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LIEUTENANT-GOVERNOR
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6TH SESSION, 37TH PARLIAMENT

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Morning Sitting

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MONDAY, MARCH 7, 2005

The House met at 10:04 a.m.

Prayers.

Hon. G. Bruce: I call private members' statements.

Private Members' Statements

LEADERSHIP IN THE B.C. PUBLIC SERVICE

J. Bray: This morning I'm very pleased to be able to talk about an issue that is very important to me as well as to many in my constituency, and that is the public service here in British Columbia. The government of British Columbia has a vision of achieving excellence in public service — service excellence, work environment excellence and people excellence.

[1005]

The B.C. public service is a professional team dedicated to serving the people of our province, whether it's fishing licences, protecting human rights, police and correction services or public health, turning on your lights, camping in a park, putting out forest fires, registering the birth of your baby or using our highways. The public service really does reach into every single community in our province and, literally, into every family in our province at one time or another.

British Columbians rightfully expect their government to do the public's business in an open, balanced and fair manner. We are accountable to the taxpayers for all the decisions made by our public service. Now, we can't meet everybody's expectations, but it is every employee's responsibility and duty, and something they take as very important, to deal with the public in a manner that's full of respect, dedication and consideration.

The public service in B.C. has over 23,000 employees in ministries and agencies that provide an incredible array of services to British Columbians. As a former public servant before the 2001 election, I know firsthand the dedication, the skills and the hard work of our public servants.

I would often go to various functions, and there was sort of a stereotype of the government worker. I can tell you firsthand that's one of the most inaccurate stereotypes. I continually worked with people who worked long into the evenings and on weekends in order to produce services and policies that would meet the needs of British Columbians.

The public service is also one of the areas I have focused my energies on in the last three and a half years as an MLA. Certainly, there have been some challenges for the public service. You know, that's something we can't ever ignore when we talk about issues around the public service. But let's also talk about the context in which this government has been dealing with the public service.

In April 2002 the auditor general released a report entitled *Building a Strong Work Environment in British*

Columbia's Public Service: A Key to Delivering Quality Service. This was a follow-up report to the 1999 audit, *Maintaining Human Capital in the British Columbia Public Service.* The 2002 report concluded that the public service continues to face challenges, such as downsizing and the increased need for knowledge-based workers, that impede the performance of the public service while new challenges, such as impending retirement of the baby-boomers, are looming.

The 1999 audit of training and development in the public service concluded that it is timely for the British Columbia government to change its thinking about training and development in the public service and to treat employee development not as a luxury but, rather, as a necessary investment. The report found that human capital is at risk and that training and development, as currently managed, is not being applied in a strategic way.

The auditor general called on government to maintain the human capital in the British Columbia public service, its capacity to create good public policy advice and its ability to deliver top-quality services efficiently, saying that this was more urgently needed than ever, given the current pressures on the public service.

Having spent 13 years in the public service, I think those were very accurate findings that the auditor general made in both 1999 and 2002. In a few minutes, I want to talk about how our government has actually taken up that challenge and responded in a very informative way. I also have to point out that workforce adjustment was not an easy time either for those employees who were faced with the decision of taking retirement or voluntary departure or for those who were left behind waiting to see if they would or would not receive a notice.

I believe that the Public Service Agency, the BCGEU and the Excluded Employees Association all deserve credit for the relatively smooth handling of that difficult transitional period. There were very few grievances, and I think that all those bodies should be commended for their efforts.

Given all of this, one of the issues I have been most encouraged by our government's commitment to is having a non-partisan, professional civil service. We instituted a merit commissioner and started on the work of the revitalization of B.C.'s public service. It was a commitment we made in the *New Era* document.

One of the key ingredients has been the reorganization of the Public Service Agency and, in answering the issues raised by the auditor general, the establishment of the Leadership Centre. The leadership and learning centre is a leading-edge change agency driving the continued transformation of leadership throughout the B.C. public service.

The centre was created to align and integrate the three related areas of leadership development, learning and performance development. It is organized into four areas: corporate initiatives and solutions; learning and recognition, which provides ongoing leadership, management and workforce development through their many learning programs; employee performance

management, career development and transition services; and employee awards and recognition programs.

[1010]

I should note that last year, I had the pleasure of attending the Premier's first annual awards of excellence in the public service, a great event with about 450 public servants celebrating some of the innovations throughout our public service.

The B.C. Leadership Centre is key in making the public service the employer of choice for those looking to make a career out of the public service. You know, Mr. Speaker, Victoria 20 years ago was considered the panacea of public sector work in Canada. You worked in either Ottawa or Victoria. But over the eighties and most of the nineties, that morale dissipated in this province. At best, people used the public service as a launching pad for their careers somewhere else.

By initiating the learning centre, by really bringing in leadership skills to people within our public service, we are again making the public service not just a launching pad for a career but actually a career of choice. Being a public servant in the public service is something that people can plan to do for their entire careers. The B.C. Leadership Centre is bringing about the strategies that will allow people to grow and develop within the public service, to take over leadership roles over the coming years.

I want to talk for a minute before.... I know the Deputy Premier has some comments. One of the key issues identified in the public service was that while individuals were technically proficient in their areas, when they applied for and were interviewed for management positions, the interview was based on those technical skills. When somebody moved from a line position — say, as a biologist or as a public agent — into a management role, they didn't actually have the skills and training to be a manager. All of a sudden that's where we had some problems occurring in the workforce.

I have more to say on that, but I know the Deputy Premier has some comments. I look forward to hearing what she has to say.

Hon. S. Bond: I certainly do want to take the opportunity to comment about the excellence we see in the public service in British Columbia. The MLA for Victoria-Beacon Hill has a lot of experience himself, having been a member of the civil service for 13 years prior to his election to this assembly, so the member for Victoria-Beacon Hill speaks with a great deal of authority on behalf of the many civil servants who live in his riding.

It has been my experience over these last three and a half years that this member has pursued lines of detailed questioning in estimates or has listened with a keen ear and a very strong voice as we discussed the public service — in particular, I know, in some rigorous discussions with the Minister of Management Services.

On a personal note, my experience with two ministries and in a more local role as chair of the school

board for a number of years has shown me that the engine of government is truly its very talented civil service. Without the support and work they do on a daily basis, we would be very challenged to do the work we also are required to do.

