysoo.

Return To Question 77-12(4): Actions By Department To Resolve French Association's Court Actions

HON. RICHARD NERYSOO:

Thank you, Mr. Speaker. I appreciate the notice given by the honourable Member through his statement. The Department of Education, Culture and Employment, the Association des Parents Francophones de Yellowknife and Yellowknife Education District No. 1 have worked together in determining program funding and the government's recommendations for French first-language education in the Northwest Territories. This committee's recommendations were approved in principle by Cabinet. The proposals, which would be reflected in legislation will be included in the consultation paper, voices direction for improving the Education Act, which is planned to be released in early January. The other recommendations, which are administrative and cannot be accomplished now, are being implemented this year.

MR. SPEAKER:

Supplementary, Mr. Whitford.

Supplementary To Question 77-12(4): Actions By Department To Resolve French Association's Court Actions

MR. WHITFORD:

Thank you, Mr. Speaker. Because the Supreme Court has reinforced the constitutionality of section 23 of the Canadian Charter of Rights and Freedoms, in 1999 the province of Alberta, and later in 1993 the province of Manitoba -- both provinces which have a substantial number of French speaking people in them -- moved to establish section 23. Does this government have a comprehensive agenda to amend

the NWT Act to uphold the rights of section 23 of the Canadian Charter of Rights?

MR. SPEAKER:

Mr. Nerysoo.

Further Return To Question 77-12(4): Actions By Department To Resolve French Association's Court Actions

HON. RICHARD NERYSOO:

No, Mr. Speaker. I believe the NWT Act has already been amended to respect French and English as languages for which we are responsible, including the recognition of the Official Languages Act of the Northwest Territories, which has been approved and passed in this House. In that context, we are obligated to deal with that.

The specific issue -- the matter of French language education -- is better dealt with in the Education Act and, as such, will be part of the review and the amendments to the Education Act through which we are going to consult the people of the Northwest Territories. I indicated to the honourable Member, in early January of 1994, we will be releasing a consultation paper -- of which I was going to make a major statement in this House so that all Members would know what we were proposing to do. A consultation document called, Voices, Direction for Improving the Education Act was formulated, which we will deal with subsequently on the rights of those individuals who speak French and require education in the French language and appropriately address it in that manner.

MR. SPEAKER:

Item 5, oral questions. Supplementary, Mr. Whitford.

Supplementary To Question 77-12(4): Actions By Department To Resolve French Association's Court Actions

MR. WHITFORD:

Thank you, Mr. Speaker. I'd like to ask the Minister when the consultation process will begin. I just wondered if in fact it had already begun.

MR. SPEAKER:

Mr. Nerysoo.

Further Return To Question 77-12(4): Actions By Department To Resolve French Association's Court Actions

HON. RICHARD NERYSOO:

Thank you. I believe I should indicate, as I indicated to the honourable Member, Mr. Speaker, that the department along with the Yellowknife French Parents' Association and Yellowknife District No. 1, have already met on the matter of programming and funding and governance for French first language education. We are working with them already and are consulting with them in terms of the manner in which we can ensure that that particular area of education in the Northwest Territories is protected and enhanced through our own Education Act.

MR. SPEAKER:

Item 5, oral questions. Mr. Pudluk.

Question 78-12(4): Nanisivik Water And Sewage Disposal System

MR. PUDLUK:

(translation) Thank you, Mr. Speaker. My question is directed to Municipal and Community Affairs. The department of MACA agreed on July 21 -- I'm sorry I didn't get the date-- concerning an agreement that was recently rewritten. In November 1993, a letter was written to Dr. Allen, concerning the dumping in the sewage pipe system which had been damaged. The plumbing system was broken down and it caused a health hazard especially to the drinking water and to the disposal system. I'd like information as to whether repairs have been done to this particular plumbing system? Can we have a response? Thank you, Mr. Speaker.

MR. SPEAKER:

Minister Todd.

Return To Question 78-12(4): Nanisivik Water And Sewage Disposal System

HON. JOHN TODD:

I believe this is in the community of Nanisivik. I appreciate the concern of the honourable Member. I don't have an up to date status on the repairs on that particular water and sewer system but I will check with the department after the close of House today and get back to the Member tomorrow. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mr. Antoine.

Question 79-12(4): Alcohol And Drug Policies

MR. ANTOINE:

Thank you, Mr. Speaker. My question is for the Minister of Social Services. In regard to the alcohol and drug policy that her department is following, in my statement earlier today, I stated that the NWT alcohol and drug policy is based on a conference that took place in Fort Churchill in

Page 142

1984, that's what I'm told, and that there have been innumerable conferences since that time and the workers that are working in this field have made numerous recommendations on how to best improve these policies. However, the recommendations do not seem to be taken seriously by her department staff and incorporated into changing her policies. So, I would like to ask the Minister, what happens to the recommendations that are made at these conferences, to improve the alcohol and drug policies?

MR. SPEAKER:

Minister Mike.

HON. REBECCA MIKE:

Thank you, Mr. Speaker. I'll take the question as notice.

MR. SPEAKER:

The question has been taken as notice. Item 5, oral questions. Mr. Koe.

Question 80-12(4): Provision Of ED&T Organizational Review Executive Summary

MR. KOE:

Mr. Speaker. I would like to make reference to the Minister's statement today on the operational review of Economic Development and Tourism. I appreciate the action taken by the Minister and I support a lot of the changes in that statement. However, Mr. Speaker, on page two the Minister states that, and I quote "I will be providing copies of the executive summary of this review to the Standing Committee on

Finance". A lot of Members in this House are not on the Standing Committee on Finance. So, I would like to ask the Minister, will he provide copies of the summary to other Members of this assembly?

MR. SPEAKER:

Minister Todd.

Return To Question 80-12(4): Provision Of ED&T Organizational Review Executive Summary

HON. JOHN TODD:

I will provide this as it certainly wasn't my intention just to provide it to the Standing Committee on Finance. Old habits die hard I guess, but I'll ensure the honourable Member that all Members will be provided with the executive summary and if they want the full report, they will be welcome to have it. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mrs. Marie-Jewell.

Question 81-12(4): User Fee Policy For Seniors

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. My question, Mr. Speaker, is to the Minister of Health. Mr. Speaker, yesterday I had made a Member's statement in respect to the new policy which was adopted by the Department of Health last June. Basically in regard to user fees imposed on seniors in the Northwest Territories. I'd like to ask the Minister of Health, will he review the existing policy to eliminate this user fee which is imposed on elders in the territories, with the view to ensure that seniors can have medical examinations every year, without fearing a fee to be paid? Thank you.

MR. SPEAKER:

Minister Pollard.

Return To Question 81-12(4): User Fee Policy For Seniors

HON. JOHN POLLARD:

Thank you, Mr. Speaker. Mr. Speaker, at the present time there has been no change in policy. There was a renegotiation with medical professionals in the Northwest Territories with regard to fees paid to them

and I'm aware at the present time that if you're an elder, if you're a senior citizen, 65 years or greater, that at the present time you may only get one check-up every two years. I listened yesterday to the Member's statement. Her statement concerned me as well and I would advise the Member and this House, through you Mr. Speaker, that effective tomorrow morning, we will be allowing senior citizens 65 years or older one check-up per year, instead of one check up every two years. Thank you, Mr. Speaker.

---Applause

MR. SPEAKER:

Item 5, oral questions. Mr. Ng.

Question 82-12(4): Review Of Mining Activities And Developments

MR. NG:

Thank you, Mr. Speaker. My question is to the Minister of Energy, Mines and Petroleum Resources. The Minister, in the last session, March 3, in Return to Question 177-12(3), referred to a review of the goods and materials that Izok Lake and other NWT mining projects would require in order to target business opportunities for northern entrepreneurs. She stated that the contract was tendered and results would be available in July of this year, 1993. She also referred to the skills review of Coppermine, Cambridge Bay and the Kitikmeot and referred to an economic development officer being hired by ED&T, to work on business opportunities for the mining developments. In her closing statement, she said she would ensure Members of the Legislative Assembly that the government will take actions to ensure the NWT benefits from the development of mining activities. My question to the Minister is, what steps has the government done to ensure that these benefits do accrue to northerners as a result of future mining activities in the north.

MR. SPEAKER:

Minister Cournoyea.

Return To Question 82-12(4): Review Of Mining Activities And Developments

HON. NELLIE COURNOYEA:

Mr. Speaker, given the excitement around that area and the potential, we will try in the next week to

present a paper on mining and we'll try to draw in that information. I don't have it available right here at this time but I know that there has been considerable work done on it. We'll try to consolidate it so it makes some sense. The work is being done. I've asked the Minister of Economic Development and Tourism to play a major role in consolidating all that information so that at least we have a coherent plan to go ahead with. Give us another week and we'll present the information. Thank you.

MR. SPEAKER:

Item 5, oral questions. Mrs. Marie-Jewell.

Page 143

Question 83-12(4): Revised Directive For Alcohol And Drug Projects

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. Mr. Speaker, my question is to the Minister of Social Services. On June 9, I wrote to the Minister of Social Services asking for a copy of the revised directive about how the alcohol and drug projects are funded. When the Minister answered by letter on October 4, she did not provide a copy of the contribution directive that I was seeking. I would like to ask the Minister if she could table a copy of the revised contribution directive for the alcohol and drug projects in this House. Thank you.

MR. SPEAKER:

Minister Mike.

Return To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

HON. REBECCA MIKE:

Mr. Speaker, yes.

MR. SPEAKER:

Item 5, oral questions. Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. When I wrote this letter to the Minister on June 9, I asked for quite a few items from her department with regard to the Alcohol and

Drug Services Board of Management. I sent my letter directly to the Minister with no carbon copies to any officials, to the Government Leader, or anyone. I generally try to direct my questions and deal directly with Ministers.

However, I was surprised in the response I received on October 4, 1993 that the Minister of Social Services, in responding to my letter of June 9, had carbon copied my letter to Pierre Alvarez, the secretary to the Cabinet. I would like to ask the Minister of Social Services why was Mr. Alvarez sent a copy when you responded to my letter on October 4? Thank you.

MR. SPEAKER:

Minister Mike.

Further Return To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

HON. REBECCA MIKE:

Thank you, Mr. Speaker. That carbon copy part of the letter was a mistake. However, Mr. Alvarez does need to know -- as the secretary of the Cabinet -- what is going on. Thank you.

MR. SPEAKER:

Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

MRS. MARIE-JEWELL:

Mr. Speaker, I would like to ask the Minister of Social Services that even though she has admitted that she had made a mistake by carbon copying this letter to Mr. Alvarez, is it not courtesy of the Members, if they want to let Mr. Alvarez know what is going on in the Cabinet or about requests from Members and general procedure, that you send a blind carbon copy to whoever you want to know, as opposed to a blatant carbon copy, as you did in your response? Thank you.

MR. SPEAKER:

Minister Mike.

Further Return To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

HON. REBECCA MIKE:

Thank you, Mr. Speaker. I don't usually do that. Blind carbon copies are not sent unless they are requested by the Premier. Thank you.

MR. SPEAKER:

Supplementary, Mrs. Marie-Jewell.

Supplementary To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

MRS. MARIE-JEWELL:

Thank you. Well, if blind carbon copying is not the method used, and she wanted Mr. Alvarez to know what was going on with my correspondence to her, why didn't the Minister take the time out and advise the secretary instead of sending a carbon copy of her response to me to the secretary of the Cabinet? Mr. Speaker, I resent that. I will tell every Minister that I generally give consideration directly in a letter format and I expect the same respect back, and that they are not going to share my requests with everyone. Thank you.

MR. SPEAKER:

Ms. Mike.

Further Return To Question 83-12(4): Revised Directive For Alcohol And Drug Projects

HON. REBECCA MIKE:

Mr. Speaker, at the time the letter was being typed, I was not happy with the first letter. Another letter was done up. When I read that letter to see if it corresponded to the things I wanted to say, I overlooked the carbon copy part. It was my mistake. Thank you.

MR. SPEAKER:

You've had your final supplementary, Mrs. Marie-Jewell. Item 5, oral questions. Mr. Pudlat.

Question 84-12(4): Solvent Abuse Policy

MR. PUDLAT:

(Translation) Thank you, Mr. Speaker. From the beginning of 1992, there has been a concern regarding creating a policy for solvent abuse. This has been a particularly big concern in the Baffin region, in light of all the abuse that goes on in young

people's lives. This has created major problems for some people and their families, so I'm asking the Minister of Justice whether he has considered putting in a policy about solvent abuse? Has he considered putting in a policy about solvent abusers so they can be treated for substance abuse? A lot of people who have abused solvents do end up committing suicide and they create more problems for their families.

MR. SPEAKER:

Mr. Kakfwi.

HON. STEPHEN KAKFWI:

Mr. Speaker, in the area of Justice there are discussions across the country about how to address the growing problem of solvent abuse, particularly with young aboriginal people. I'll have to take the question as notice because there are elements of the question that deal with the

Page 144

work being done in the Department of Social Services as well as the Department of Health. The response is also in the jurisdiction of the Department of Education. We will prepare a response to the question for the Member as quickly as we can. Thank you.

MR. SPEAKER:

The question has been taken as notice. The time for question period has elapsed. Item 6, written questions. Mr. Gargan.

ITEM 6: WRITTEN QUESTIONS

Written Question 13-12(4): Hay Plan Status

MR. GARGAN:

Thank you, Mr. Speaker. My written question is to the Government Leader. I would like her to provide me with the following information.

1. The names of senior government staff who sit on the hay plan evaluation committee?
2. Which positions within the Legislative Assembly are hay plan positions?
3. Which Legislative Assembly positions have been referred to the hay plan committee over the past two years?

4. What have the results been to requests that we have Legislative Assembly positions re-evaluated under the hay plan over the past two years?

5. Why are Legislative Assembly senior positions dealt with by its hay plan committee, and not by the Management and Services Board?

MR. SPEAKER:

Item 6, written questions. Mr. Patterson.

Written Question 14-12(4): Iqaluit Council Dissolution Discussions

MR. PATTERSON:

Thank you, Mr. Speaker. My written question is to the Premier. Today in this Legislature, the Premier stated that the mayor of Iqaluit had been offered the chance to deal with the problem of the senior administrative officer in Iqaluit before the last step of dissolution of council was taken. When and where did those discussions take place? Thank you.

MR. SPEAKER:

Item 6, written questions. Item 7, returns to written questions. Mr. Clerk.

ITEM 7: RETURNS TO WRITTEN QUESTIONS

CLERK OF THE HOUSE (Mr. Hamilton):

Mr. Speaker, return to Written Question 12-12(4), asked by Mr. Patterson to the Minister of Safety and Public Services, concerning licensed premises in Iqaluit and Yellowknife.

Return To Written Question 12-12(4): Licensed Premises In Iqaluit And Yellowknife

During 1993-94, there have been 11 liquor licences issued for premises in the municipality of Iqaluit. By class of licence, these include two cocktail lounge licences, five dining room licences, two club licences, one private recreational facility licence and one canteen licence.

The last year for which annual liquor sales figures are presently reportable is 1992-93. During that year, liquor sales to licensed premises in the municipality of Iqaluit were equal to \$2,188,469. Revenue from these sales was approximately \$994,609.

During 1993-94, there have been 42 liquor licences issued for premises in Yellowknife. By class of licence, these include 14 cocktail lounge licences, 17 dining room licences, one off-premises licence, four club licences, one private recreational facility licence, one cultural and sports facility licence, one brew pub licence and three canteen licences.

During 1992-93, liquor sales to licensed premises in the city of Yellowknife were equal to \$3,273,148. Revenue from these sales was approximately \$1,787,400.

Per capita consumption in Iqaluit during 1992-93 is 132 litres per year compared to 140 litres per capita consumption in Yellowknife, per year.

The office of the senior liquor inspector is located in Yellowknife. This position is responsible for planning and directing the liquor inspections program across the Northwest Territories and include providing: information services to licensees and the general public; training and supervision of contract inspectors; liaison with law enforcement and regulatory agencies; advisory support to the Liquor Licensing Board; and server intention training programs. Thirty per cent of the incumbent's time is allocated to carrying out inspections of licensed premises, but this frequently includes the inspection of licensees in communities outside Yellowknife.

In addition, the Liquor Licensing Board has contracted annually with a single individual to provide periodic spot checks of licensed premises in Yellowknife. The contractor is paid an amount for each spot check completed, to an annual maximum of two thousand (\$2,000) dollars.

MR. SPEAKER:

We will take a short recess.

---SHORT RECESS

MR. SPEAKER:

I'll call the Assembly back to order. We're on item 8, replies to opening address. Item 9, replies to budget address. Item 10, petitions. Item 11, reports of standing and special committees. Mr. Arnnga'naaq.

ITEM 11: REPORTS OF STANDING AND SPECIAL COMMITTEES

Committee Report 5-12(4): Report On Tabled Document 145-12(3): Legislative Action Paper On The Workers' Compensation Act

MR. ARNGNA'NAAQ:

Thank you, Mr. Speaker. I have a report on the legislative action paper on the Workers' Compensation Act from the Standing Committee on Legislation. Mr. Speaker, when the Standing Committee on Agencies, Boards and Commissions completed its interim report on its review of the Workers' Compensation Board in June 1992, it recommended that the Minister responsible for the Workers'

Page 145

Compensation Board prepare a legislative action paper to provide a comprehensive description of all the areas of the Workers' Compensation Act that should be amended. The final report of the standing committee, tabled June 26, 1992, made additional specific recommendations for amendments to the act.

On February 25, 1993, the Minister tabled the Review of the Workers' Compensation in the Northwest Territories, Final Report of the Chief Commissioner. The commissioner had been requested to conduct an expert and independent review of workers' compensation. He reviewed the final report of the Standing Committee on Agencies, Boards and Commissions, as well as three previous workers' compensation studies conducted since 1986. The commissioner made recommendations for reform and identified some areas that may require further development.

The Standing Committee on Legislation held public hearings in Yellowknife from Wednesday, September 29, 1993 to Friday, October 1, 1993 to review the Legislative Action Paper on Workers' Compensation Act. The standing committee extends its appreciation to the individuals and organizations who made oral presentations or submitted written briefs to the committee. The comments and suggestions were thought provoking and the committee studied them carefully during our deliberations.

Introduction

The Standing Committee on Legislation, under the authority given it by this House, has completed a review of Tabled Document 145-12(3), entitled

Legislative Action Paper on the Workers' Compensation Act.

The legislative action paper focuses on eight areas of the Workers' Compensation Act that may require amendments. These areas were recommended for amendment by the Standing Committee on Agencies, Boards and Commissions in their recent review of the Workers' Compensation Board. The eight areas are: regular or periodic review of the Workers' Compensation Board; ministerially appointed review committee; full funding; merit rebate and super-assessments; traditional harvesters; aboriginal artists and carvers; third part liability; and commutations and lump sum payments.

The Standing Committee on Agencies, Boards and Commissions made an additional seven recommendations toward legislative amendments that were not discussed in the action paper. The legislative action paper does not identify any potential areas for legislative reform in addition to the recommendations of the standing committee. The Minister indicated in his introductory statement on the legislative action paper that other areas where the act needs revision may be identified in the presentations received by this committee during the public review.

Mr. Speaker, this concludes the report of the Standing Committee on Legislation on Tabled Document 145-12(3): Legislative Action Paper on the Workers' Compensation Act.

Motion To Receive Committee Report 5-12(4) And Move To Committee Of The Whole, Carried

I therefore move, seconded by the honourable Member for Yellowknife Centre, that the report of the Standing Committee on Legislation be received and moved into committee of the whole for consideration. Thank you.

MR. SPEAKER:

The motion is in order. To the motion.

AN HON. MEMBER:

Question.

MR. SPEAKER:

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Item 11, reports of standing and special committees.
Item 12, reports of committees on the review of bills.
Item 13, tabling of documents. Mr. Koe.

ITEM 13: TABLING OF DOCUMENTS

MR. KOE:

Mahsi, Mr. Speaker. I wish to table the following document, Tabled Document 11-12(4): Report from the Fort Providence/Cambridge Bay Strategic Planning Workshops. Mr. Speaker, as the Premier noted in her statement earlier today, this document summarizes important deliberations on matters related to division and the operation of government leading up to 1999.

Topics covered in the report include: the mid term review of the Premier and Ministers; the operation and accountability of standing committees; guidelines for Members' conduct; events flow chart to 1999; legislative amendments for elections and electoral boundaries; information exchange and decision-making on division issues; and, education, training and human resource issues.

Mr. Speaker, this report is the first strategic planning document produced by all Members of this House. The strategic planning workshop forum has proven to be a strong vehicle for consensus building, especially in dealing with the many difficult issues that will result in a fundamental restructuring of government in the Northwest Territories as a result of division in 1999. Mahsi.

MR. SPEAKER:

Item 13, tabling of documents. Mr. Pollard.

HON. JOHN POLLARD:

Thank you, Mr. Speaker. Mr. Speaker, I wish to table the following document, Tabled Document 12-12(4): Victims' Assistance Committee, 1992-93 Annual Report, in English and Inuktitut. Thank you.

MR. SPEAKER:

Item 13, tabling of documents. Mr. Gargan.

MR. GARGAN:

Mr. Speaker, with the consent and the permission of the band council of Ndilo, I would like to table several documents. Tabled Document 13-12(4),

Yellowknives (Wuledeh) Treaty 8 Entitlement, Press Kit, prepared for clarification.

Tabled Document 14-12(4), Yellowknives Dene First Nations Treaty Entitlement.

Page 146

Tabled Document 15-12(4), is a letter to the members of the Ingraham Trail Land Use Planning Management Committee from Chief Jonas Sangris and Chief Darryl Beaulieu.

Tabled Document 16-12(4), Band Council Resolution 93-464, dealing with mining companies.

Tabled Document 17-12(4), Band Council Resolution 93-462, dealing with the alienation of lands and a map to go with it.

Tabled Document 18-12(4), Important Times for Yellowknives about Treaty.

Lastly, Tabled Document 19-12(4), Yellowknife 1993 - Aboriginal Peoples in the Capital of the NWT, an urban lands case study for the Royal Commission on Aboriginal Peoples.

MR. SPEAKER:

Item 13, tabling of documents. Mr. Antoine.

MR. ANTOINE:

Mr. Chairman, I would like to table a document with the consent of Chief Darryl Beaulieu from the Yellowknife Band. Tabled Document 20-12(4) is called Yellowknife 1993 - Aboriginal Peoples in the Capital of the Northwest Territories, a study report prepared by the Yellowknives Dene Band on the urban land case study for the Royal Commission on Aboriginal People, September 1993. Thank you.

MR. SPEAKER:

Item 13, tabling of documents. Mrs. Marie-Jewell.

MRS. MARIE-JEWELL:

Thank you, Mr. Speaker. I would like to table the following documents: Tabled Document 21-12(4), my letter to the Minister of Social Services dated June 9, 1993 regarding the Alcohol and Drug Services Board of Management.

Tabled Document 22-12(4) is the Minister's response with subsequent information with regard to the alcohol

and drug board of management. I'm sure it will be of interest to the Members. Thank you.

MR. SPEAKER:

Item 13, tabling of documents. Item 14, notices of motion. Mr. Koe.

ITEM 14: NOTICES OF MOTIONS

Motion 2-12(4): Tabled Document 11-12(4): Report From The Fort Providence/Cambridge Bay Strategic Planning Workshop To Committee Of The Whole

MR. KOE:

Mahsi, Mr. Speaker. Mr. Speaker, I give notice that on Friday, November 26, 1993, I will move the following motion.

I move, seconded by the honourable Member for Nunakput, that Tabled Document 11-12(4) titled Report from the Fort Providence/Cambridge Bay Strategic Planning Workshops be moved into committee of the whole for discussion.

MR. SPEAKER:

Thank you, Mr. Koe. Item 14, notices of motion. Item 15, notices of motions for first reading of bills. Mr. Todd.

HON. JOHN TODD:

Mr. Speaker, I give notice that on Wednesday, November 24, 1993, I will move that Bill 2, an Act to Amend the Charter of Communities Act, be read for the first time. That's on the wrong...Sorry, my mistake. Mr. Speaker, I move, seconded by the honourable Member for Mackenzie Delta, that Bill 2...

MR. SPEAKER:

Mr. Todd.

---Laughter

HON. JOHN TODD:

Thank you.

MR. SPEAKER:

This is notices of motions for first reading of bills.

---Laughter

Item 16, motions. Mr. Todd, your cue is coming up. Mr. Todd.

---Laughter

Item 17, first reading of bills. Mr. Todd.

---Applause

ITEM 17: FIRST READING OF BILLS

Bill 2: An Act To Amend The Hamlets Act

HON. JOHN TODD:

Mr. Speaker, I move, seconded by the honourable Member for Mackenzie Delta, that Bill 2, an Act to Amend the Charter Communities Act, be read for the first time.

MR. SPEAKER:

Mr. Todd, your motion is in order.

---Laughter

All those in favour? Mr. Todd, you can vote too.

---Laughter

All those opposed? Motion is carried.

---Carried

Bill 2 has had first reading. Item 17, first reading of bills. Mr. Todd.

Bill 3: An Act To Amend The Cities, Towns And Villages Act

HON. JOHN TODD:

I move, seconded by the honourable Member for -- it hasn't got it here -- Mackenzie Delta, that Bill 3, an Act to Amend the Cities, Towns and Villages Act, be read for the first time.

MR. SPEAKER:

Your motion is in order, Mr. Todd. All those in favour? All those opposed? Motion is carried.

---Carried

Bill 3 has had first reading. Item 17, first reading of bills. Mr. Todd.

Bill 4: An Act To Amend The Hamlets Act

HON. JOHN TODD:

It takes a while, but I finally get it. Mr. Speaker, I move, seconded by the honourable Member for Mackenzie Delta, that Bill 4, an Act to Amend the Hamlets Act, be read for the first time.

MR. SPEAKER:

Motion is in order. All those in favour? All those opposed? Motion is carried.

---Carried

Bill 4 has had first reading. Item 18, second reading of bills. Item 19, consideration in committee of the whole of bills and other matters: Minister's Statement 3-12(4), Sessional Statement; Bill 1, Appropriation Act, No. 1, 1994-95; Committee Report 1-12(4), Talking and Working Together and Committee Report 3-12(4), Report on the Review of the 1994-95 Capital Estimates, with Mr. Whitford in the chair.

ITEM 19: CONSIDERATION IN COMMITTEE OF THE WHOLE OF BILLS AND OTHER MATTERS

CHAIRMAN (Mr. Whitford):

The committee will now come to order. We have Minister's Statement 3-12(4), Bill 1, Committee Report 1-12(4) and Committee Report 3-12(4). When we left off yesterday, we were dealing with the Department of Transportation details of capital. What is the committee's wish? Mrs. Marie-Jewell.

MRS. MARIE-JEWELL:

Mr. Chairman, it was the wish of the Members to address the Sessional Statement by the Premier, but we've recognized that the Premier is out. I believe she's gone to a Premiers' conference. It was also the intention yesterday to address the Special Committee on Health and Social Service's final report, although we've allowed the Department of Transportation to go first because there wasn't enough time. So, I think it was the intention of the committee to start addressing the Special Committee on Health and Social Service's final report and then -- recognizing we'll be here till 10:00 pm tonight -- we may eventually get into the Department of Transportation. Thank you.

CHAIRMAN (Mr. Whitford):

Thank you, Mrs. Marie-Jewell. Thank you again and does the committee agree that we begin with Committee Report 1-12(4)?

SOME HON. MEMBERS:

Agreed.

---Agreed

Committee Report 1-12(4): Talking And Working Together

CHAIRMAN (Mr. Whitford):

Okay, the document is the brown book. Would the chairman of the committee like to make his opening remarks? Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. Mr. Chairman, I think our intention is to commence with reading our report into the record and to deal with our recommendations and motions as we get to them. So, Mr. Chairman, I will be asking all Members of the committee to share in the reading of the report into the record.

This Is What We Heard About The Delivery Of Health And Social Services

Mr. Chairman, we were instructed by the Legislative Assembly to examine all matters relating to health and social services in the Northwest Territories. One of the matters we examined was the delivery of these services. We wanted to know what people think about the programs themselves, the way in which they are organized and the front line workers who provide them.

We have examined all of the information generated during our review of these questions. As mentioned previously, it is impossible to fully examine either health or social services without considering the other. As a result, we have not tried to maintain an artificial separation between these two areas. We have organized the opinions and concerns we heard about, the overall organization and delivery of these services, under a number of headings. Here is what we heard:

We Heard That Many People Feel The System Is Not Meeting Their Needs

Mr. Chairman, people told us that they do not think the present system of health and social services is

working. They feel they have little control or ownership over the shaping of policies and the delivery of programs. The decision making process is viewed as slow, distant and unresponsive. As a result, many people feel that it does not meet their requirements.

A number of people also find the system too complex and sophisticated for them to understand. They do not know who to contact or how to find the proper programs. We heard the perception that you have to already know your way around the system, have money or know the right people before you can receive the services you require.

People Want Greater Control Over The System

Mr. Chairman, people told us that governments cannot solve all our health and social problems simply by spending more money, providing more buildings or buying new equipment. Individuals, organizations and area representatives want to play a greater role in shaping their own quality of life. They believe they can provide more effective and relevant service through locally controlled policies and programs. They want to see a shift to a system in which greater control rests at the community level.

Our survey of community controlled health and social services clearly indicated that greater local authority can produce a number of positive benefits. These include greater sensitivity to local needs, the involvement of people in shaping their own solutions, less reliance on outside agencies for assistance, increased efficiency and effectiveness, increased public awareness of local problems and more sources of information.

While many people want greater local control over health and social services, there are differences of opinion as to whether front line workers should come from inside or outside the community. Some people think that local workers have a better understanding of the area and the needs of its residents.

Page 148

Others feel that some communities may simply be too small for a local resident to effectively provide health and social services programs. These people believe that it would be difficult to cope with making difficult decisions affecting relatives and friends.

People expressed concern about whether the confidentiality of patient or client information would be

maintained if local residents serve as front line workers. We heard that these workers might be subjected to pressure or be shunned by the community because of decisions made in their professional role.

People Told Us There Must Be Greater Cooperation Between Government Departments

Mr. Chairman, we heard that health and social matters are closely related. People want this fact to be reflected in the prevention and treatment of these problems by appropriate government departments and agencies. Too often, we heard that information is kept within a department instead of being shared between appropriate agencies. Front line workers in one department are often unaware of services being provided the same client by workers in other departments.

People identified a number of departments which directly or indirectly shape their quality of life. They include Health, Social Services, Economic Development and Tourism, Education, Justice, Municipal and Community Affairs, including the field of sport and recreation, and Renewable Resources. Yet, we heard that many residents of the north have not been informed of the responsibilities that each department has over various health and social service issues.

People want to see better cooperation and communication between these departments. We heard examples of people being shunted from one department to another as they sought information or assistance. Public servants would not or could not agree on how to accept or divide responsibility. As a result, people did not receive the care they required, were passed back and forth between departments or were in danger of falling through the cracks of the system.

We also heard stories of duplication, waste and inefficiency as a result of the lack of coordination between government departments. For example, people spoke of having to deal with several officials from different departments on the same matter. We also heard of situations where money was available for medical travel only to find that no hospital beds were open once the patient got there.