Our government recognizes the potential and the asset of having a highly trained and motivated public service. We have vigorously pursued a number of areas of training and recognition in order to congratulate and celebrate the excellence of their work but also to provide incentive for improved and ongoing educational opportunities. We have put \$10 million into leadership and employee development annually to ensure that we have the skill sets required in a modern and dynamic workforce.

A couple of those examples have already been referenced by the member for Victoria-Beacon Hill, but let me demonstrate a couple of them for you. We have a program called Leading the Way. It's a flexible and open learning program delivered through a partnership with a consortium of post-secondary institutions, including Royal Roads, the University of Victoria and Camosun, that's designed to enhance the skills of our public service managers. In addition to this training, the leadership and learning centre provides over a hundred other course offerings. The total annual budget for all leadership and other training is \$8.3 million.

We also have a program called Learning Leader. This year's program supports a competency in the new senior leadership competency framework, and it's called Fostering Trust. The program is designed to assist mid-level managers in developing a greater awareness of the importance and dynamics of trust and to provide strategies for building and giving trust. Fourteen sessions of this program will be offered in 11 locations and delivered to 820 employees.

[1015]

Already mentioned as established in 2004 were the Premier's awards. This is the public service's employee recognition event where we showcase the best examples of innovation and excellence. There were 77 nominations received in the following four areas: innovation, leadership, partnership and service excellence. It was a fantastic event where we celebrated the excellence of the public service.

I couldn't agree with more with the member for Victoria-Beacon Hill that the civil service has become home to experts in many fields. The provincial emergency program deals with different crises — the forest fires a few years ago, as an example — coordinating and thus strengthening the efforts of all British Columbians in the face of true, epic destruction. Avalanche control keeps back-country skiers, hikers and the like safe, making sure we can enjoy the terrain that B.C. has to offer.

Biologists in parks and wildlife areas make sure we can enjoy the outdoors but are sensitive to ecosystems that are home to the incredible wildlife we have in British Columbia. Public health.... The public service certainly touches our lives on a daily basis in British Co-

lumbia, and we are delighted to have the excellent workers we have in the public service.

Finally, the civil service continues to be a fantastic way for women to contribute to government. Certainly, as we are looking forward to International Women's Day, whose theme this year is How Far We've Come, we can reflect on the fact that 60 percent of B.C.'s own public service are women. They are women seeking to make a difference in the way government behaves and also seeking the self-fulfilment that meaningful employment has to offer.

Today we are pleased that the member for Victoria-Beacon Hill has brought forward recognition and comments about the public service in British Columbia. We have over 23,000 public servants. They are dedicated, and they are skilled. Today we want to recognize them.

J. Bray: I'd like to thank the Deputy Premier for responding to my comments. It certainly shows the commitment this government has to our public servants and the fact that we recognize that we, as a government, laid out a very comprehensive plan to turn this province around. We know that British Columbians worked in cooperation with us, but if we did not have a dedicated, professional, non-partisan civil service actually delivering on that plan, we wouldn't have gotten anywhere.

It's really a recognition that the Deputy Premier is here to talk about this. We recognize that our partnership with the public service is how we've been able to deliver on our commitments. The Deputy Premier also pointed out some of the really innovative things we are doing for our employees, the investments we are making, based on what the auditor general said in 1999 and 2002.

Really, the Leadership Centre is creating an opportunity for us to be the kind of dynamic employer that the private sector aims to be. The auditor general recently pointed out that we are.... He is comparing the B.C. public service, when he does his audits now, to the top 50 employers in Canada. Although we're not quite there yet, he does note that we're making great improvements in many areas. We still have work to do in others.

One of the things I know he has noted is that we are now providing the opportunity for people to plan their careers, to plan to take management and leadership positions. While they may have the technical skills they got in university or trades training, they are now actually getting those other human capital skills that are so critical when you take leadership positions: skills around trust-building; teamwork; how to manage a budget; work flow processes; labour relations; creative, dynamic thinking; and communication skills — in other words, intrinsic things that you can learn but which are not necessarily encompassed within a degree or diploma.

The Leadership Centre is now providing opportunities for people who want to stay in the public service and expand their career to get those opportunities —

paid for, too, by the Leadership Centre, including travel costs. It is a great investment for employees, whether they're in Victoria, Prince George or Atlin, to be able to develop those skills to manage effectively.

The Deputy Premier mentioned the Leading the Way program. There are actually now over 1,200 people enrolled in this ongoing opportunity to take courses and to develop skills that are important to each individual person. They choose them themselves.

The other thing is that we have really enhanced the way in which we do employee planning with employers. It's not just an appraisal anymore. It's actually a learning and development plan that supervisors and line staff do, so they can say: "What are your goals, and how can I as a supervisor and we as an organization help you meet those goals?" Employees are given the chance to build their own career paths, and then we find opportunities for them to hook in with over 100 different centres of learning.

[1020]

You know, I'm proud of our public service. I'm proud to have been a member. I know that in the years to come, with the work we're doing now to rebuild the public service, this is a place that our young people can start their careers in, grow in and finish their careers in. It's a great place to work.

"LET'S GET PHYSICAL": THE IMPORTANCE OF PHYSICAL FITNESS FOR OUR YOUTH

K. Johnston: I believe that society has a very serious problem in the health care sector, and that problem is childhood obesity and inertia — a complete lack of attention to physical exercise and physical fitness. Gone are the olden and dark days of the sixties and seventies when kids were basically forced into physical activity by having to be outside and involved in physical exercise. Limited access to junk food, limited television and no electronic games all played a part in a fitter generation.

However, society has progressed and made great strides — except in physical fitness for children. Sedentary activities, such as television viewing and computer games, have overtaken the habits of many of our children. Somehow we have gone into an education psyche where physical education was optional and really didn't matter. Mr. Speaker, I can tell you that it does matter.

A study funded by the Canadian Institute for Health Information, released just last week, provided the following facts. The rates of overweight and obese children have tripled in Canada over the past two decades. In schools with a comprehensive Healthy Living program that offers nutritious food and encourages physical activity, kids are in better shape. The study is saying this: banning junk food, a worthy objective, is not good enough on its own. Physical activity is paramount.