On the other hand, we were told of money being available for alcohol and drug treatment programs but no travel money being provided to help people get to where those programs are offered.

Experiences like these merely increase the frustration that people feel about a system they already believe is out of touch with their needs. This is particularly true of our justice system. People do not understand how the courts work, the stages involved in bringing an action to trial or the length of time involved. This makes life very difficult for the families and communities of those charged with an offence and who are awaiting trial.

People Told Us That Government Must Focus More On Prevention

Mr. Chairman, people told us that our quality of life is shaped by more than medical treatments and definitions. It is also determined by social and other factors we might not normally associate with "health" in a clinical sense. These factors include our housing conditions, life-style choices, recreational activity, economic status, education and public health information. As a result, people want these factors considered as policies and programs are developed.

Many people we spoke with believe that government should show greater initiative in improving our quality of life. They want policies that focus more on preventing problems than on treating them. Public health education is seen as playing an important role in this process. People want regional health boards to spend more time on health promotion activities that might reduce the number of patients they have to treat.

We Are Told That Local Control Should Lead To Better Programs

Like people in other parts of Canada, residents of the NWT want to increase the number of health and social service programs that can be delivered in their own communities.

Increasing the number of home care programs, in particular, is seen as a very positive step. These services are viewed as more responsive, independent, effective, cost-efficient and familiar than institutional treatment.

The results of the study we commissioned, on the benefits of community control over health and social services in northern and aboriginal communities, point to a similar conclusion.

The survey identified a number of benefits associated with programs developed and implemented in local settings.

These benefits include an increased level of service, more services than might have been available before, greater recruitment of aboriginal front line workers, community involvement in the design of policies and greater local acceptance of those programs.

At the same time, people told us that the current focus on community-based programs should be changed as well. We heard that these services should concentrate on the family and the community as much as on the individual. There is a sense that, "when one of us suffers, we all do." Problems like illness, addiction, violence and other forms of abuse can affect more people than the immediate patient, client, victim or offender. Policies and programs must recognize that family members and other people in the community have just as much need of healing and attention, throughout and after the treatment process.

Mr. Chairman, I would like to ask if the deputy chairman of the committee, the Member for Inuvik, could carry on.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Dent. Mr. Koe.

Page 149

People Said That Our System Must Better Reflect The Culture Of Our Communities

MR. KOE:

Mahsi, Mr. Chairman. Mr. Chairman, many people told us that our health and social services do not reflect their culture, traditions and healing practices. We heard a number of aboriginal residents, in particular, saying that they are even afraid to seek medical care because the system seems so unfamiliar to them. This seeming lack of sensitivity on the part of our own government is totally unacceptable.

Our system must be relevant to the people it is supposed to serve if it is to have any credibility and serve any meaningful purpose.

We heard of at least three ways in which the cultural sensitivity of our health and social services can be increased.

First, front line workers from outside the community should receive formal cross-cultural training before taking up their duties. This could ease the process of adjustment that workers and local residents

experience as they become acquainted with one another. It could help workers gain the trust and confidence of local residents. It could give workers a better understanding of the traditions and practices that are important to the community. It may also lead these workers to serve longer in their positions within the same community. This could result in a more personal and positive relationship with local residents.

Second, our health and social services should include more traditional healing practices. It is an important aspect of treatment for many people. For example, a healing circle was offered to front line workers attending a recent conference in Hay River. The circle was so popular that a second one had to be added. Workers attending a conference from two Inuit communities were so impressed that they started healing circles in their communities when they returned home. Traditional healers report that they are swamped with requests for their help from communities across the north.

Finally, people support a program designed to increase the number of northern and especially aboriginal front line workers, government officials and students in health and social services. At the same time, we were told that this goal should not be pursued at the expense of the skills, quality and standards of care people expect of these services.

This can be achieved in part by developing career paths for northern personnel. Candidates could first be recruited into entry level positions. They could then be provided with the training, support and continuing education that would allow them to advance their careers.

We Heard That Our Front Line Workers Need More Support

Mr. Chairman, we heard many positive comments about the majority of our front line workers. Most of these men and women are seen as able, professional and dedicated to their work. They are clearly viewed as a tremendous resource in most communities. And a number of these workers have developed very strong ties to the people they serve.

Our survey of 280 front line workers revealed that 73 percent of them have lived in the north for 20 years or more. They have lived in their communities an average of 19 years. A typical worker has at least five years of front line experience and has been in the current position for about three years.

From information provided by the public and front line workers, it is clear that the people who deliver our health and social services face a number of tremendous challenges in doing their job. Here are just some of them:

First, they are asked to do much with too few resources. Most of their time has to be spent dealing with immediate crises or balancing the range of services they must provide. As a result, they have little or no time to conduct follow-up and prevention work. Most front line workers we surveyed said that this lack of resources was the greatest problem they face in performing their jobs.

Second, there is a concern over the kind of training they receive. We heard that better training might reduce the need for visits to the communities by various specialists. Front line workers themselves, identified the issue of training as the second greatest professional problem they face. They are concerned that a number of formal job descriptions may not reflect the actual needs of the community.

Third, people are concerned by the high rate of turn over among doctors, nurses, dentists and specialists serving their communities. This degree of change makes it difficult to establish effective health professional/patient relationships. Quite simply, people want to see more of the same health care personnel. At the same time, we heard that these workers would consider staying longer if they received greater support from local residents.

Fourth, workers experience "burn out." This is caused by heavy case loads, changes in cultural surroundings, stress, low compensation, the lack of other workers in the community with whom to share information and the accumulated burden of their responsibilities.

Finally, some people told us they didn't like the daily clinic hours of their community health centres. We heard that health workers receive fewer requests for appointments during the morning hours. Patients seem to prefer evening visits, when most centres are closed. People told us that clinic hours should better reflect the needs of the community.

People Expressed Concern That The Confidentiality Of Information Be Respected

Mr. Chairman, the confidential nature of patient and client information is one of the most important features of any health and social service system. We

heard concerns, both about the inappropriate sharing of information between front line workers and community members, as well as the lack of communication between government departments.

People are concerned about the possibility that information about themselves might be revealed to members of the community. This concern is explained, in part, by the fact that local workers may be close friends or even relatives of the patient. People want to be assured that any sharing of

Page 150

confidential information will be limited to professional staff and not made available to the community.

On the other hand, people feel that more sharing of information is required between government departments in order to better serve the needs of clients. Present confidentiality procedures require client consent for the disclosure of information. There is support for encouraging workers to obtain consent for the disclosure of information so that this problem may be remedied.

There Is Concern About Specialist Services In The Communities

Mr. Chairman, we heard that our system's reliance on specialists may not always provide the best level of service to the communities. Part of the problem is that the need for these services is seen to reflect a lack of support and resources available to front line workers. People told us that these workers should be able to involve other local resources, such as respected elders, in providing some of the services currently provided by specialists.

People mentioned a number of concerns about specialists. Communities may not have enough input into the process of assigning specialists to various locations. They do not visit often, and when they do, it may only be for a few hours at a time. People may not even be able to meet with them if these hours are not convenient. These brief visits are not seen as providing enough time for the specialist to develop an understanding of the community. This problem is made worse by the lack of follow-up to these visits. We also heard the view that specialists do not have -- or do not take -- the time to provide instruction and training for community front line workers.

We Became More Aware Of The Important Role Of Volunteer Organizations

Mr. Chairman, we heard a number of positive and useful programs provided by volunteer organizations across the north. People told us that these activities reflect their desire for greater responsibility over their lives and over the services provided their communities. We heard that these groups should be recognized and encouraged to expand their involvement.

We also heard that increased voluntarism reflects the view that government workers and professional health and social service workers are only a part of the solution.

People Told Us That Public Officials Are Expected To Act As Role Models

Mr. Chairman, public officials, community leaders and workers who provide health and social services are recognized members of the community. A number of them are also viewed as role models. People want them to follow a high standard of behaviour, especially on such matters as sobriety and violence. These role models are also expected to recognize and acknowledge any problems they may have and to act responsibly in dealing with them.

At this time, Mr. Chairman, I would like to ask Mrs. Marie-Jewell to continue.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Koe, the chair will now recognize Mrs. Marie-Jewell.

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman.

People Expressed Concerns That Offenders Should Not Be Treated Better Than Their Victims

Mr. Chairman, people in a number of communities believe that those who commit physical violence and other forms of abuse within their families should not be treated better than their victims. At the same time, people are concerned that offenders seem to benefit under the current system. This concern is based on a number of factors.

First, it is usually the female partner and children who have to relocate following a violent incident, while the offender remains in the family home. The victims may even have to leave their community in order to find appropriate shelter. Women feel further victimized when they have to relocate in this way.

We heard significant support for the view that the offender, rather than the victim, should have to suffer the inconvenience and other stresses of leaving the home.

Second, the victim often experiences even greater inconvenience, through no fault of her own. Once she leaves the family home, her name may be dropped to the bottom of the list of those hoping to qualify for future housing space. This happens even if the woman was born in the community and has lived there all her life.

Third, we heard that the victim of abuse may even be reluctant to assist the justice system in bringing charges against the offender. This reluctance is caused by a lack of understanding of the process itself or by a fear of retaliation. Some people told us that bringing charges against an offender simply guarantees repeat acts of abuse.

Finally, people are concerned that the judicial process fails the victim, even when the matter goes to trial. There is a perception in some communities that the courts are too slow in dealing with such acts of violence. We also heard the perception that juries are too lenient with offenders even if they are brought to justice.

Appropriation Counselling For Offenders And Victims Is Necessary, According To Many People We Heard From

Mr. Chairman, we heard people support the use of community-based counselling, intervention, mediation and other family support services for both the victims and offenders, in cases of domestic violence. People also support programs to assist families in the possible reintegration of abusers into the home.

Abused women, in particular, face a number of challenges in locating and obtaining assistance. They simply may not know anyone to talk to. They may not know of the legal steps they can take. Or they may not know the other sources of help that may be available to them.

People told us that the abuser also faces a shortage of counselling and support programs. Since abuse is an offense that is often repeated, it is just as important to provide

Page 151

counselling for the offender as it is for the victim and other family members.

We Heard That Midwives Are An Accepted Part Of Community Care

Mr. Chairman, we heard general support for programs that would give women the opportunity to deliver their babies in their own communities. This would enable women to choose to remain at or close to home, as opposed to having to travel to another community. It would make life easier for expectant mothers who already have other children to care for. It would also ensure that young expectant mothers have a chance to learn about the birthing process in secure and familiar surroundings. Midwives, home births and local birthing centres were mentioned as community-based means of achieving these results.

We Heard That Mental Health Issues Deserve Greater Attention And Support

Mr. Chairman, we heard that there are very few meaningful mental health services available in the Northwest Territories. This applies to clinical psychiatric services and a more holistic approach to healing. While the Department of Social Services has authority in this matter, there are very few resources available to back it up.

People identified a number of obstacles to treating those with mental health problems. These obstacles include a shortage of proper facilities, not enough home care, too little training, too few visits by specialists and a lack of other support in the community. We also heard that even when suicidal patients are sent outside the community for assessment, they are often quickly returned because they have no clinically diagnosed illness.

There is clear support for culturally appropriate counselling services, such as the use of respected elders as lay counsellors. Ongoing service training for social workers and the pooling of local resources to provide better treatment of mental health problems are also needed. People also want greater cooperation between the departments of Health and Social Services in an effort to ensure that patients receive the care they need.

Mr. Chairman, I would like to ask my colleague, Mr. Patterson, to continue. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you, Member for Thebacha. I will turn it over to Mr. Patterson.

People With Physical Disabilities Raised Their Concerns

MR. PATTERSON:

Thank you, Mr. Chairman, during our consultations a number of people with physical disabilities shared their concerns. Particular challenges include a shortage of community-based services. We heard of a lack of suitable physically accessible housing and of frustrations encountered in getting into public buildings. Some disabled people felt they had not received fair treatment under the regulations of the social assistance program. They found it frustrating and embarrassing to have to provide a doctor's note confirming that their disability prevents them from working, in order to qualify for the disability allowance. They also suggested that social assistance workers should receive disability awareness training.

As with seniors, people with disabilities and the family members who care for them spoke of their need for respite care. While some respite care is offered in some communities using hospital beds that may be available, little is available on an in-home basis. Little is needed to offer such services except the funding necessary to pay the home makers. A current initiative in Rae-Edzo to train residents as home makers shows that it can be done, if the will is there. The ongoing lack of will on the part of government is apparent in the fact that a report it prepared in 1985 called for the implementation and funding of respite care, yet no action is apparent eight years later.

Cancer Is A Major Concern

Mr. Chairman, the increased presence, detection and treatment of cancer is of particular concern in almost every community we visited.

People believe that current methods of testing in the north are incapable of detecting this disease in its early stages. We heard stories of delayed diagnosis and misdiagnosis. We also learned of people who were told in their communities that they did not have cancer, only to be medevaced to another community where they were told that they did.

Governments at all levels have tried to educate people about the connection between smoking and cancer. But the message is simply not getting through. We were especially disturbed to hear of young children who are already smoking, chewing and sniffing tobacco in our communities.

People Want Additional And Improved Medical Transportation Services

Mr. Chairman, people are concerned about the availability of air and ground medical transportation in their communities.

In the case of air transportation, we heard of a shortage of interpreters and dependable escorts to accompany elders and other patients on their medical travels. Other concerns include

the administration of the medevac program itself and the lack of airstrips in some communities.

In the case of ground transportation, many communities do not have taxi services. We heard requests for additional vehicles to transport elders and other patients to local health centres, airstrips or other facilities. A number of people suggested that health centres themselves should make their vehicles available for transporting patients. On the other hand, there was concern that such a solution would place an even greater burden on health centre personnel and resources.

Income Support Benefits And Rules Are Inadequate

Mr. Chairman, there is widespread concern that the present system and level of income support benefits are simply inadequate. Particular problems include the high cost of living

Page 152

in the north and the fact that this cost can vary between communities.

In our second interim report we examined one issue that is of great concern: the inadequacy of the food allowance for people receiving social assistance. There remains a considerable shortfall between what the allowance will buy and the actual cost of a nutritious food supply.

Many view social assistance as a way to regain or establish a level of economic self-sufficiency. We heard of a number of recipients who manage to earn extra money through various economic activities. This activity helps people retain their pride and serves as an incentive to work. But we also heard that this incentive is reduced because extra income is deducted from the following month's social assistance payment. Many people believe that represents an unfair penalty. There is clear support for the review and reform of this rule. Regardless of how much

money one is allowed to keep, we also heard that many recipients of income support lack the knowledge, experience and training to manage and budget their income effectively.

More Effective Public Education Programs Are Required

Mr. Chairman, we were told that effective public information, promotion and communications programs are required on a range of issues including AIDS, Fetal Alcohol Syndrome, nutrition, addiction and pre-natal care, to name just a few.

It is clear that there is a considerable shortage of information in many of the communities we visited. Existing programs are trying to meet this demand but they are not getting through to the people they were designed for.

People want their health and social services workers to communicate with them more effectively. We heard of occasions on which patients do not feel they are being told what they need to know. We were also told of people not understanding what treatments they were being given and why.

Two barriers to more effective communications were identified. The first is a linguistic one, where the patient and care giver may speak different languages. The second is a technical one, where health and other professionals use overly technical jargon when speaking to their patients and clients.

Thank you, Mr. Chairman. I would now like to ask our Chairman, Mr. Dent, to continue.

CHAIRMAN (Mr. Pudluk):

Thank you, Mr. Patterson. Now I'll transfer the mike over to Mr. Dent.

This Is What We Recommend Regarding The Delivery Of Health And Social Services

MR. DENT:

Mr. Chairman, we believe that a number of steps can and must be taken to improve the delivery of health and social services in the Northwest Territories. People told us on many occasions that they expect the government to act on the information provided during our review. They have done their part by sharing their needs and concerns with us. Now it is time for public officials to do their part.

The need for action on these matters is great. Our recommendations should be acted upon quickly.

The following general recommendations provide a framework to guide the government in its approach to a number of issues.

The government should better inform the people of the Northwest Territories about the cost and workings of their health and social services. An effective program to communicate this information and to encourage the responsible use of these services should be implemented. This will help people to feel a greater degree of ownership of the system. It may also help us to provide the services we require while living within our means.

Communities should be encouraged and assisted in the development and leadership of local initiatives. It is especially important to support those programs in which individuals and families assume greater responsibility for and control over their quality of life.

The use of specialists should be reviewed. We must ensure that our communities are receiving the greatest benefit from this expertise. While they are in the community, efforts should be made to share their expertise by providing training and advice to local residents, such as in the areas of prevention and treatment. The specialist assignment and visitation schedule should also be reviewed to ensure that these visits are convenient for the people they are meant to serve.

The use of telecommunications technology and other forms of distance medicine should be increased. This will provide front line workers with the information they need to provide more timely, effective and quality health services. Had the Department of Health not already initiated a pilot project in this area, we would certainly have recommended that it do so. The department should be instructed to proceed as quickly as possible with the pilot projects that are proposed for the next two years.

The Government of Canada should live up to its commitments. We can not accept Ottawa's ongoing refusal to honour its financial responsibilities for the provision of health care to our aboriginal residents. These obligations exist in treaty. They also exist in the agreements which transferred authority over a number of health related matters to the territorial government in 1988.

The government of the Northwest Territories should honour its commitment as well. In return for their support of the 1988 Health Transfer Agreement, communities were promised greater authority over their health and social services. This was to be achieved through a transfer of responsibility to regional health boards, hospital boards and local committees. This transfer has never occurred to the extent it should. The system remains distant from and unresponsive to the people who best know the needs of their communities.

Efforts must be made to develop more community-based mental health services. The government should consider undertaking a pilot project in a given community. The project could involve a team approach involving local residents with back up support provided by skilled professionals from regional offices. This team would develop and implement

Page 153

promotional activities around mental health issues. We saw two proposals for such a project during our review. We strongly suggest that the government move in this direction.

The confidentiality of medical and related information needs to be addressed on two levels. First, the government should encourage staff in different departments to get the client consent needed to share information among themselves. Second, front line workers should be reminded to take steps to avoid even accidentally releasing confidential information to the public.

We heard of the problems facing families who care for mentally handicapped young people in the home. Possible solutions that were raised include appropriate counselling and training for parents.

Additional respite care services and facilities need to be provided as part of a community-based system of health and social services. These resources will help relieve the strain on families who care for ill, elderly or disabled family members at home.

An immediate search must begin for ways to relieve the impossible workload of front line social workers. In smaller communities, one or two workers are responsible for delivering a great number of programs, each requiring certain skills. In larger communities, workers are more specialized but face an incredible volume of work. In both cases there is

not enough time to perform prevention activities. In short, the current situation leaves workers overburdened and communities under-served. One immediate step would be for the government to speed the transfer of responsibility for social assistance to the Department of Education, Culture and Employment.

Women should be protected from acts of physical abuse. Part of this protection must come in the form of new attitudes on the part of many people. The government has an important role to play in this process. This role includes setting policies and communicating them to the people of the Northwest Territories.

The government is to be commended on its efforts to date in the area of family violence, but too many people are still being abused. The committee is pleased that the Department of Justice is presently working on a new strategy to deal with violence in the Northwest Territories. We strongly urge the Minister to proceed swiftly to address this serious issue. More must be done to communicate this policy and the fact that violence against women and other family members is totally unacceptable.

Mr. Chairman, people need to be better informed of the ways in which they can take greater control over their quality of life. Information about successful programs developed at the community level should be gathered and distributed throughout the Northwest Territories.

The government should encourage the development of more effective and innovative public information programs. These activities should move beyond the conventional printed materials and lectures which are simply not working. Programs must become more interactive with the people they are meant to reach. People must be participants rather than recipients in the process of public health education.

We heard too many stories of duplication, waste and lack of coordination between government departments. It is time to begin correcting these problems in the best interests of the people who receive and deliver health and social services. We need to develop new partnerships with the input of public officials, front line workers and the people of our communities.

Committee Motion 5-12(4): To Adopt Recommendation 1, Carried

Therefore, Mr. Chairman, I move that this committee recommend that the amalgamation of the Departments of Health and Social Services should proceed immediately. The first step in this process should be the designation of one Minister responsible for both departments by March 31, 1994.

CHAIRMAN (Mr. Pudluk):

Thank you, Mr. Dent. The motion is in order. To the motion. I need a quorum to call a vote. The motion is in order. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Any further comments? Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. Mr. Chairman, efforts have to be made to improve the coordination and health and social services during the amalgamation process. Legislative, regulatory or administrative obstacles to increased cooperation between departments must be identified and removed.

Therefore, Mr. Chairman, I move that this committee recommend that the level of cooperation and information sharing between all government departments involved in the delivery of health and social services must improve, and the government should report to the 1994 fall session of the Legislative Assembly on measures taken to achieve this goal.

CHAIRMAN (Mr. Pudluk):

I'm sorry, Mr. Dent. That is a recommendation also. Could you repeat that, please. Mr. Dent.

Committee Motion 6-12(4): To Adopt Recommendation 2, Carried

MR. DENT:

Mr. Chairman, I move that this committee recommend that the level of cooperation and information sharing between all government departments involved in the

delivery of health and social services must improve, and the government should report to the 1994 fall session of the Legislative Assembly on measures taken to achieve this.

CHAIRMAN (Mr. Pudluk):

Thank you. The motion is in order. To the motion. Mr. Zoe.

MR. ZOE:

Thank you, Mr. Chairman. About this motion and the previous motion that was just passed, I wonder if the time line that has been stated is reasonable? I say that because, as Members know, the other standing committee of the House made a report a year ago and the Department of Health, in

Page 154

particular, has not followed up on the recommendations. From the workings of various departments, it takes between 12 months to two years to implement recommendations.

CHAIRMAN (Mr. Pudluk):

Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. I can't speak for the Department of Health as to whether they are going to meet this time line, but Members of the committee felt that we should at least hear from them about what sort of progress they had made towards achieving the goal set by this recommendation, by next fall. In our travels we heard from across the Northwest Territories that people do want to see better cooperation between government departments that are involved, especially in the areas of health and social services.

Right now, people feel they are being shuffled from department to department and there isn't the sort of coordination that there should be. Whether they will have solved all the problems a year from now, I can't answer. I think only the Minister of Health could advise us on that. We still feel that the House should be advised what sort of progress the department has made. That is why we put this deadline in there.

CHAIRMAN (Mr. Pudluk):

Thank you. Maybe the Minister of Health would like to respond to Mr. Zoe's comment? Mr. Pollard.

HON. JOHN POLLARD:

Thank you, Mr. Chairman. Mr. Chairman, with regard to recommendation two, "...the government should report to the 1994 Fall session of the Legislative Assembly on measures taken to achieve this," we believe we can meet that time line, Mr. Chairman. So, it is acceptable to us.

CHAIRMAN (Mr. Pudluk):

Mr. Zoe.

MR. ZOE:

Mr. Chairman, I'm in agreement with the motion that is in front of us, but the point I'm trying to make is that, once the department is amalgamated by March 31, 1994 -- and we're asking through the second motion to see what measures the department has taken -- I guess they can comment on the progress they have been making from the date of amalgamation. The point I'm making, Mr. Chairman, is based on past experience of other committee reports to this

government...I will use one of the departments they are asking to be amalgamated as an example, the Department of Health.

They have a number of internal problems that have not been rectified, to date. Just looking at that department, Mr. Chairman, the issues and concerns that were raised in some of our standing committees have not been cleared up with just that department. Even if we put those two departments together, I can't see the government house cleaning with two departments when they can't even do it with one. That's the point I'm trying to make, Mr. Chairman.

I agree with this particular motion, but I don't think it's going to work. Although the department will be able to report on the progress they have made by the 1994 fall session, I can tell you, Mr. Chairman, that the report that we are going to get in the fall is going to be, "little progress." Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. That was only a suggestion. Mr. Gargan.

MR. GARGAN:

Mr. Chairman, I don't have a difficulty with the motion itself. I am just wondering where this recommendation is coming from? Does it say that at the community level, the Department of Health and the Department of Social Services are not cooperating, that the social worker is not cooperating with the health workers? Or, are the communities saying that the delivery of services is insufficient and by cooperation it should be more efficient? I'm just wondering. Where did the committee hear this?

CHAIRMAN (Mr. Pudluk):

Mr. Dent.

MR. DENT:

Mr. Chairman, we heard about this in the Baffin, Fort Smith, Inuvik and Yellowknife. For interest's sake, one of the quotes that we have from the Resolute Bay public meeting was, "Health and Social Services people should try to get together. If they were to work together, you would know more about these problems." What people were saying is they didn't understand why they would have to bounce back and forth from Health personnel to Social Services' personnel depending on the nature of their problem. That is what people told us they found frustrating. They didn't understand why there was a difference. They saw a need for services to be provided and thought it should be coming from one person.

CHAIRMAN (Mr. Pudluk):

Thank you. To the motion. The motion is in order.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Further comments, Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. Mr. Chairman, the role of regional health boards should be reviewed during this reorganization process. These organizations are closer to the people and can better reflect the health and social service needs of the community. However,

they require more certain plans and a better definition of their function. The government must also realize that different boards face different challenges and opportunities in their own communities. Individual boards operate at different levels of expertise. They also differ in terms of their experience and to the degree to which they can or wish to assume greater responsibility. Legislation and memorandum of agreement should reflect these facts. Individual boards should then have the right to determine the plans and programs which best meet the needs of their region.

The agreements being developed by government and board officials should reflect these concerns.

Committee Motion 7-12(4): To Adopt
Recommendation 3 As Amended, Carried

Therefore, I move that this committee recommend that greater authority should be transferred to regional health boards as they are willing and able to assume those duties.

Page 155

CHAIRMAN (Mr. Pudluk):

Thank you. The motion is in order. To the motion.
Mr. Gargan.

MR. GARGAN:

Mr. Chairman, this recommendation was also brought in by the Standing Committee on Agencies, Boards and Commission's report with regard to reviews. It is also one of the issues that was discussed by the Public Accounts committee. The point is that those reviews are going on right now. Perhaps this government should recognize regional governments and that they develop those boards based on, not the different situations at the community level, but at the regional level.

The other thing is most regional boards have superintendents or doctors as the chairmen of those boards. I don't know why that is. I think all the boards are at different stages. I think if there had been a statement suggesting that all the boards will administer their own finances, hire their own staff -- accountants, doctors, nurses, et cetera -- I would have preferred that. Whether or not those people serve as chairpersons of those different boards, the expertise will be there. The regions can operate just as effectively with a doctor sitting on the side advising them. I don't have problems with the report itself, but

I believe the Standing Committee on Agencies, Boards and Commission's report, recognizes there are too many differences in the way boards are functioning. Some boards have to give some authority for hiring, some don't. Some boards have advisory capacity with budgets, others don't. All of these different situations exist.

The way the recommendation is drafted suggests that as soon as they are ready...And it is not going to be the regions that determine that, it will be the government that will determine that. If they are ready to take on responsibility for finances, then they will be given that. Not all of the regions will be consistent. The Deh Cho doesn't have a board. That hasn't affected my health one bit. The point I am trying to make is that those boards should be getting more autonomy. That is the direction this government should be going in.

This recommendation suggests all of these different boards are at different levels. Let them earn their autonomy, instead of me making a political statement saying that all of those boards should be the same. They should have responsibility. They should have autonomy. That is the direction we should be in by the year 1995. But a vague statement like this suggests that by 1997 we won't have anything.

CHAIRMAN (Mr. Pudluk):

Thank you. To the motion. Mr. Koe.

MR. KOE:

I would like to give some clarification on behalf of the committee on Mr. Gargan's comments. Most of the boards don't have government officers as chairmen. Inuvik, Baffin, Fort Smith, Keewatin and Yellowknife hospital boards all have private individuals as chairpersons. Most of the committees are made up of private individuals from the region or from the communities. They may have advisors and whoever have hospitals, will have doctors on staff.

Sam is right. Each board is at a different level of development. Several regional boards have been in existence longer and have more expertise, knowledge and responsibilities than newer boards. Some of the boards are boards of management of specific hospitals and others are regional boards, which may or may not have a hospital in their region. All of them have health centres.

The other point I would like to make is in our interim report -- that is why it is not in this final report -- we made a motion to establish a regional health board in the Deh Cho region. The Minister of Health can clarify this. I just wanted to make those comments of clarification, Mr. Chairman. Mahsi.

CHAIRMAN (Mr. Pudluk):

Thank you. To the motion. Mr. Zoe.

MR. ZOE:

Mr. Chairman, I disagree with the recommendation that is being put forward by my colleagues on the Special Committee on Health and Social Services. Members will recall, the Standing Committee on Public Accounts initiated the issue of MOUs -- I cannot recall the last report that we did it in -- but we did make reference to it again in our current report. Mr. Chairman, one has to understand that the development of a memorandum of understanding is a key document which tells you the rules between the authority of the Department of Health and the board. Because we don't have an MOU in place now, we're running into a lot of problems. Most of it is coming from Department of Health officials.

Through our review of the comprehensive audit of the Department of Health, we noted that. It was reflected in our report. What we asked for was a standardized MOU so that it could be applied across the territories. Not the way that is being suggested, where various boards would have higher authority than others. I totally disagree with that. That whole issue was brought to light during the Standing Committee on Public Accounts review. It is reflected in a number of our reports and in our follow-up reports.

I'm not too sure where my colleagues from the Special Committee on Health and Services are coming from. Some Members that sit on that particular committee also sit on my committee that dealt with the issue of MOUs. I'll be voting against this particular motion because I don't believe that the level of authority should differ across the territories.

Currently, a lot of board members from boards across the territories are complaining because they are being treated differently. The Baffin, for instance, is treated differently than the Inuvik Board of Management and the Kitikmeot, and totally different from the Mackenzie, because we don't have a board in place. I know of the issue of MOUs, and what we have asked for is that MOUs be standardized so things are

done equally across the territories and that was reported through the Standing Committee on Public Accounts. I'm not saying that I totally disagree with the Members, with regard to the development of MOUs. I agree with the development of MOUs but not in regard to having differing levels of authority in MOUs for various regions. I think they should be all standardized. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. Mr. Pollard.

HON. JOHN POLLARD:

Thank you, Mr. Chairman. Mr. Chairman, from the debate that's occurring in the House at the present time, I think we're beginning to see the complexity of the situation. Mr. Koe asked me a question earlier this week

Page 156

with regard to the MOUs and I said words to the effect that the situation differs across the Northwest Territories.

I think that is what is being reflected by the committee and their recommendation number three. Mr. Chairman, Mr. Zoe is also correct that we are treating boards differently and there has to be some ground rules, some memorandum of understanding. One of the reasons why I want to meet with the board chairs, before we put this memorandum of understanding to bed, is that there may be a standardized MOU between the GNWT Department of Health and the boards. We also have to recognize that some of those boards may want to have a little different twist on things, depending on their location, needs, expertise, and how much responsibility they wish to take on.

I just want the committee to know that I hear their concerns. I know the problem that is out there and I think you can rest assured that we will ultimately resolve this problem by direct negotiation between the boards and myself, taking into consideration the differences across the Northwest Territories. Thank you, Mr. Chairman.

CHAIRMAN (Mr. Pudluk):

Thank you. Mr. Dent.