A report released in 2001 from Ontario is titled *The Effectiveness of School Based Interventions in Promoting Physical Activity and Fitness Among Children and Youth*.

There were some major findings out of that study. Two-thirds of Canadian children and youth aged five to 17 are not active enough to promote good health.

Children should engage in 60 minutes or more of active play daily, and teens should engage in three or more sessions per week of vigorous exertion, like sports or dancing. Adults who participated in school-based physical activity promotion programs as children are significantly healthier than those who did not participate.

School-based physical activity should be encouraged. Our own provincial health officer, Dr. Kendall, released a report in October 2003 called *An Ounce of Prevention*. That report mirrored the Ontario report's findings in stating that habits of living and exercise patterns in children have an effect on adult behaviour. Out of that report came many recommendations.

There is a profound relationship between adult health status and school health programs. Physical exercise constitutes a significant protective factor against a range of chronic illnesses, and physical inactivity is estimated to cost the B.C. health care system in excess of \$250 million per year. Regular exercise among youth declines as the grade of schooling increases. In B.C., 58 percent of youth aged 12 to 19 are not active enough for optimal growth. Schools have a captive audience with kids, and they must do more. As much focus must be put on health education as on academics.

Currently, school health is often seen as non-essential. This is a quote by Dr. Ken Cooper, an expert from Texas in the area of physical activity and aerobics. He says: "I strongly support daily physical education, which would ensure vigorous exercise, and would recommend it to be required in all schools for all students. The reasons why youngsters are less fit and fatter is because schools no longer have mandatory physical exercise."

[1025]

What are we doing about it? We've instituted some programs like 2010 LegaciesNow, an organization that will initiate school-based programming, integrating physical activity. Healthy eating and healthy school environments will be the objective. This government has a comprehensive plan to promote children's and teens' health. Action Schools B.C. was launched as a pilot to include lower mainland schools, grades 4 to 7, and it has been an extremely successful project.

I've had the opportunity to know very well some people involved in the school system, and I asked how Action Schools B.C. was going. Basically, I got some information, some e-mails back, from one particular principal in one of the pilot schools. The principal reports continuing enthusiasm for the program, because it was effective, popular with the students, easy to implement and well supported. He heard similar comments from other schools.

Because of the success of the pilot project, more than \$15.5 million is to be invested in continuing Action Schools B.C. The program will include grades K to 9 provincewide by 2010, and I am hopeful that secon-

dary schools will quickly move to the model. I might also note that the action plan to promote healthy food and to discontinue sales of junk food in schools within four years is underway, but we must be clear. Healthy eating must work in coordination with intense physical exercise. We need to get everybody physical.

I look forward to the comments from the member for Victoria-Beacon Hill, because I know he's extremely interested in this subject.

J. Bray: I am very pleased that the member for Vancouver-Fraserview has raised an issue that is one of generational importance. As the studies that the member outlined show, we have a serious, looming health care crisis among our young people, but like so many things, the effects of that crisis aren't necessarily going to happen today or tomorrow but five, ten, 15, 30, 35 years down the road.

The great opportunity is that we can deal with it now and solve those problems. But we have to have the kind of leadership that this government has shown, the kind of leadership that the principals and the member for Vancouver-Fraserview have recognized, in order to get not just young people but families recognizing the importance of wellness. This gives me an opportunity to talk about one of my areas of interest with respect to youth activity.

Although my education was in sports administration, my actual degree was a bachelor of physical education, and I have long felt that the kind of physical education that many kids are introduced to in schools is how to kick a soccer ball around pylons or a unit in wrestling. In other words, it was teaching sports. It was not teaching health or wellness.

Then comes grade 9, and you'd get your usual one-hour lecture about drugs and alcohol. Maybe a year later you'd get your one-hour lecture on sexual education. Essentially, you had nothing about nutrition. You had nothing about lifelong physical activity. You had nothing about how it benefits you even when you're at school and all of those other issues.

As the member points out, kids are actually a captive audience. We have them from kindergarten to grade 12 in most cases. In fact, in this province more kids are graduating now than ever in the history of this province, so we have kids for a long period of time. I think physical education should be about wellness. It should be about healthy body image. It should be about nutrition.

It should be factual information about the dangers of drugs, alcohol and tobacco, starting right from kindergarten and teaching in age-appropriate ways. In the same way children learn numeracy, literacy, history facts and geography, they should be learning issues around wellness. It shouldn't be how to kick a ball around pylons. There are plenty of opportunities in most communities to learn sports. Schools should be focusing on teaching wellness.

As we know, kids become more and more involved in those courses as they move through the grades. It invariably encroaches in on homework, and homework

encroaches in on family life. In fact, it becomes a way for kids to bring health and wellness information home for the rest of the family to see, especially around issues of nutrition.

[1030]

I agree with the member for Vancouver-Fraserview that banning junk food isn't the only answer, and it's certainly not the only solution. But it is a key point that if we ensure that kids are not only eating nutritious food in schools but are actually understanding why it's important, they can make those choices. By the time they're old enough to go to the 7-Eleven or Mac's Convenience Store, they will actually in many cases make the right health choice simply because they've learned about it, not because they've been lectured to once or twice about it.

We need to make sure that physical education from kindergarten right through secondary school is teaching those lifelong wellness and health issues, as well as things that are fun and physical activity. I think kids are prepared to make the right choices. If we respect them and teach them in age-appropriate ways, they will make the right decisions. If we leave it up to television and the advertisers, they don't have a chance. We have an opportunity to teach health and wellness in our schools, and I commend the member for Vancouver-Fraserview for raising this important issue.

Our kids are our most important resource. They need to know how to write, they need to know how to count, and they need to know all the Prime Ministers we've had in Canada. But they also need to know health and wellness information, which is equally important. As they become adults, as they become parents, their lives will be directly affected by what they learn on health and wellness now. Let's take them while they're captive and give them the information. They'll make the right choices. I commend the member.

K. Johnston: I'd like to thank the member for Victoria-Beacon Hill for his usual insightful comments in this House. He obviously has quite a passion for this subject. I learned something today. I didn't know he had a degree in physical education, and I think that's just wonderful.

Interjection.