MR. DENT:

Mr. Chairman, with this motion we are very clearly saying that greater authority should be transferred to regional health boards. Those regional health boards should be the ones who determine what sorts of responsibilities they take on. We're not saying here that it should be determined by anyone else.

When we were talking with health boards, we did find some that told us that they were at different stages of development and that they recognized there were going to be steps they were going to have to take to achieve the same sorts of responsibilities that other boards had. There is a difference, Mr. Chairman, between responsibility and authority. We see that the boards should have the authority to determine what level of responsibility they are taking on. I think we have to recognize that this motion is talking about authority.

What we are saying is that boards should be empowered to make decisions about what they are willing and able to take on. The more they are willing and able to take on, the greater the responsibilities they have. A couple of the boards did tell us, for instance, that they didn't feel they were ready to take on full responsibility.

What we are trying to do is accommodate that situation here. As Mr. Zoe has pointed out, we don't even have a board in operation in the Deh Cho region. The committee has recommended that there be a board there. To say that this should happen arbitrarily, that all responsibility should be transferred on, would be a little bit ahead of the fact. The board needs to be there to have the authority in order to take on the responsibility. So we are trying to say, let's give the local residents the authority to determine how their services are delivered. That is really what this motion says.

CHAIRMAN (Mr. Pudluk):

To the motion. Mr. Gargan.

MR. GARGAN:

Thank you, Mr. Chairman. In my presentation to the board in Hay River on January 28, one thing I mentioned was the lack of affirmative action done by the Department of Social Services. And also the lack of response by the government with regard to the traditional knowledge working group. This hasn't changed since 1989. They still don't have aboriginal people at the senior level of government in the

Department of Health. I think Social Services is a bit better. Even at the district level, it is the same thing.

So it would be quite difficult to implement something like this if the commitment is not there for them to do it. The statement itself, giving the authority to the regions to take on whatever responsibilities they wish, that authority would be given to them only if the government is willing to do so. There is no statement of principle, except that as they are ready to take on those responsibilities, then the government will give the authority to them.

We cannot say one year from now that our recommendation was that the board should take on those specific authorities, hiring or finances, et cetera. The government should be able to say if the principle is there...I could see the region saying we are trying to reach that goal, but we are at this level right now. But if we don't have any goals or objectives at the end, then the directions will not be clear. That is my point, Mr. Chairman. There is nothing here except that we allow people to determine that for themselves. But if we don't have a goal or objective that will be determined by what level we are at, then the communities don't know what levels they are at because there is no measurement. That is my whole point. We don't have a way of measuring whether or not the government...sure, we asked them to do a report by the fall of 1994. But how do you determine that? There is nothing to measure it by, except to say that the government have given them limited autonomy on their finances. But due to the Public Services Act, we cannot give him authority for hiring. We will meet a lot of those kinds of obstacles if we don't make a political statement of intent.

CHAIRMAN (Mr. Pudluk):

Thank you. The time is now 5:30 pm. According to the sitting hours set by the Speaker, I will rise from committee of the whole until 7:00 pm.

---DINNER BREAK

CHAIRMAN (Mr. Pudluk):

I'll call this committee back to order. We're still on the Special Committee on Health and

Social Services. We're on page 24. There was a motion on the floor before we left. To the motion. Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. In the spirit of compromise, if there are some Members who would prefer it, I think that we could certainly take the word "able" out of this motion and put in the word "prepared." I think that might deal with some of the concerns that have been expressed because it would change the concern that it would be the government who would be determining whether or not they were able and ensure that it was the people who were on the boards that were determining when they were prepared to take on the responsibility.

CHAIRMAN (Mr. Pudluk):

Thank you. According to our rules, the mover can not amend his or her own motion. Mr. Zoe.

MR. ZOE:

Mr. Chairman, I would like to propose an amendment. Mr. Chairman, I move that "as they are willing and able to assume those duties" be deleted.

Page 157

CHAIRMAN (Mr. Pudluk):

Taking out the "and able to assume those duties." Is that correct, Mr. Zoe?

Committee Motion To Amend Recommendation 3, Carried

MR. ZOE:

If you want me to repeat my motion, Mr. Chairman, I move that "as they are willing and able to assume those duties" be deleted and a period added behind "boards." Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Member for Thebacha.

MRS. MARIE-JEWELL:

Mr. Chairman, with regard to this amendment of deleting the words "as they are willing and able to assume those duties" and basically stating greater authority should be transferred to regional health boards, this is a pretty broad recommendation. They should be transferred to regional health boards when, why, and what not. I guess the concern that I have, Mr. Chairman, is that if we allow this amendment to go through just stating greater authority should be

transferred to regional health boards, I'm somewhat concerned that the authority will be transferred and possibly the regional health boards may not be prepared or be able to take on the responsibility. I just find that when we allow these words in, "as they are willing and prepared to assume those duties," that is when the transfer should take place. There are many boards, for example, the Kitikmeot board, who did not want as much responsibility as the Keewatin board, and that was told to the committee. That's why this recommendation is the way it is; stating that these authorities should be transferred when the boards are wanting the transfer, how much of the authority they want, when they should be able to take on these extra duties. I don't find it appropriate that this responsibility should be imposed on them as this amendment is recommending. Therefore, I am going to vote against the amendment that was posed by my colleague. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Gargan.

MR. GARGAN:

Mr. Chairman, I think all boards do have that aspiration and the willingness to assume a lot of the duties. I think all Members recognize that. I think the statement in principle, giving greater authority should be transferred to regional health boards, is a statement of intention and the way the boards interpret it would be at their discretion. I don't think we would need to make any further statements other than that. I don't know whether or not...I would like to see more authority being given or accepted by the boards but I think they will accept them as they are ready for them. These boards have been in existence now for some ten years and I'm sure a lot of them would like to see their authority broadened. It has been stated previously under the Agencies, Boards and Commissions. It was also stated under Public Accounts, on the review of that. This is the third level that has been making those recommendations so we hear them. The message that we are trying to get is not to the board, it's to this government in telling them that you should give greater authority to the regional health boards and it will be determined by those boards then. I have no problem with deleting that particular section.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. I agree with the Members who have spoken that the goal of this motion is to give the message to the government that greater authority must be transferred to regional health boards. However, the fact remains that not every regional health board is in exactly the same state of development across the territories. I think that is pretty clear from an earlier motion that this committee brought forward, where we directed the government to ensure that a regional board was established in the Deh Cho region. I think that we have to recognize that what we want to say with the motion is that the decision about when the board takes on the responsibilities should rest with the board.

That is the intention of our motion, but we have to recognize that not every board is at exactly the same level of preparedness, right now, to take on all those responsibilities. It shouldn't be us saying to them you have to take it on if they are not quite ready. If they need another year, if they need another six months to get ready, it should be their choice as to what timing it is for them to take on specific responsibilities. That is why I had suggested earlier and was prepared to move an amendment to replace the word "able" with "prepared". I think that would then make it very clear that it wasn't to be somebody assessing whether or not they were able, it was the board determining whether or not they were prepared to take on the responsibility. I think that would deal with the difference states of readiness that the boards are in across the territories. I would urge Members to vote against this particular amendment and if it fails I will immediately make a motion to replace the word "able" with the word "prepared."

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Zoe.

MR. ZOE:

Mr. Chairman, with an amendment on the floor that doesn't exclude the department from doing exactly what the chairman of the Special Committee on Health and Social Services is saying. If the responsibilities are determined, or the authority is given to the board, it could be managed even with the way the amendment is presented right now. We're asking that the greater authority should be transferred to regional boards period. And, I think that's the general statement that all of us have agreed to.

If you go back, Mr. Chairman, to the Standing Committee on Agencies, Boards and Commission's interim report and on their final report on Health and Hospital Boards in the territories, the reference to MOU is reflected in this report. They had series of consultations with various boards across the territories and it was also noted in the Auditor General's report ending March 31, 1990. So this whole issue of MOU has been going on for a number of years now, Mr. Chairman, and it's also been reflected in the last three reports of the Public Accounts. We know that by the end of this month, we are going to have two MOUs in place, one for one hospital and one for one regional board. The Department of Health is anticipating that they will be concluded by March 31, 1994.

Now, the question here is authority. The authority has already been recommended to the government through these other reports. So I'm not too sure exactly what more we can tell the

Page 158

government to do because it's also reflected in the comprehensive audit of the Department of Health. So, there are three committees that have been dealing with this now, Mr. Chairman. If you leave it in the general terms, as it is composed now, then I think that can be sufficient enough for the government to proceed with these MOUs, as it was discussed in a number of previous reports. So, I don't see a big problem with the amendment that's being put forward. Thank you.

CHAIRMAN (Mr. Pudluk):

To the amendment. Are you ready for the question?

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. To the amendment. All those in favour? All those opposed? The amendment is carried.

---Carried

To the motion as amended. Are you ready for the question?

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour?
Opposed? Motion is carried as amended.

---Carried

Further comment, Mr. Dent.

MR. DENT:

Mr. Chairman, people served by local health and social service committees seem most happy with the way those services are delivered in their communities. These organizations seem to give local residents a greater sense of participation in and ownership of these important services. This process must be encouraged, but the committees should not be imposed on our communities. They must be established only at the request and direction of people at the local level who can best determine their requirements.

Committee Motion 8-12(4): To Adopt
Recommendation 4, Carried

Therefore, Mr. Chairman, I move that this committee recommend that local health and social service committees be recognized as essential to the delivery of these programs. The development of local committees should be encouraged and progress should be reported to the Legislative Assembly during each budget session.

CHAIRMAN (Mr. Pudluk):

The motion is in order. To the motion. Mr. Gargan.

MR. GARGAN:

Just for clarification, particularly with regard to social service committees, I'd like to ask whether or not those committees that give assistance to people are following the policy guidelines, with regard to assisting people. I recognize that social workers, when giving assistance, are required by law to go according to the guidelines established by this government. I'd like to ask whether or not those boards determine who gets assistance and who doesn't. Is it based on those guidelines?

CHAIRMAN (Mr. Pudluk):

Thank you. Clarification, Mr. Dent.

MR. DENT:

Mr. Chairman, I think perhaps the Minister of Social Services may have to address this question because I believe that Mr. Gargan is referring to the Social Assistance Appeal Committees. Our recommendation here doesn't deal with social assistance appeal committees. These are advisory committees that often operate in communities. Typically they are appointed by the local hamlet council and they provide advice on health and social service issues within the community.

CHAIRMAN (Mr. Pudluk):

To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour?
Opposed? Motion is carried.

---Carried

Further comment, Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. The people who provide our health and social services must become more sensitive to the culture, traditions and languages of the people they serve. This is essential if our front line workers are to be viewed as credible and positive members of the community in which they work.

Committee Motion 9-12(4): To Adopt
Recommendation 5, Carried

Therefore, Mr. Chairman, I move that this committee recommend that an effective cross-cultural training program must be established and made compulsory for all new front line workers and for those working in cross-cultural situations.

CHAIRMAN (Mr. Pudluk):

The motion is in order. To the motion.

AN HON. MEMBER:

Question

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour?
Opposed? Motion is carried.

---Carried

Further comment, Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. Part of this increased sensitivity to our different communities must be an acceptance of the different forms of healing that are practised in the Northwest Territories. A number of people take a more holistic approach to health, addressing spiritual as well as physical matters.

Committee Motion 10-12(4): To Adopt
Recommendation 6, Carried

Therefore, Mr. Chairman, I move that this committee recommend that traditional healing methods must be recognized, funded by government and incorporated into our system of health and social services.

Page 159

CHAIRMAN (Mr. Pudluk):

Thank you. The motion is in order. To the motion.
Mr. Gargan.

MR. GARGAN:

Mr Chairman, when I did a presentation to the board, one of the things that I questioned was why we assume automatically that the ideas and values which evolve in Europe are better than the traditional Dene ways. Again, this is a good example of this, where we assume that because health and social services are there, that the traditional healing methods must be not only recognized but must be able to fit into the existing system. I disagree with that mythology. I think what we need here is that it should be recognized and funded, but it doesn't have to be incorporated into the existing system. I think communities that have people who are knowledgeable in those areas should be encouraged to go to them if there are certain illnesses that they would prefer going to a traditional healer for, as opposed to their local nursing station. Again, just like the aboriginal cultural inclusion programs, we go to the nursing stations to see a traditional healer. I disagree with that principle.

CHAIRMAN (Mr. Pudluk):

Mr. Gargan.

MR. GARGAN:

Mr. Chairman, somewhere along the line, people have to recognize it is their method of healing people and it is up to other people to accept that.

CHAIRMAN (Mr. Pudluk):

To the motion. Member for Thebacha.

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman. Mr. Chairman, it appears that the Member believes this method should be recognized and that it should be funded by government, but not incorporated into the health and social services system. He states that it should be left alone, but the government should pay for it. That is my understanding of the Member's comments. I would like to speak to this motion.

Traditional healing methods should be recognized and funded by the government. Currently they are not recognized by the government and, since they are not recognized, there is no consideration for payments for this method. However, to state that the government shouldn't incorporate it into the system, I don't believe is a way to address it. I believe this government is a government for the people and the aboriginal people have dealt with different ways of traditional healing methods. I believe that it's time this government recognizes that and pays for it.

I don't believe the clinical approach they take to healing methods is the way that we should just graciously accept because it has been imposed on native people. I certainly agree fully with this motion and feel it is time this government be reflective of some of the native traditions and values. We need to start incorporating them into this system that is supposed to be our system. Therefore, I fully support this motion, Mr. Chairman. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. To the motion. Mr. Lewis.

MR. LEWIS:

Thank you, Mr. Chairman. It seems to me everything revolves around this word "incorporate." If you want the government to be involved in anything, it seems to me you have to find some relationship that exists. Perhaps it really boils down to something as simple

as finding a substitute word for "incorporate" because I don't think it has anything to do with whether you go to the nursing station. It may be as simple as trying to come up with a schedule of fees. Once you have done that, and it is going to be funded through a policy of the government, it will be just like any other professional person hanging up a sign, and people may do it in a different, more quiet way in their community. At least find some way of recognizing the important role that people play, but not to be worried about the word "incorporate" meaning something is going to be hidden by the government. People should be treated with respect for the service they offer and they should be paid for their services. If that means incorporating, I am in favour of it. If that is what we mean by incorporating, I am in favour of the motion. Thank you.

CHAIRMAN (Mr. Pudluk):

To the motion. Mr. Gargan.

MR. GARGAN:

The aboriginal people who work in those areas don't view this as dollars and cents. If a person prefers to have certain plants boiled for them because they have a sore throat or rat roots for their cold, then those are things you cannot store in a nursing station. You have to go out on the land. It is a different method. It is not something you pick off the shelf.

Another thing is you pay homage to those people who have helped you and you don't do that with cash. You do that with other than cash. It could mean tobacco, meat, et cetera. To have it blend into the existing health and social services system doesn't make sense. I think Mr. Arngna'naaq made a statement on that this morning. There is a difference. That is how we have to look at it. Let's not accept a motion that says the culture must fit into this system, as opposed to the system trying to fit into the culture. That is my whole point.

(Microphone turned off)...make a motion and suggest traditional healing methods must be recognized.

CHAIRMAN (Mr. Pudluk):

Mr. Gargan, are you making an amendment to this motion?

MR. GARGAN:

Yes, Mr. Chairman.

CHAIRMAN (Mr. Pudluk):

Would you read your amendment, please.

MR. GARGAN:

Mr. Chairman, whether the government wants to fund it or not, I think research should be done. But for traditional healers to be funded by the government doesn't make any sense to the aboriginal culture. If they were recognized in the communities as such and there was a requirement to do research in that area, I would certainly support something like that. But at this point in time, just recognizing them would be a step in the right direction. So I am just suggesting that, "incorporate into our system of health and social services" should be deleted.

CHAIRMAN (Mr. Pudluk):

Thank you, Mr. Gargan. It still isn't clear to me if you are making an amendment to this motion.

MRS. MARIE-JEWELL:

He is trying to, Mr. Chairman.

Page 160

Committee Motion To Amend Recommendation 6,
Defeated

MR. GARGAN:

Mr. Chairman, I move that "by government and incorporate into our system of health and social services" be deleted and that the recommendation will say, "Traditional healing methods must be recognized."

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Patterson.

MR. PATTERSON:

Thank you, Mr. Chairman. I think I understand what Mr. Gargan is getting at, but I have to respectfully advise him that money does, whether we like it or not, matter and even make the world go round. We heard in Fort Simpson and in Fort Providence from people who wanted to use traditional healers. We were given the name of a healer who was known to be effective in Alberta. In some cases, the local nurses wanted to help, but without being recognized and funded by a medicare system, staff had to go to real convolutions

to cover the expenses of travel, for example. We found that by going through great bureaucratic adventures, people who didn't have the means were able to be helped to get to this traditional healer in Alberta. But, it was done in spite of the system and not because of the system. I think our recommendation will deal with simple question like how you transport a patient who wants that help to get to a location. Those are real costs that many people simply do not have the means to meet themselves.

With the greatest respect to Mr. Gargan, I think if we are going to accept our commitment to traditional healing methods, we have to back it up with real money, just like we do with the clinical medical model approaches. I think we have to go further and acknowledge the need for money. I will not support the amendment.

CHAIRMAN (Mr. Pudluk):

To the amendment. Mr. Antoine.

MR. ANTOINE:

Mr. Chairman, I would like to speak on the motion and the amendment. I am glad to see such a recommendation coming out. In my part of the world we sometimes use traditional healers to help some of our people who are not well. We've been doing that since time immemorial and we continue to do it today. There are different healers in the north, in Canada and in the states who are renowned for helping people out in different areas.

I'm glad that they'll be recognized. In terms of being funded by government, I think we have to have some funding for that area. We may need to bring someone in from outside of the community and it costs, nowadays, to travel. A lot of them don't ask for very much. They might just ask for travel funds, for gas or maybe for a plane fare. Because of that, I think we need to have "funded by the government" in there.

We may have to send somebody out to see people down south and that costs money. It also costs money to bring them in. We've done that a number of times in my area, where we were fortunate enough to know people who could come and help us out sometimes. It costs us money nowadays. Because of that, along with recognizing the healing methods of aboriginal people, we should also recommend that this practice be funded by the government.

As for incorporation into our system of health and social services, I don't have any problem with it. Maybe the health and social services system could help out sometimes when we need to arrange for somebody to come in or send somebody out. In this way, we need to have a system in place to identify how this healing process could be funded. I see a reason for having it incorporated into the system.

I know what my honourable colleague, Mr. Gargan, is saying about traditional healers. They don't expect to get paid cash. They have never done that and I don't think they would start. The idea is they have the gift from the Creator to help people and this is how they see things. They are more like spiritual people. They don't ask for compensation. As long as you get them from one place to another -- which costs us money -- that's all they are concerned about.

I am speaking in favour of this recommendation. Mahsi.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. I think Mr. Antoine has really hit on what we heard when we went to communities. The concern in particular is for the costs of travel. People thought travel should be incorporated into the system, to make sure it was available for them.

As Mrs. Marie-Jewell has suggested, our system needs to make sure that it does recognize traditional healing methods. It has to be forced to do that. I don't think the recommendation, if it doesn't include the funding part, is forcing that to happen. It leaves the door open for the government to say, "Sure, we recognize them. People can use a traditional healer anytime they want." But, if the money isn't there, then I don't think we are doing any more than paying lip service to it. It hasn't made it a real part of our system, which is supposed to serve all people. I think we have to make sure that the recommendation includes money. I think I'm going to have to vote against the amendment as well.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Arngna'naaq.

MR. ARNGNA'NAAQ:

Mr. Chairman, I would like to say a few words about the motion and to the amendment as well. In our culture, I do not know of any traditional healers any more. They were around. There could be some around, but I'm not aware of any. If they were around, I believe this is something my people would want to see at least recognized by this government.

I think traditional healing, where there are such methods still around, must also be recognized. When they are recognized, I believe they should be funded in increments. If there are incremental costs associated with the recognition of traditional healing, I would agree with that. But to incorporate a traditional system into our system, which is the government system of health and social services, I would have to disagree with.

Too often we try to incorporate part of our traditional methods and they are overpowered by the government system. I spoke earlier this afternoon about the cultural inclusion program, which was recognized by this government, funded by this

Page 161

government and incorporated by this government. With the recognition comes funding. With incorporation comes depletion of that particular culture. I would say that I would have to agree that traditional healing methods must be recognized and funded by the government for incremental costs. But, I do not believe it should be incorporated into health and social services. Thank you.

CHAIRMAN (Mr. Pudluk):

If you would try to keep to the amendment I would appreciate it very much. To the amendment. Mr. Pudlat.

MR. PUDLAT:

(Translation) To the amendment. I don't know if I will be speaking to the amendment, but to the motion with regard to the traditional healing, I have been saved by traditional healing in the past. I am not aware if the traditional healers were being paid at that time, but I have seen traditional healers practising their tradition. I will be supporting the fact that if traditional healing was to be incorporated, that travel should be funded for the patients. I just wanted to state that I have seen traditional healing being practised in the past and I know that there are a lot of Inuit people who are

aware of the tradition being practised. I will be supporting the motion. Thank you, Mr. Chairman.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Zoe.

MR. ZOE:

Mr. Chairman, I agree with the comments that are made by my colleagues on this side of the House, but I would like to differ with my colleagues to my right with regard to the amendment that he is proposing. I think that it is quite appropriate that we do recognize our traditional healing methods and to be funded by our government. I think the departments of Health and Social Services policies have to reflect that in order for us to recognize our traditional healing methods. I'll be voting against the proposed amendment, but I would like to make a suggestion after that amendment is voted on. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Gargan.

MR. GARGAN:

Mr. Chairman, every summer, around the middle of July, people from at least the southern part of the Mackenzie go down to a place called Lac Saint Ann on a pilgrimage. There are miracles happening there. All those people go there on their own. When that is over, you will see vehicles and vehicles, especially from Fort Rae, coming from this pilgrimage. The whole purpose of healers is not something that is given to just any aboriginal person. Some people have it. Some people feel hopeless because they don't think they can be cured. I refer them to several people down south who do work in those areas, but those are all done on the basis of your state of mind. You have to be able to go over there with good intentions. It's a pilgrimage. You are in a state of mind to either be cured or not cured. It is all based on how you get there. That doesn't happen if you are going to have people buying tickets for you to jump off a plane and you go with those people. You have got to be able to prepare yourself while you are travelling. That is what I mean, it doesn't work if you are not in the right state of mind to see those people. That is why I said it is not all dollars and cents.

If I was in Fort Providence...for example, my mother still does it. She still gathers roots, she still gathers plants, and I go to her when I have physical problems. But I go to the nurse if I had a broken leg or

something like that. If I can't see, I go to see an eye doctor. The method of delivering that kind of healing is not based on whether you have a lot of moolah in your pocket. It's all based on a state of mind. For those people who did go on their own, the results are quite amazing. We see this happening...The very traditional being incorporated into the existing system is nothing more than a system that really doesn't mean anything because the healing doesn't happen.

You have to be able to make a lot of sacrifices and that is the whole purpose of healers. Also, it is a community effort; people find that if a member of the family is sick and that it will require that this person travels, it becomes a community concern as opposed to a government concern. Again, I use the example of Fort Rae, they raise money to go to those events. That is the only point I am trying to make. A statement was made by the international...linguistic genocide. The United Nations is saying that 50 out of 53 aboriginal languages in Canada are expected to perish. Now why is that? Is it because it's in the existing system that it is doing that? If it gets gobbled up by the system, then it no longer exists. I believe that even funding it, I'm afraid, will lead to the extinguishment of those healers.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Lewis.

MR. LEWIS:

I will be very brief, Mr. Chairman. I think every culture all over the world has the idea that there's a natural, traditional way of helping people to get better and it's been passed on for hundreds and hundreds of years. You learn that this kind of plant will cure a headache or a certain plant will heal a cut quickly. The old doctors were called herbalists. In other words, they were experts on all kinds of plants. It is very often inherited from one generation to another, that knowledge is passed down. It exists all over the world and there is a movement as well to have traditional, natural ways of helping people to become better recognized somehow. That is what is meant in this motion. Why don't we recognize there is expert knowledge always passed from one generation to another about the different ways in which you can help people who are sick. If you just say let's recognize it, then what does that mean? It has to mean something. It seems to me that if you are talking about healing, you are talking about someone who has a certain knowledge about how to do something. If you know who those people are, the

kind of gifts they have and the service they offer, then I have no problem in finding some way of recognizing them. But it is not good enough just to say, I recognize it. We all know they exist. It is already a fact. But how is that manifested? Is this a service that people take advantage of? So I find it difficult to support a motion that is so general that it only confirms what we already know. There is nothing new added to it. Thank you.

CHAIRMAN (Mr. Pudluk):

To the amendment. Mr. Whitford.

MR. WHITFORD:

Thank you, Mr. Chairman. I listened very carefully to what my friend Mr. Gargan had to say and I think I see what he is alluding to. I must agree with him to some degree. I lived in a small community, like many people, and I

Page 162

know people who are good at doing certain things. If you ache or have a problem with sleeping -- it even went as far as dealing with fertility -- you would go and visit that person. That still exists to some degree in some of the communities, not only here in the Northwest Territories, but elsewhere. We have always done this and it is good. But there are different things we have adopted over the years, now more toward the more conventional methods of treatment. I agree with Mr. Gargan, if I get an ache and pain that is one thing, but if I have a broken leg, I will go to see someone who knows how to fix broken legs. The difficulty that I see in such a motion is not in the fact that we should recognize them -- yes, we should recognize that is a part of our heritage that we should continue -- but the difficulty is the funding by government and incorporating it into our system of health and social services. Now, in social services it is different. We have people who are very compassionate and good listeners, the old folk and some young folk too. They can listen to people and help them deal with problems. But when we start getting into the health field, it is a bit different.

I see a problem when we start introducing funding into this. Who do we give the money to? Is it one group of healers? Anything we do in health today has strict rules and guidelines they use before a person is allowed to practice medicine anywhere. Without being flippant about it, I would say the Department of Health and this government's regulations are going to

kill this before it even gets off the ground, just given the regulations that would be required before funding is given.

Seriously, how would we gauge what we should be funding? Is Lac Ste. Anne something we should be funding? I know people who have gone there. People go to Parry Falls, near Lockhart River, for traditional healing and without funding. There is transportation, but it is incorporated into another part of our program. I don't know if it is dealing strictly with traditional healing. If we start putting money into this, it takes on a whole different character.

I would like to support the part where we recognize it, yes. I would like to support the part where we encourage it, yes. I would like to support something like this to continue with the people who do understand and go about learning these things from elders, yes. But when it comes to seeking funding from the government to do this, I have difficulty in understanding exactly who we are talking about, who should be getting funding. If it includes midwives, that is another thing that is different. I don't fully understand it, therefore, I would not be able to be supportive of the funding part of it. I think there are many problems we are going to be facing and it may take away from that community and the traditions that exist today, once we start doing that. Thanks.

CHAIRMAN (Mr. Pudluk):

Thank you, Mr. Whitford. To the amendment. Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. I think we should be aware that we are not just talking about physical health. We are talking about what are traditionally social services types of things also. We have this recommendation because we have heard from so many people across the territories. That is why it is here. People told us they saw healing circles and land-based camps where people can learn traditional knowledge which is very relevant in treating a number of the social problems that face their communities. They told us they needed to be able to bring in the people to facilitate the healing circles in their communities so they could start the healing process. They told us they needed some assistance to get some land-based camps going. They also told us they wanted to be able to use elders to provide counselling to help people deal with problems they had and the elders told us, we think we should be recognized as part of the system

and we are not expecting a lot of money. We have people come over and sit around. We have tea. If there are some expenses, we expect that should be compensated. Those are things we heard from the people in the communities. That is why we have made this recommendation dealing with money. The people out there told us that that was what they wanted.

When it comes down to the clinical health side of it, I mentioned to the committee it was with some interest I noticed that the Canadian Medical Association, in its presentation to the Royal Commission on Aboriginal People this week, said the Canadian government must recognize traditional healing. They had to recognize that when an aboriginal person is going to a traditional healer, it is as much for the spiritual side as anything else. There is no way they can get that sort of healing from a non-aboriginal healer. But we have to make sure our system is set up to accommodate the people who want to be able to get there.

As Mr. Arngna'naaq has pointed out, there are not that many traditional healers around in the north. We heard that from a lot of people. It is the same problem that has been faced by many aboriginal societies around the world. When I visited the Navajo Nation earlier this year, they were very proud of how they had established a training program for traditional healers. It wasn't run by non-aboriginals. It was a few of the aboriginal healers who were still around. They got together and said, why don't we run a training program for people who have an interest and an ability to learn this program?

They couldn't have done it without some financial help. If you take the financial help out of this motion, you've made it so weak that we don't ask the government to do anything. We give them all sorts of ways to get out of this. We heard this issue raised in every single region we went to. This issue was raised in every single region. It was raised in our first trip to the Keewatin, it was raised in our last trip to the high Arctic, and in every region in between.

People told us they expected their government to be responsible for bearing some of the costs of providing these services. I think if the Canadian Medical Association is willing to recognize that they can't -- with modern technological advances -- solve all the problems and they recognize that aboriginal people have a place in the world, I think we -- especially up here -- have to be willing to agree that we're behind the times. We should have been doing this all along.

But if you don't put any money in here, Mr. Chairman, then I'm sorry but I think we're passing a gutless motion. I think we've got to have the guts to say to the government, you've got to do something and we want you to put your money where your mouth is.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Koe.

Page 163

MR. KOE:

I agree wholeheartedly with my colleague, Mr. Dent. People across the north, as Mr. Dent mentioned, are crying for help. They are crying to be healed. They are crying for all kinds of processes. We've been saying all along -- everybody that I've talked to -- that the current methods don't work. They want something different.

In the province of Manitoba and in some parts of Alberta and Ontario, the hospitals and the system recognize traditional healers and they use these people in the hospitals to help heal people. We have big problems in alcohol and drugs and that is why social services is here. We have big problems in trying to heal people and work with people with alcohol and drug addictions. We have probably the best training system that I'm aware of -- the Metis Institute, out of Edmonton -- and yet, our system doesn't recognize the people that are trained out of there.

The certificates they receive aren't used in the north. The people that go out come back with certificates that aren't recognized as part of whatever degree they're going for, for alcohol and drug training. The alcohol and drug centres in Dettah and Hay River are built there to use the methods and the people that are there -- the traditional aboriginal healing circles and elders. That's why they are there.

As Mr. Dent mentioned, they need a little something else on top of their traditions. They need cash, whatever, to help them go on. They may have to travel somewhere. None of our aboriginal organizations or volunteer groups have the kind of money to bring people from here to there to do these things. It has to have some teeth and that is why the recommendation was made like this. I don't support changing this motion. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Arngna'naaq.

MR. ARNGNA'NAAQ:

Thank you, Mr. Chairman. I understand what the committee members are saying. I believe I also understand what Mr. Gargan is trying to say. I have seen too many instances where the system -- as we as aboriginal people had -- was used by the people in the immediate area. Traditionally, there was a legal system, a way of correcting people when they had legal problems.