K. Johnston: Yeah, and he looks every bit of it.

Anyway, I'd like to say that it's really important that all of us in British Columbia — all of the parents, all of the teachers, all of the people involved in the school system — understand and move towards making this a healthier society. I'm really delighted with the Action Schools B.C. program. It seems to be really catching on. I understand that following the pilot, there's been tremendous uptake and tremendous support for it.

This subject is extremely important. When we had an opportunity to receive a report on diabetes not too long ago at Public Accounts, it was just amazing — the

degree to which good, healthy living habits will stifle that disease from moving ahead.

I'd just like to conclude my comments with a couple of quotes by people far more schooled in the area of physical education benefits than I am. One is from a Dr. Feinstein of Alabama, who is also an expert in the area of physical education in children. He says this: "The benefits of daily physical activity are so obvious that it is difficult to understand why some people wish to remove this most important requirement from school curriculum."

Finally, a quote from the U.S. Surgeon General, which I think just sums it up completely: "I think we've made a serious error by not requiring physical education. We are paying a tremendous price for this physical inactivity epidemic affecting our country. People pay with pain and suffering, and society pays with money and lost productivity. Physical education should be mandatory in kindergarten through grade 12."

I am hopeful that all the great initiatives and all the great efforts put forward by this government will soon, at the end of the day, make our children far healthier than they are today.

CRYSTAL METH EPIDEMIC

R. Hawes: Today I want to talk about what I see as a growing epidemic in our communities with respect to the rampant use of drugs, particularly crystal methamphetamine. We're all very familiar with the drug problems, and we see it every day in the newspapers and on television. We're all very familiar with what's happening in the east end of Vancouver. But some people perhaps aren't as aware of what's going on with some of these drugs, particularly the use of crystal meth.

Crystal meth is an artificial substance manufactured by combining a number of poisonous materials. It's perhaps the most addictive of all drugs, and the unfortunate thing with crystal meth is that often its users suffer permanent brain damage. This is a drug that is poisonous and a killer, and in some areas of our province it is growing in use, particularly among our youth.

[1035]

Some have referred to the coming of a lost generation of our kids. For me personally, this is so scary, so frightening — the prospect of seeing so many of our youth sucked into the use of this deadly chemical and destroying their lives before they're even started — that something has to be done.

Mr. Speaker, I look at my own communities of Maple Ridge and Mission and what's happening there, and I can tell you that this is a drug that's being used by kids broadly. It's a very frightening prospect, and I want to talk for a few minutes about what the community is doing about it and how they're trying to deal with this problem.

The Salvation Army opened a respite home in Maple Ridge a few years ago. One of the community members got involved with that facility and began to

notice that the people who were dropping in there — a lot of them — appeared to be heavily involved in the drug trade and addicted and were also some of the homeless people. So he took it on himself to try to find out who these people were, and he did quickly discover that a lot of these people were crystal meth users.

From there, the statement arose: someone should do something about the growing crystal meth epidemic in our community. That someone was Mary Robson as the president of the Ridge Meadows Rotary Club, who decided that for her project for the year she should do something about it. It was her husband, Gord, that was working with the Salvation Army and first really noticed the problem.

A task force was set up by the community to take a look at the size of the problem and to make the community aware of what the problem really was. When they set the initial meeting of this task force, I attended it along with.... I brought someone from the neighbouring community, Mission, to also attend to see if there were similar things happening in both cities. That was probably the most heartrending meeting that I have ever, ever attended. There were young addicts getting up and speaking. There was a mother of a youth that had been killed using crystal meth. There was a registered nurse who had been addicted for five years.

This is a drug that is running through a community and must be stopped. Through this program, the local Maple Ridge program, the means of doing something about it began. This is a task force that said.... No one likes to sit on endless committees. So they set up a 90-day program. What they wanted was an action plan. In 90 days they wanted their city to be able to do things that would make a difference. So they broke down into three major task forces under the main task force — youth and education and community awareness. There was an enforcement task force, and there was an addiction and rehabilitation services task force.

I want to speak about a couple of parts of this. A part of it is called Meth Watch. It's to remove the precursors for the manufacture of this drug from retail stores or, if not removed, control the sale of the precursors. I'll give you an example, Mr. Speaker.

In fact, this weekend Maple Ridge unveiled its Meth Watch program. They spoke about somebody who came to one of the hardware stores on a bicycle and rode away with three gallons of methyl hydrate on their bicycle. That's a pretty strong signal that they're buying that methyl hydrate for something unusual. When people come and buy three or four or six cases of a cold medication, that's a pretty good signal. But that's what has been going on in our communities, because these are some of the chemicals that are used in the manufacture of this drug.

[1040]

What happens is.... I'm sure many of us have seen the film on TV of a crystal meth lab being taken down by the police, where the police are going in wearing hazmat suits. They clear an entire neighbourhood in case there's an explosion. That's how dangerous this

stuff is. Some of the ingredients would be — in addition to cough medicine or cold medicine that contains ephedrine or pseudoephedrine — acetone; rubbing and isopropyl alcohol; iodine; starter fluid; gas additives; drain cleaner, including Drano, etc.; lithium batteries; matchbooks, to get the red phosphorous; lye; paint thinners. Then there are the others — glassware and all the rest of the things that you cook this stuff up in. When they add all that together and cook it, the danger of explosion is huge and the fumes, I know, are very dangerous.

Often you'll see police going in and taking down one of these labs wearing their hazmat suits. If they arrest anyone, quite often you'll see children in the home. I wonder about that. When the police can't enter without a hazmat suit and breathing devices, and yet there are children in these homes, what kind of people engage in the manufacturing and put their kids at that kind of risk?

What has happened is, through a program called Meth Watch that actually originated in the United States and is strongly supported.... The Canadian Association of Chain Drugstores, the Retail Council of Canada and NDMAC, which is advancing Canadian self-care, sponsor a program called Meth Watch. I'm going to go into that in a little more detail, but I know that the Solicitor General also likes this program. I'm going to ask him if he'll respond. He's graciously agreed, so I'll turn it over to the Solicitor General.

Hon. R. Coleman: Thanks to the member for Maple Ridge–Mission. First of all, I'd like to thank his community for being the first out of the box with Meth Watch as far as putting together the program in their community.