Once the southern Canadians came up north, that was completely destroyed. There is no evidence of it here today in the north. That is what happened when our system of government, a western-style of government, tried to incorporate a traditional method. It overpowers it to the point where it is completely destroyed. Another example is the cultural inclusion program which I spoke of today. Traditionally, this type of program would be taught by parents, uncles or aunts. It is as though the aboriginal people handed this type of teaching to the government on a silver platter saying here, you take it, run with it.

What we have now is a program that is defined by a government who has no understanding, whatsoever, of what my culture is all about. Here we have a cultural program which is recognized by the government, funded by the government and incorporated into the system and has left our young people with an inability to follow traditional lives. All they can really do, in most cases, is finish high school and go on social assistance. They are really not able to hunt or trap and they have nothing to fall back on, traditionally.

What I'm trying to say here is that I believe this government should recognize traditional healing methods -- what little there is left -- and that it should be funded perhaps in emergency cases where a person with medical staff in that community is not able to assist. But, to incorporate the traditional healing methods into our health system, I believe, will slowly deteriorate the traditional methods.

I'll go back to the cultural inclusion program because I've been thinking a lot about that. If the government had recognized this and funded it and gone at the speed at which the people in those communities decided that program should go, then I believe we would have had programs that are effective, run by the people, funded by the government and recognized

by the government. They would be effective programs which young people would be able to use.

I stand by what I said earlier about traditional healing methods, that they must be recognized by the government and funded to some extent by the government. But, I believe they should be incorporated by the government at the speed at which the people who have the traditional methods want. If they would like to see it incorporated into the government, then it should be up to them to decide how and when it should be incorporated. Thank you.

CHAIRMAN (Mr. Pudluk):

To the amendment. Mr. Gargan.

MR. GARGAN:

Mr. Chairman, I was also down in the Navajo nation several years ago, and one of the things that makes those programs and teaching so different is that it is not part of the mainstream of society. It's an independent thing. They have their own schools for cultural programs and, within that, they do have traditional healers that teach what knowledge they have in those areas. The success of that is because it's independent. It's not incorporated into any government agency.

The other thing, Mr. Chairman, is that, with regard to the traditional healers, I think I'm getting the message straight. Looking at shamans -- or medicine men, as they are called -- and herbalists, those are the people who have knowledge in those areas. Once you incorporate something like this, it becomes known to everybody else, but practising it doesn't mean much if you're not knowledgeable about the whole intent behind it. Ginseng...Rat roots are something like ginseng, too. Again, it's a secret of the oriental people but it's been manipulated by western technology now. It's being grown in abundance and it's used now, people buy them at very exorbitant costs -- maybe the copyright should be the Japanese or Chinese people but that is not the case.

So, perhaps then, incorporate means that this government has to be able to say that under the non-insurable health benefits agreement, these are the plants that we will cover or these are the plants that we won't cover. For the Metis people, these are the categories that we will fund. If you want to see a traditional healer, this is it. So it becomes a bureaucracy when it shouldn't be. I agree with where Silas is coming from in that area.

The other thing, Mr. Chairman, is that the courts recognize custom adoption and practice it as such, but it doesn't matter whether or not it's recognized. That fact remains that we still have a lot of aboriginal people who are adopted by non-aboriginal people through their private adoption legislation. So by virtue of incorporating this, we then have it in some kind of legislation. It's incorporated, it becomes law, it no longer is recognizable, it doesn't belong to the aboriginal people any more. It belongs to the system. The ownership belongs to the system. The responsibility to deliver then lays with this government. It no longer is the ownership of aboriginal people. I think that's my point, if the intent of the motion is to do that, I don't think Members should support it. I think traditional healing methods must be recognized and should be funded, but should we incorporate it, too? All the success of programs that Mr. Dent alluded to, is not because it was incorporated but because it wasn't.

CHAIRMAN (Mr. Pudluk):

Thank you. To the amendment. Mr. Zoe.

MR. ZOE:

Second time around, Mr. Chairman, to speak to the proposed amendment. Mr. Chairman, from listening to various Members speaking to this particular issue, to some degree, I agree with the comments that are being made, but in my view they are mixing up the issues. The issue that my colleague on my right is referring to is a global issue, where he's suggesting why incorporate the culture or the traditions of aboriginal people into the government system. It should be the other way around or left alone.

Now, on this particular amendment that's being proposed, it doesn't reflect that. The issue at hand doesn't allude to that particular issue. So the issues are being mixed up here. If you're talking specifically on this particular issue that's at hand, they're basically talking about acceptance of the different forms of healing that are practised here in the Northwest Territories.

A number of people take a more holistic approach to health, addressing spiritual as well as physical matters. Now, if you are speaking to that particular issue -- the proposed recommendation -- I agree with the way it's written but the method of the way it's written I don't agree with. After the vote takes place, I

would make a suggestion that we substitute for instance, "our system" or take out "system of" and also include at the end of "social services" the word "policies." The new wording would be, "Traditional healing methods must be recognized, funded by government and...

CHAIRMAN (Mr. Pudluk):

Mr. Zoe, we are dealing with the amendment at the moment. Maybe after the vote takes place, you can make that suggestion. We have to deal with this amendment first. Thank you for your patience. Mr. Zoe.

MR. ZOE:

Mr. Chairman, I am speaking to the amendment. I am opposing it because of the way the amendment is being proposed. Currently, they are deleting the last portion of the motion that is in front of us. That takes away from the intent of the rationale given to us under Section 6. Without the rest of the comments in that motion, it doesn't serve its intended purpose.

I think the Members are getting all the issues mixed up. Some are looking at a global picture, some are being more specific. I think that Members have to concentrate strictly on what is in front of us and speak directly to the amendment. Thank you.

CHAIRMAN (Mr. Pudluk):

To the amendment. Are you ready for the question?

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called, but I don't have a quorum at the moment. Ring the bell. To the amendment.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour?

---Laughter

All those opposed? The amendment is defeated.

---Defeated

Now to the motion. The motion is in order. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. Mr. Zoe.

MR. ZOE:

(Microphone turned off) is that we delete "and incorporate into our system of health and social services."

CHAIRMAN (Mr. Pudluk):

Okay, the amendment is in order. To the amendment. Mr. Gargan.

MR. GARGAN:

I think most Members did say that the traditional healing methods must not only be recognized but also funded. I think the Members will generally be happy with that motion.

CHAIRMAN (Mr. Pudluk):

To the amendment. Mr. Pollard.

HON. JOHN POLLARD:

My understanding is that the amendment is going to delete "and incorporate into our system of health and social services." Am I correct, Mr. Chairman?

CHAIRMAN (Mr. Pudluk):

Yes, that is what I heard, delete "and incorporate into our system of health and social services." Mr. Pollard.

HON. JOHN POLLARD:

Might I suggest, Mr. Chairman that the word "and" might have to be inserted in between "recognized" and "funded."

CHAIRMAN (Mr. Pudluk):

There has already been an amendment to this recommendation. The mover could withdraw his amendment and make a new amendment later. To the amendment. Are you ready for the question?

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour? All those opposed? Motion is defeated.

Page 165

---Defeated

Now to the motion. The motion is in order. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Are there any further comments? Member for Thebacha.

MRS. MARIE-JEWELL:

Mr. Chairman, traditional and medical methods can work together in a number of areas. Childbirth is one of these. Many women want the option of deciding how and where to deliver their babies. Options include the use of midwives and other local resources in addition to regional hospitals. Women should be able to make an informed choice between these options. Adequate information should be available to assist women in making these decisions. Women's groups should be part of the process to develop legislation needed to achieve this goal.

Committee Motion 11-12(4): To Adopt Recommendation 7, Carried

Therefore, Mr. Chairman, I move that this committee recommend that women should be able to make an informed choice about where they wish to deliver their babies. Legislation should be developed to recognize midwifery within the health care system.

CHAIRMAN (Mr. Whitford):

Thank you, Mrs. Marie-Jewell. We have a motion on the floor. To the motion. Mr. Zoe.

MR. ZOE:

Mr. Chairman, I agree with the preamble to the motion but I think the first line of the motion, "Women should be able to make an informed choice about where they wish to deliver their babies," in my view, is too general a statement. In the preamble it says, "in addition to regional hospitals," does that mean somebody from the eastern Arctic can request that she can give birth in the Inuvik regional hospital, at home, or at the clinic in the community?

The way I read it, it sounds like it is up to the individual to make that choice. It says, "where they wish to deliver their babies." That could be anywhere. Maybe it is too general. I wonder if the mover would consider making it more specific, instead of leaving it so general? My interpretation is that an individual can choose to give birth somewhere other than in the community, or at home, or at the regional hospital. It could be Edmonton, Churchill, anywhere. I think it's too general. I wonder if the mover has taken into consideration the way that this motion was drafted? Thank you.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Zoe. To the motion. Mrs. Marie-Jewell.

MRS. MARIE-JEWELL:

Mr. Chairman, just for clarification, we had a fairly lengthy discussion in regards to this and basically a woman's option now is very limited. Midwifery is not considered with our government and there are many women that have to go out of the community. We basically put these options forth in the preamble, indicating that there should be other local resources in addition to regional hospitals. If a woman's choice is to have her baby at home, if a woman's choice is to have her baby in the community, in the hospital or health centre, then that's the choice of the woman. I think the point we are trying to get across to the government is let the women have the ability to make the choice prior to the delivery of their babies.

CHAIRMAN (Mr. Whitford):

Thank you, Member for Thebacha. To the motion. Member for Deh Cho, Mr. Gargan.

MR. GARGAN:

Thank you, Mr. Chairman. Mr. Chairman, there were 18 of us in my family, 15 of us were born out there

somewhere in Denendeh with no assistance. In a lot of cases, even my mother, didn't have assistance in those deliveries. My mom would be recognized in the community as a midwife, so would my sister. The problem is that even though we recognize it and women should be able to make an informed choice, the choices are not always there to determine that and the technology is not there. Women are still going to Edmonton or to Montreal to have their babies because of the possibility of complications. I'm not an expert in that area. I have never talked to my mom or my sister about this whole area so I can not honestly say that I'm an expert on it. I appreciate that it should be recognized but once again it must fit into the system in order for it to be recognized. I have problems with that.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Whitford):

Question has been called. All those in favour? All those opposed? The motion is carried.

---Carried

Mrs. Marie-Jewell, Member for Thebacha.

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman. Mr. Chairman, for us to achieve healthy communities we need to stop family violence. In spite of the GNWT policy against family violence, too many people are still being abused. In particular, we must increase our efforts to end the violence against women and children.

Committee Motion 12-12(4): To Adopt Recommendation 8, Carried

A policy of "zero tolerance" toward violence must be adopted by the government, and widely publicized.

CHAIRMAN (Mr. Whitford):

Thank you, Member for Thebacha. We have a motion on the floor. To the motion. Mr. Gargan. Mr. Lewis.

MR. GARGAN:

Just with regard to the preamble, I have no problem with the recommendation. But, is there a reason why it's just women and children or should it be all persons?

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. Member for Thebacha.

Page 166

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman. I believe the other recommendations in regard to the elders and to all of society...I agree with the Member that it shouldn't be specifically targeted to women and children but I believe that from statistics that we have received and comments that we received as a committee when we crossed the north, there was concern to recognize that every effort has to be made to end violence against women and children. Therefore, these are some of the reasons why the committee put it in this context. I will tell you that we certainly recognize elder abuse. We recognize that there is elder abuse. We recognize that there are many other forms of violence and abuse and have attempted to deal with them in other areas of this report. Therefore, this is why we have stated women and children, but we certainly would encourage Members that we have to make our effort to end the violence in our society. It's basically what it should have read. That's what we are trying to encourage. Thank you.

CHAIRMAN (Mr. Whitford):

Thank you, Member for Thebacha. The Chairman recognizes Mr. Lewis.

MR. LEWIS:

Thank you, Mr. Chairman. The words "zero tolerance" have been used quite extensively over the last several months and certainly I believe that people accept the idea that this is a good way to describe what you would like to have as an attitude throughout your society, but when you use the word policy -- it's our policy -- policy normally means a commitment of a service to the public that you serve. So, whenever you enact any kind of policy you have to know what it means. What does that mean if you do that? Does it mean that it imposes something on the public service? We are talking here about the government adopting a policy so you are assuming, therefore, that it has to do with the way public servants within the public service behave.

Before we can vote on something like this, we have to have an understanding of what exactly a policy of zero tolerance means in active, real, concrete terms. What is expected to be done to those people that don't practice zero tolerance? I want to be sure we are adopting more than just nice sounding words. To me, and I used the example today, that we have zero tolerance towards violence in this Assembly. If somebody decides to strike somebody, they're history, they're out of here. That is zero tolerance. In this Chamber, there is zero tolerance towards violence; you know that if you practice violence something will happen to you. So what does it mean when the governments adopt a zero tolerance policy? Does it mean, for example, that if somebody strikes somebody in the workplace, in a government workplace, that they will be fired automatically? Or does it mean that they will be sent home for a week without pay? If we talk about words, they may sound good but are there any teeth to it? Does it mean anything? Is it more than just something that sounds nice and sounds right? I know that the public very often feels that words used in any kind of political arena are just that, unless you really put teeth into it. You must mean what it is that you are committing yourself to do, if in fact violence continues in the workplace or violence continues in communities or whatever. I would like to have an understanding from the committee chairperson or any other Member of the committee as to what is meant by it. What do we mean by zero tolerance adopted by the government? What does the government intend to do in the area of policy making on this particular issue?

CHAIRMAN (Mr. Whitford):

Merci, Mr. Lewis. Mr. Kakfwi.

HON. STEPHEN KAKFWI:

Mr. Chairman. The wording of this recommendation is what I wanted to address. The government already has taken a policy of saying that it recognizes the problem of the continuing escalating violence against women and children in the north. We have set up programs and certain initiatives to show that as a government, we're addressing this problem and that we are putting some money and some effort into helping communities and organizations address the problems.

Members have raised the point that the more elderly citizens of the Northwest Territories are also victims of violence and that might be, and perhaps should be, referred to in this recommendation. The way I read it,

when it says the government here, it should be more explicit that it's talking about the Cabinet and Members of the Legislative Assembly, that we must each individually adopt this policy as elected people. This is what I had spoke to earlier this week. I wanted to raise this because the recommendation is very short and I think it could be reworded with my suggestions in mind.

What zero tolerance means, implies I guess that there is some tolerance now for violence. There are people who suffer as victims of violence in the north and that as leaders, as a government and as people in authority and responsibility, we do allow the systems and the situation where many of these things are tolerated. We haven't taken a focused approach to addressing it and saying we must wipe it out. We must address it at the first instance possible. That's what the words zero tolerance mean. It means, those of us who accept this policy will not condone it, either from ourselves or from members of our family, our relatives, our communities or our leaders, and that we commit to addressing it in every instance and taking what measures are necessary following this commitment to addressing it.

We have to make a commitment to zero tolerance. It follows I guess, that it means for all people and we need to mention women and children and also the senior citizens of the Northwest Territories, then we should say that. It should not just be said to be adopted by government, but perhaps it should be more explicit by stating that it's the Members of this Legislative Assembly and the Members of this Cabinet who will adopt this policy. Thank you.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Kakfwi. To the motion. Mrs. Marie-Jewell.

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman. Just to attempt to answer Mr. Lewis' questions. Basically, as we travelled, there were many concerns with respect to family violence and there were many concerns and comments with regard to violence in itself. There were many expressions of what was acceptable to society with respect to violence and what should not be acceptable or tolerated. The concern that the public had was regardless of what type of violence we have out there, regardless of who it is against, whether it's elders, children, women, the disabled or any individual in society, that any form of violence should

not be tolerated. Zero tolerance basically means that no violence should be tolerated in any way, shape or form, to put it quite clearly.