This all started in British Columbia about eight or nine months ago. A group of retailers and drug manufacturers — those that ran pharmacies and chain stores as well as independents — came to me over a concern that in Alberta they had decided they would put cold medication behind the counter. They were going to have to develop another 200 square feet, at least, of space just to hold cold medication behind the counter in every drugstore in Alberta. When we had that conversation, I said: "Why don't you guys take a different approach? I mean, why don't you look at Meth Watch out of Kansas? At the same time, look at the fact that you should be part of the solution rather than part of the problem. The way you could do that is that you, as a group of people, could get together as retailers and decide that you're going to put up a 1-800 line, that you're going to educate the public and your employees about crystal meth and the precursors so that we can deal with it as a society, to start to not only deal with it from the standpoint of being reactive but to actually have a long-term plan for this."

On November 16, 2004, the Minister of State for Mental Health and Addiction Services for British Columbia, at a news conference held in Vancouver with representatives of the Meth Watch Coalition, previewed a program represented by retailers and manu-

facturers and self-care products that they were going to launch in the new year to prevent the diversion of common household products for the purposes of making and manufacturing the street drug crystal methamphetamine. Crystal methamphetamine is also known as crystal meth, speed or crank. It's a highly addictive stimulant and a growing health and social problem throughout North America.

That day Sgt. Vianney Tremblay of the Royal Canadian Mounted Police said that it is vitally important that we do everything we can to prevent the home lab problem from taking root in Canada, as it has in other jurisdictions. It is to push back at the fact that people want to set up labs in their own homes to make crystal meth, which is highly toxic, highly dangerous and, frankly, very damaging to our communities.

The Meth Watch program is starting to roll out, and Maple Ridge is the first one out of the box. I would suggest to any member of this House or any community that they might want to do the same thing. The Rotary club in Ridge Meadows is to be complimented on the fact that they're taking the initiative. We could take this across the province now, because we do have that relationship with our retailers. We do have that relationship where they want to be part of this solution. The RCMP have set up a 1-800 line in cooperation with them where any information with regard to large sales of this type of product in retail outlets across the province can be phoned in, and that information can be used in investigations regarding home labs making crystal meth in British Columbia.

[1045]

The member opposite has already mentioned the whole aspect of how this drug hurts people, how it can ruin your psyche for life — all the health risks that go with it and the dangers to the community. But the reality is that we have a program. It's not something that we have sat back and done nothing with. We actually built the relationship within the retail sector. It's there for all communities to participate in.

As the member says, he's already talked about the precursors. There are a whole lot of them. We should all become a little more educated with regard to it so that we, as a group of people and as a society, can deal with this. We've seen the results of Meth Watch when it started in Kansas and a 27 percent drop in methamphetamine lab seizures in that state after Meth Watch was actually implemented. We know this works. We know it's the best way to go. We were proactive in this in giving our retailers the opportunity to do it, and we look forward to its success in the future.

R. Hawes: Thank you, Solicitor General. You have been instrumental in bringing programs like this to British Columbia and fighting this menace. There are a number of fronts that you're fighting this battle on. I know that we're going to win it, and I know I hear regularly from my constituents that they appreciate the no-nonsense approach you take to this.

I do want to say that in Maple Ridge the approach taken by the community and the realization of the

community that to solve a problem like this.... It isn't something that the provincial government can just take on and solve. This is something the community has to get involved in. They need the assistance of the provincial government and the federal government, but they know that this is a community solution. In Maple Ridge the solution that has come forward through this task force is something that can be used in every other community. They are now engaged in making a video that's like a how-to guide for other communities — how to get your community activated and working on this problem.

With respect to the Meth Watch program and the precursors, on Saturday they rolled the program out across Maple Ridge. There were about 70 businesses called upon to get the information and solicited to take part in it. Mr. Speaker, I know that props aren't allowed in the House, but I can tell you that what you'll see on shelves is a piece of paper about that big — a sticker. It might say Meth Watch on it. I know that you can't use props here. For folks who are in a store, if you see that sticker on the shelves, you should know that the place where you're buying does take part in the Meth Watch. They are part of the solution. The retail outlets that will jump on board and take part in this need to be commended and supported.

The Maple Ridge solution is also available. They have a website: www.crystalmethtaskforce.com. It's an excellent, excellent community program. The chief of police has strongly taken part in it, as well as the former fire chief of Maple Ridge — who is now the chief of Surrey's fire department and is still active in Maple Ridge in this program, designing it — and many of the community leaders, people who work in the drug treatment fields and bylaw people from the municipality. This is a very comprehensive program. I would invite anyone to visit that website to see exactly how they've worked the program and how all of these community institutions weave together to try to find a solution.

This is a drug that's attacking our kids. It's leaving kids brain-damaged for life. The people who manufacture and distribute this stuff don't care about our kids. We need to wage war back. We need a war against them and a war against this insidious drug. I'm just so happy and so proud of the Maple Ridge Rotary and the folks who have served on this task force in my community and worked so hard to see it come to life for the community. Thank you for the opportunity to talk about it, Mr. Speaker.

FETAL ALCOHOL SYNDROME: TRAIN THE TRAINERS

D. MacKay: We've heard it said several times in the past, and we continue to say it: the children are our future. We, as adults and governments, must give them every opportunity to grow and develop to their fullest potential.

As a father to two children and a grandfather to three beautiful grandchildren, I know just how impor-

tant they are to me. I want them to have the best of education and health care to make sure they grow and enter the workforce as responsible adults contributing to our society. I want that for all children. As a government, we are committed to providing the services to those in need to ensure they all reach their fullest potential.

[1050]

Sadly, there are a number of young children who will not have the opportunity to be all they should be. It is through no fault of their own but, rather, the fault of the mother of the child. That fault is not deliberate; rather, it is the result of the lack of education or information as it relates to the consumption of alcohol during pregnancy. I am referring to the birth defect known as fetal alcohol spectrum disorder. This is simply the result of a mother's drinking alcohol while pregnant. The child can be born with mental challenges and/or physical characteristics associated with the consumption of alcohol during pregnancy.

The sad part is that it's totally preventable. The problems associated with FASD are being studied. The problems, both from a social cost — we just need to look at our prison system and the large number of people currently serving time who are suffering and have been identified as suffering from FASD — and also from the cost to the health care system, are just now starting to be realized. The benefit of educating women about the effects of drinking alcohol while pregnant is critical if we are to prevent further births of children suffering from the effects of FASD. We need to be in the high schools with this important message, and of course, the women need to be educated by physicians who treat these women.

An example of what is happening is the FASD program in the Yukon. The Whitehorse government is examining the first stool from all newborn babies for the presence of alcohol in an attempt to identify these young, innocent souls at an early age. The College of New Caledonia in Burns Lake has done a remarkable job in the study of FASD. Because of their interest and dedication to the study of problems associated with FASD, the community of Burns Lake hosted a seminar in 2004, which was attended by representatives from the Yukon and other territories as well as from Alberta, Saskatchewan and throughout British Columbia. This important educational symposium was attended by the Minister of State for Early Childhood Development as well as by our Premier. It was a great success and a tribute to the hard work of the staff at the College of New Caledonia.

I would like to expand on the good news and again acknowledge the dedication of the staff at the College of New Caledonia. Because of its leadership role, the college staff in Burns Lake are considered as national trainers, and they, in turn, will be travelling to Toronto where they will deliver the training to ten master trainers from across Canada. The ten master trainers will then deliver the training to community trainers in 19 communities within their respective regions. The workshop will then be delivered to a variety of service providers in each of those areas.

As I said earlier, it's all about education and educating people about the dangers of alcohol consumption during pregnancy. This is something the College of New Caledonia in Burns Lake does very well. Their national recognition in this field has been acknowledged, and to help with the costs of delivering the education that is needed, financial help from the National Secretariat on Homelessness and from the Department of Justice has been provided to the college.

This is a wonderful story about a college campus in a small rural community which has seen the challenges faced by those who suffer from FASD and has embarked on programs and education to ensure that those who are suffering receive the opportunities that may not have been there for them before. The opportunities, of course, are education and understanding the special needs of children suffering from this preventable problem.

A number of problem children in our school systems are children suffering from the previously unknown side effects of alcohol consumption during the pregnancy. Some behavioral problems and learning difficulties can now be attributed to FASD. Teachers within our education system are now better able to understand why some children behave as they do, and extra funding can be provided for those identified as suffering from FASD. Our health care providers continue to struggle to find ways to treat those who are suffering from that disease.

Mr. Speaker, at this time I would like to yield the floor to the Minister of State for Early Childhood Development for her comments.

Hon. L. Reid: I am honoured today to follow my colleague from Bulkley Valley–Stikine, because this issue is vitally important to the future of this province.

[1055]

When we talk about fetal alcohol spectrum disorder, it's an array of conditions that result from a baby's exposure to alcohol while still in the womb. It's a complex set of circumstances requiring an array of challenging remedies, but I believe every cent which we put towards this disorder will, in fact, be dollars well spent.

I believe we must honour the mother-child dyad, and I believe we will only achieve success if we continue to approach fetal alcohol spectrum disorder by utilizing early childhood development as a platform for that undertaking. We will then have healthy pregnancies, healthy moms and healthy babes. It has to be a continuous cycle that we understand in more detail.

I want to talk for a moment about work that complements the work underway in Burns Lake. Last weekend, February 26, we had a thousand delegates here in Victoria for a major conference. We had a ministers' meeting which saw individual ministers from each of the provinces. We had Hon. Peter Jenkins, the Minister of Health and Social Services from the Yukon. We had Hon. Michael Miltenberger, Minister of Health and Social Services for the Northwest Territories; Hon. Lavinia Brown, Minister of Health and Social Services

for Nunavut; and myself, as chair. From Alberta we had Hon. Heather Forsyth, Minister of Children's Services; from Saskatchewan, Hon. John T. Nilson, Minister of Health; and Manitoba was represented by Jan Sanderson on behalf of Theresa Oswald, Minister Responsible for Healthy Living.

My purpose in putting this on the floor for discussion today is to have the colleagues understand that there is work underway in each of the seven western jurisdictions in Canada. We're responsible for 60 percent of the land mass and 30 percent of the population. We have chosen to unify our resources, our energy and our direction and come up with a plan that makes sense. They're amazing colleagues, and they're truly committed to the exercise.

It was our pleasure that day to launch the Canada Northwest Fetal Alcohol Spectrum Disorder Research Network. We have an opportunity to hear from Dr. Sterling Clarren; he's going to be our research director. The associate director is Dr. Margaret Clark from the University of Alberta.

It's an important opportunity for us collectively to secure funds that will matter in the lives of families across western Canada and into the Territories. British Columbia has its challenges around fetal alcohol spectrum disorder, as do Alberta, Saskatchewan, Manitoba and the Territories. It no longer made sense for us to continue to work individually. It made much more sense for us to collectively decide how best to go forward.

We will have some of the finest minds in the country developing treatment protocols and diagnostic protocols as we go forward. We have three British Columbia board members: Dr. Margo Greenwood, Dr. Bonnie Leadbeater and Peter Webster. Certainly, those individuals will continue to do this province proud.

[H. Long in the chair.]

Dr. Leadbeater is a former director of addictions research in British Columbia and is a professor in the department of psychology at the University of Victoria. Margo Greenwood is an assistant professor in the faculty of education at the University of Northern British Columbia. Peter Webster is a businessman and a philanthropist and has specialized in board development over a number of different areas of interest.

I was absolutely delighted to be asked to make comment today because I have spent a great deal of time over these past three and a half to four years in Burns Lake, British Columbia, coming to know Anne Price, Linda Schmidt and Kathy Ashurst, individuals who make it their daily commitment to put their families first, to put the babies first, to put the parents first as they go forward. The Healthier Babies-Brighter Futures program in Burns Lake is world-class — absolutely world-class.

We had hundreds and hundreds of delegates to that symposium in Burns Lake, British Columbia, because people wanted to see that program firsthand. For us to receive the designation to conduct that training as

a continuing medical education symposium on behalf of the medical association was unheard of. That we would take that level of training outside of the lower mainland was a first on behalf of this administration, and I am absolutely delighted. The reason it worked — my honourable colleague opposite is correct — was the receptiveness of the individuals at the College of New Caledonia who, frankly, made it work. It was an outstanding undertaking.