Page 167

Mr. Chairman, it seems that there's some concern in the public that some types of violence are acceptable in some parts of society, or some places in society. Basically the public is saying that we have to make every effort to state to the public that no type of violence should be tolerated and that it should not be acceptable at all in our society. This is why we've recognized that the government has made some effort to deal with violence. We've recognized they've made an effort through providing shelters and to providing homes.

If you go across the territories, only some communities have safe shelters in the territories. When you look at stating that this type of thing should not be acceptable, we're basically saying that we agree, no type of violence towards any individual in society should be tolerated. Therefore, the government has to strive to develop a zero tolerance level of violence and it must be adopted and publicized and made every effort to get that message out to the public through their forms of programs and through their methods of communications. They have to let people in the territories know that they're serious in not tolerating any violence. Thank you.

CHAIRMAN (Mr. Whitford):

Thank you, Mrs. Marie-Jewell. The chair recognizes Mr. Dent.

MR. DENT:

Thank you, Mr. Chairman. I think Mrs. Marie-Jewell has made it abundantly clear that our recommendation does specifically say zero tolerance towards violence and we're talking about violence of any sort.

In answer to Mr. Lewis' question about what does this mean, we were aware when we were writing this report of the 1990 or 1991 policy that was adopted by this government on family violence. What we heard as we were travelling around was that it wasn't seen to have enough teeth. We were also aware at the time we were drafting the report that the Minister of Justice was working on a new draft policy for introduction in the House, which in fact he shared with us. That policy was tabled yesterday and it does

contain answers to what should happen in cases where things happen. I think the committee was generally supportive of the direction the Minister of Justice was taking with that draft, and we look forward to debating it in more detail in the House. But we saw that as being something that would be adopted as a policy by the government to replace the current one, which people told us didn't appear to be having the effect that was expected.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Dent. To the motion. Mr. Gargan.

MR. GARGAN:

Many Members did say that violence against any one should not be tolerated and I agree with them. But the other thing I would like to get clarification on is with regard to the meaning within the judicial system? Do we take away the rights of police forces? If a wife or a spouse reports that they have been hit, do we take away the RCMP's right of probable and reasonable grounds and say, violence has been reported and arrest this person, with no regard for circumstances. I don't know whether we are doing that. But I am sure if the police get the message that zero tolerance means exactly that, then that is the way they are going uphold the law. If a person decides her husband shouldn't go to the bar and reports it, they would automatically go to jail that night. I don't know what it means, but this is the way I look at it. Do we influence the judges to increase sentences for people who violate anyone?

I don't see as much senior citizen violence in Providence, but I do see a lot of men fighting amongst themselves. Those are the only exceptions to the zero violence? I have to look at it from that point of view. We don't have any RCMP, judges or lawyers here right now. I would appreciate it if Sheila were here to interpret it from a legal point of view.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. To the motion. Mr. Gargan.

MR. GARGAN:

Mr. Chairman, I am requesting that we get a legal opinion on that.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. We are going to fetch the law clerk. This may be a good time to take a five minute break.

---SHORT BREAK

CHAIRMAN (Mr. Whitford):

The House will come back to order after a brief recess. Mr. Gargan, for the convenience of the Members and the law clerk, who is here with us now to answer your concerns, would you be able to restate your question?

MR. GARGAN:

My question concerns the judicial system when we refer to zero tolerance towards violence. I know that when an offense is committed, normally police officers have probable grounds to arrest that person. If we were to adopt such a policy, does that compel the RCMP to not tolerate any violence? If violence is reported, then there are no questions asked? They arrest the person, investigate and if the report is frivolous -- regardless of whether the person did anything -- they are locked up in jail because of that policy being adopted. I would go further by asking whether the policy would have an impact on judgments being made by judges? That was my concern.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. The question is directed to the law clerk. Ms. MacPherson, would you be so kind to give us some advice?

LAW CLERK (Ms. MacPherson):

Thank you, Mr. Chairman. Mr. Chairman, the term "zero tolerance" doesn't have a definite legal meaning per se. It is more of an expression and a statement of the attitude that society has towards a particular subject. I do know that the federal Department of Justice policy, with respect to spousal assault, has often been described as a zero tolerance policy. However, even within that zero tolerance policy, it does not mean that charges are automatically laid in every family dispute involving violence. Under the Criminal Code, an officer who lays a charge has to have reasonable and probable grounds to believe an offence has been committed. Accordingly, if the officer doesn't believe the person who is saying an offence has been committed, he would not be able to lay a charge because he wouldn't have the reasonable grounds that are necessary to have in

order to go in front of a JP and say, "I believe this person committed an offence." Even within the federal government's own policy, it doesn't mean that all incidents automatically turn into charges.

Page 168

Their policy is that if the investigating officer feels there are reasonable and probable grounds to believe that an offence has been committed as a result of a domestic dispute, that the investigating officer shall arrest the person committing the offence, unless public interest dictates otherwise.

So their policy is, in all cases where they have grounds to believe an offence has been committed, they will arrest. But there is a precondition that they must believe an offence may have been committed. I hope that helps the Member, Mr. Chairman.

CHAIRMAN (Mr. Whitford):

Thank you, Ms. MacPherson. Mr. Gargan.

MR. GARGAN:

With regard to that again, just for clarification, where violence is against a woman or child does that take away from the impartiality of the courts -- by targeting specific groups?

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. Ms. MacPherson.

LAW CLERK (Ms. MacPherson):

Thank you, Mr. Chairman. I am not sure I understand Mr. Gargan's point. The spousal assault policy of the federal Department of Justice is phrased in gender neutral language. In other words, regardless of who the victim is, whether the victim is male or female or the victim is a child, the RCMP must lay charges if they have grounds to believe an offence has been committed. That policy is supposed to be gender neutral. If a man assaults a woman or a woman assaults a man, technically and theoretically it should not make any difference in terms of the officers forming the belief that an offence has been committed. Thank you, Mr. Chairman.

CHAIRMAN (Mr. Whitford):

Thank you, Ms. MacPherson. Mr. Gargan.

MR. GARGAN:

So even in our own reports, we should be referring to violence against all people, as opposed to specific groups?

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. Ms. MacPherson.

LAW CLERK (Ms. MacPherson):

I think the issue of whether one would want to target a program towards women, men or all people is a political issue. It isn't a legal matter. The current federal government policy on the issue of violence is gender neutral, but other people may have more to say about the issue of violence in our society than I do from a legal perspective.

CHAIRMAN (Mr. Whitford):

Thank you, Ms. MacPherson. Mr. Gargan.

MR. GARGAN:

You said that the policy is gender neutral, "While recognizing in most cases of spousal violence the man is the perpetrator. The policy seeks to ensure that full investigation and prosecution of spousal violence...It also seek to improve protection and assistance to victims..." When you refer to that is it because in all cases the perpetrator is always a man? Or is it because only charges are laid against men as opposed to women? Violence is caused against men also. It is reported and no charges are ever laid.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. Ms. MacPherson.

LAW CLERK (Ms. MacPherson):

Thank you, Mr. Chairman. I think that there are two very different issues here. The first issue is the gender breakdown of charges that are made in society and I think most people would agree that all of the statistics indicate that the vast majority of charges involve violence by a man against a woman. That's the first issue. The second issue is the reason for the disproportionate number of charges against men is because RCMP officers may discount violence that's committed by women towards men. I don't know the answer to that. I'm not sure if anybody knows the answer to that but there perhaps could be an argument that RCMP officers would be less likely to charge a woman with assaulting a man than vice

versa. I have to say quite clearly, for the record, that I don't have any statistics on that particular theory.

CHAIRMAN (Mr. Whitford):

Thank you, Ms. MacPherson. To the motion. Mr. Gargan.

MR. GARGAN:

Yes, Mr. Chairman. If it would be acceptable to the committee, maybe they could change their preamble to say, "to end all violence against all persons," or "everyone." I have no problem with the recommendation.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. I think this will be directed towards Mr. Dent. Mr. Dent, if you would care to respond?

MR. DENT:

Mr. Chairman, in fact, the recommendation -- the part that we're voting on -- does say a zero tolerance towards violence. It doesn't say anything about gender or age. It just says that all violence is unacceptable. We didn't put in the recommendation anything like that and in the preamble we do say that we need to stop family violence. That is what we heard when we were travelling around. People said for us to have healthy communities, we have got to stop family violence. We heard that people were still being abused. We also heard in every community that the problem was particularly bad for women and children. That's not to say that we didn't hear, as Mr. Gargan has pointed out, that sometimes violence goes the other way. You will also notice that in recommendation 19 in this report we specifically single out elder abuse. We heard that was a big problem too.

I must say that, as well as statistics which support that the vast majority of acts of violence are against women and children, that is what people say in the communities too. They told us that they expected our committee to come out and say that, in particular, we had to try and do something to address this sort of violence. Our recommendation doesn't say that there isn't all types of violence and it doesn't say that we see any type of violence as being less offensive than any other.

In fact, any type of violence is wrong and that's why the policy says "zero tolerance towards violence,"

against all persons. Just the way it's phrased, it's a policy of zero tolerance towards violence. That means no tolerance at all towards violence of any sort. That's what that recommendation means. It doesn't

Page 169

mean just women and children. It doesn't mean that at all. It means that any act of violence is one that we condemn. We want to see a policy in place which says that this government condemns it as well.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Dent. To the motion, Mr. Zoe.

MR. ZOE:

Mr. Chairman, I agree with the general tone of the motion and particularly with regard to zero tolerance towards violence but I have problem with the wording of the policy. We're directing the government to develop a policy of zero tolerance. I have difficulty with that; I don't know how the government would develop such a policy in regards to this. I'm just wondering, if they do develop this type of policy, who is going to enforce it? That is the main problem, I think. Maybe the wording should have been something to the effect that the principle of zero tolerance towards violence should be adopted by our government and widely publicized.

I think that would be more appropriate than requesting the government to put it in the form of a policy. I would strongly suggest to the mover of the motion that my suggestion could be incorporated. I can't see how the government can incorporate the wishes of the Chairman of the Standing Committee on Health and Social Services.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Zoe. In order to do that an amendment would have to be made to the motion but we are speaking to the motion that a policy of zero tolerance towards violence must be adopted by the government and widely publicized, as it reads. To the motion. Question has been called. To the motion. Mr. Gargan.

MR. GARGAN:

Mr. Chairman, last Wednesday, Stats Canada came out with a report on violence against women. They interviewed approximately 12,300 women over the

age of 18, but they excluded the Yukon and the Northwest Territories in the interviews. Mr. Chairman, I have no problem with the motion but I would also hope that when such publications come out that we look at them objectively. I'm afraid that if something like this is adopted then naturally the first reaction is that the men are the ones who are causing all the violence. I hope that is not going to be the intent of the publication. Just like the courts, this Assembly should be neutral and say that violence against all persons is unacceptable. I hate being slapped, you know.

The other thing, Mr. Chairman, is that in my own background, my own experience is that I have been violated quite a bit by women who were placed in trust. I won't bring it up and a lot of people choose not to bring up these things. We talk about the healing process and when we do that, when we develop those areas, you also have to look at disclosure. Alkali Lake is a good example of that. When the healing process happened, charges were laid and a lot of people went to jail. I suppose that's all part of the process. Once you sober up, you could very well end up being alienated within your own community. It happened in Alkali Lake. When the healing process happened, people became enemies.

CHAIRMAN (Mr. Whitford):

Thank you, Mr. Gargan. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Whitford):

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Do you wish to continue, Madam Marie-Jewell?

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman. Mr. Chairman, current policies against domestic violence do not provide enough protection for women and other victims. Treatment, counselling, mediation, conciliation and follow-up services are also required. Relocation, housing and other programs must be reviewed to ensure that victims are not placed at a disadvantage in the community through no fault of their own. In particular, housing policies should be changed so that

leases in family situations require two signatures in order to protect both parties. Leases could also contain a provision that the offender should be the one to leave the home following an act of violence.

Committee Motion 13-12(4): To Adopt Recommendation 9, Carried

Therefore, Mr. Chairman, I move that this committee recommends that housing and family violence programs must be reviewed to ensure that the offender, rather than the victim, suffers the consequences of domestic violence. Thank you.

CHAIRMAN (Mr. Pudluk):

Thank you. The motion is in order. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Do you wish to continue, Member for Thebacha?

MRS. MARIE-JEWELL:

Thank you, Mr. Chairman. Mr. Chairman, too often the victims of domestic violence have to move away from their own communities in order to find shelter and to resume their lives. Even if they return home, they have great difficulty in picking up the pieces and starting over. The removal of women and children from their communities by the Department of Social Services should only be a last resort. The government should adopt a policy of helping victims remain in their own communities whenever possible. Local assistance should be provided to these people in such areas as housing, education and job training. This will help them to assume greater responsibility and control over their lives as part of their healing process.

Committee Motion 14-12(4): To Adopt Recommendation 10, Carried

Therefore, Mr. Chairman, I move that this committee recommends that every effort should be made to assist victims of domestic violence to rebuild their lives in their own communities.

Page 170

CHAIRMAN (Mr. Pudluk):

Thank you. The motion is in order. To the motion.

AN HON. MEMBER:

Question.

CHAIRMAN (Mr. Pudluk):

Question has been called. All those in favour? All those opposed? Motion is carried.

---Carried

Do you wish to continue, Member for Thebacha?

MRS. MARIE-JEWELL:

Mr. Chairman, I move that we report progress.

CHAIRMAN (Mr. Pudluk):

There is a motion on the floor to report progress. The motion is not debatable. All those in favour? All those opposed? Motion is carried.

---Carried

I'll rise and report progress. Thank you.

MR. SPEAKER:

Item 20, report of committee of the whole. Mr. Chairman.

ITEM 20: REPORT OF COMMITTEE OF THE WHOLE

MR. WHITFORD:

Thank you, Mr. Speaker. Mr. Speaker, your committee has been considering Committee Report 1-12(4) and would like to report progress with ten motions being adopted. Mr. Speaker, I move that the report of the committee of the whole be concurred with.

MR. SPEAKER:

The motion is in order. All those in favour? All those opposed? Motion is carried.

---Carried

Item 21, third reading of bills. Mr. Clerk, item 22, orders of the day.

ITEM 22: ORDERS OF THE DAY

CLERK OF THE HOUSE (Mr. Hamilton):

Mr. Speaker, meetings for tomorrow, at 9:00 am of the Nunavut Caucus and also at 9:00 am of the Western Caucus, at 10:30 am of the Ordinary Members' Caucus and at 12:00 of the Advisory Committee on Social Housing. Orders of the day for Thursday, November 25, 1993.

1. Prayer
2. Ministers' Statements
3. Members' Statements
4. Returns to Oral Questions
5. Oral Questions
6. Written Questions
7. Returns to Written Questions
8. Replies to Opening Address
9. Replies to Budget Address
10. Petitions
11. Reports of Standing and Special Committees
12. Reports of Committees on the Review of Bills
13. Tabling of Documents
14. Notices of Motion
15. Notices of Motions for First Reading of Bills
16. Motions
17. First Reading of Bills
18. Second Reading of Bills
 - Bill 2, An Act to Amend the Charter Communities Act
 - Bill 3, An Act to Amend the Cities, Towns and Villages Act
 - Bill 4, An Act to Amend the Hamlets Act

19. Consideration in Committee of the Whole of Bills and Other Matters

- Minister's Statement 3, Sessional Statement
- Bill 1, Appropriation Act, No. 1, 1994-95
- Committee Report 1-12(4), Talking and Working Together
- Committee Report 3-12(4), Review of the 1994-95 Capital Estimates

20. Report of Committee of the Whole

21. Third Reading of Bills

22. Orders of the Day

MR. SPEAKER:

Thank you, Mr. Clerk. This House stands adjourned until Thursday, November 25, 1993 at 1:30 pm.

---ADJOURNMENT