D. MacKay: I would like to thank the Minister of State for Early Childhood Development for her words. I am encouraged to see that we have several jurisdictions in western Canada actually looking at the problems associated with FASD and trying to find ways to make sure that we educate people on how preventable this unfortunate side effect of alcohol consumption during pregnancy is.

As I said in my comments, the College of New Caledonia in Burns Lake is leading the way in educating people about the effects of FASD. They have done a great job in educating people in the northwest and are called upon when people are looking for resource people dealing with this particular issue. The national recognition they have obtained is most exciting.

[1100]

I am pleased to tell you that two women from Burns Lake will be travelling to Toronto to train ten master trainers from across Canada. The two instructors that will be travelling to Toronto are Anne Price from Burns Lake, who was the project planner at the College of New Caledonia for Healthier Babies-Brighter Futures. The second is an instructor, Linda Schmidt, who recently retired from CNC as the FASD instructor for students suffering from FASD.

I did attend a graduation ceremony in Burns Lake for those students suffering from the side effects of alcohol. I was certainly pleased and very proud of the dedication shown by the staff at the college there. What a great job they did with the children they had under their control, educating them to the best of their ability.

They have done a great job in educating people. They have done a great job for Burns Lake and will continue to do a good job in educating a number of people about this ongoing problem. I hope that those present in the House today will join me in thanking them for their work in this field and in wishing them good luck in the future.

R. Hawes: I seek leave to make an introduction.

Leave granted.

Introductions by Members

R. Hawes: In the gallery today we have Mary Robson, who is president of the Ridge Meadows Rotary. We have Inspector Janice Armstrong, who is the police chief of the Maple Ridge RCMP, and Mr. Len Garis, who is the fire chief for Surrey, previ-

ously of Maple Ridge. Could the House please make them welcome.

Hon. G. Abbott: I call private member's Motion 71.

Deputy Speaker: Hon. members, unanimous consent of the House is required to proceed with Motion 71 without disturbing the priorities of motions preceding it on the order paper.

Leave granted.

Motions on Notice

CRYSTAL METHAMPHETAMINE

R. Hawes: It gives me pleasure to introduce this motion, which reads:

[Be it resolved that this House recognize the imminent danger that the crystal methamphetamine epidemic poses to our children and our communities; and that this House support efforts to restrict manufacturing precursors, advocate for more appropriate sentencing of convicted manufacturers and distributors, increase addiction treatment options, and assist communities in designing local solutions.]

Earlier today in a private member's statement, I spoke about the community effort that is taking place in Maple Ridge through the Maple Ridge Rotary, the Ridge Meadow Rotary Club and its president, Mary Robson, and the success it has gained and how it has increased community awareness and is a model for other communities.

We spoke, too, earlier this morning about the Meth Watch program and how precursors are now being labelled in stores and in retail outlets throughout Maple Ridge. The Solicitor General commented on how he wishes that program would roll out across the province, because we think it's going to bear a lot of success. The RCMP are instrumental in making that happen.

This morning I want to speak a little bit, first, about treatment in this province. I know the Minister of State for Mental Health and Addiction Services wanted to be here. The member for Surrey-Green Timbers is at a conference today on homelessness with the committee that is dealing with that and couldn't attend.

On her behalf, I would like to say that in this province we do have beds dedicated toward youth, the only province in western Canada that has such beds. In addition, we do have a number of residential treatment beds for youth, but clearly not enough. I know she is working with health authorities across the province to try to increase the number of treatment beds for youth. I know that she recognizes the problem with addictions and our youth and is working hard to do something about it.

Her ministry has produced a number of documents, including *Crystal Meth and Other Amphetamines: An Integrated B.C. Strategy*, which is an excellent start to the province becoming involved with communities in

solving the problem. But I want to speak today a little bit more on the part of this motion that speaks to appropriate sentencing.

[1105]

A week ago I spoke in this House regarding a case in my community where the police knocked on a door with a search warrant to try to take down a grow op and waited a few seconds and then kicked the door in. Subsequently in court, the case was dismissed because they didn't wait long enough to allow the people inside to answer the door. There was a grow op inside, and there was hydro being stolen. That evidence was completely thrown out, and the case was dismissed because the police didn't wait long enough.

That's the kind of thing, as I said a week ago, that endangers police. As they stand on the front porch waiting — or in any situation like that, waiting — and not knowing what's inside, they're at increased danger. The longer they have to wait, the greater the danger.

I think we've seen recently that there's.... I think the figure was 11 percent of the homes that are taken down in drug operations have weapons. For our police, the people who protect us, this is a very frightening proposition. While not related to something the courts did, the tragedy that happened in Alberta, I think, is a clear example of the kinds of people that are running these kinds of operations, whether they be grow ops or crystal meth labs.

A lot of people advocate for the legalization of marijuana and how it doesn't lead to further criminality, but too often these grow ops are also involved in the crystal meth business. Now, crystal methamphetamines are totally different. The people who manufacture crystal meth, frankly, know the damaging effect it has. They know that it's a poisonous substance. They know that what they're doing endangers the lives of the whole community.

When a meth lab is taken down, we see the police entering wearing their hazmat suits, which I spoke about earlier this morning. As they go into these homes protecting themselves, wearing hazmat suits, they clear the neighbouring homes and evacuate the area because of the danger of explosion. In some of these homes, as the labs are producing this stuff, often there are children. These people don't even care about their own children.

When I look at the kind of sentences that are handed down.... A Maple Ridge task force is looking at a local solution. One of the subcommittees is the judicial liaison committee. I'd just like to read a couple of statements they have. They say: "The outcomes of court decisions do not serve the community or the public interest or the interest of the offender. Hardened criminals do not get sentences that act as a deterrent. Those requiring help are not directed towards rehab." They say in here that many of the police, the RCMP, after they've gathered all the information they need for prosecution, feel that they're on a catch-and-release program with outcomes not serving to act as a deterrent and/or to assist with rehabilitation.

In addition to all of that, what we now have is.... Because of the Charter of Rights and Freedoms we

keep moving more towards the rights of the criminal element. In doing so, the courts are saying they're protecting everyone's rights. Well, the fact is that the rights of the innocent and the rights of people not at all involved are being infringed upon as, more and more, our communities become more dangerous places to live because of some of the actions of the courts in pushing forward rights under the Charter.

Another example from a recent court decision. Those who are released at statutory release time from prison and put on drug-testing programs and ordered to stay away from drugs or alcohol can no longer be tested for their drugs, because it's an infringement of their rights. It's a Charter issue.

Now, you can release a prisoner from jail — a sex offender or someone like that — and say that they have to stay away from drugs. But if you can't test to see if they are still staying away from drugs, what good does it do? Those kinds of judgments further endanger our community and make police work much more difficult.

[1110]

As we look at the growing problem with crystal methamphetamines, as we look at the dangers that those labs create in our communities and as we look at the damage being done to our children.... We see the perpetrators, when they're caught, given minor slaps on the wrist, given small fines. This is making our communities far, far more dangerous places. This is the sort of thing that takes protection away from our children. These are the kinds of judgments that make those who are already addicted to other substances get sucked into the deadly world of crystal methamphetamine.

Crystal methamphetamines are the deadliest of the addictive substances. We've talked to, and I have personally met, a number of lifetime drug addicts who have been hooked on heroin and on cocaine but who, once they tried crystal meth, said they absolutely lost control of everything. It is the worst of all drugs. Many of them are now in a permanent state of drug psychosis. These are people who can't think straight anymore. That's happening to some of our children. Yet those who would manufacture this drug, those who would push this drug on our kids, when they're caught, are released with almost no penalty.

I'm very pleased to bring this motion forward. I urge the House to pass it. I want to again thank Maple Ridge for the leadership they've shown for all of our province. Mr. Speaker, I know there are other speakers, and I look forward to hearing what they have to say. Thank you for this opportunity.

S. Orr: I stand in support of this motion that has been put forward by the member for Maple Ridge-Mission.

Crystal meth or ice or crack or whatever they call it these days — there is a whole litany of names for it now, street names — is a very complex and difficult subject. It's a drug where you even have a few people saying: "Well, gee. Maybe it isn't as bad as we think it is." From my point of view, it is. In an urban centre like

Victoria and representing the community that I do, I see a lot of street issues, and it is a very, very complicated and ever-growing issue.

I have actually been involved in this for quite some time. In fact, last year I met with a whole group of people, and we sat around a table to try and grapple with the problem. We had people sitting at the table like Dr. Doug McGhee, a medical doctor, who had actually done a videotape on crystal meth and kids using drugs. It was very well done and went through a lot of service organizations. We promote it in our office, and we in fact sent it to schools.

We had Chris Goble, a specialized youth detox coordinator. We had people like Fran Fykas, who's at Vancouver Island health authority mental health and addictions prevention and works in that area; Pat Griffin, who's very well known in this community for dealing with youth at the Youth Empowerment Society; and Mohan Jawl, who is a very well-known businessman in town and is trying to grapple with the street issues. We had Richard Stanwick, the medical health officer. We had the chief of police, Paul Battershill. We had Helen Hughes, a councillor.

That gives you an idea of the sort of people that were sitting around the table trying to figure out what we can do with this, what we can do to help and how we are going to start controlling it. I don't think we're going to make it go away, but how are we going to control it?

Actually, Pat Griffin came up with a strategy. It was called a crystal meth community strategy — a very good strategy. I have a copy of it here. They had an approach similar to a four-pillars approach as to how to deal with the situation.

The problem is that we all have really good ideas, and I know we all want to deal with this, but crystal meth is like an octopus. It runs off in a thousand different arms, and you're trying to grab it and figure out what the best solution to control it is.

[1115]

It's an interesting drug in that it hits everybody. This is not a drug that just hits people in poverty or people on the streets or people from poorer socioeconomic backgrounds. It hits absolutely everybody. I was interested to read a story about an MLA from Saskatoon whose name is Ted Merriman. He is an opposition member for Saskatoon Northwest. His daughter, who is 33, became addicted to crystal meth. It ripped their family apart. In fact, he has taken on the responsibility of being an outspoken advocate for this. That provincial government recently unveiled a strategy for attacking the crystal meth problem.

It hits everybody. It can hit you. It can hit me. It can hit our children from really good homes. In fact, it was interesting. One thing he said was that his daughter had grown up spending summers at the lake playing with her family. She'd learned the piano. She went to church. She played sports. She graduated from high school. That sounds like a really all-round kid to me, and she became highly addicted. It ruined — ruined — her life.

Why are kids attracted to crystal meth? I don't think enough of us talk about this. One of the attractions is that it's a diet drug. They sell it in schools to kids. Pushers will go to a school ground and they will — I don't think enough people talk about this — see a bunch of kids who are a little overweight. We all know about fashion. We all know about fashion in school and how important it is to kids. It's sold as a diet drug, and it is effective. Once you take crystal meth, you can lose a whole whack of weight in the first week. You can lose a ton of weight in a month. You take this drug and you immediately lose your appetite. You don't sleep. You actually roll around the clock on a 24-hour cycle.

What happens is that the parent doesn't notice it at first, because the kid is really upbeat. They're doing their homework. They're happy. In fact, it was interesting that this MLA's daughter said that. She said: "I felt powerful. I felt smart. I felt pretty. I felt sexy." That's what crystal meth does when you start taking it. So these kids get on it and say: "Wow. This is pretty cool and I'm losing weight to boot." They'll take it once, and then they'll take it every third day or every fifth day, or they'll go one, three, five. That's how it starts.

Sure enough, all those things happen. The parent looks at the child and thinks their kid's doing really well. The child moves along and finally it's a month in. The problem with crystal meth is that it's fast and it's powerful. What happens is that the family hits the wall. After six weeks you have a child that has fallen apart. They've been up for 24 hours a day. By now their systems are breaking down. They are cracking up. Their whole persona — personality, life — is starting to fall apart. The parents didn't know. Then the parents hit the wall, because they don't know what to do. That's how bad this drug is.

With other drug users the parents can sort of watch a gradual process, and they can find out what's going on. But with this drug you won't know about it until the kid hits the wall. The really bad part is that it's hitting our schools as a diet drug.

We have talked about the main ingredient of crystal meth. That's been well talked about. We all know that it's an over-the-counter cough medicine. I think that Meth Watch is a superb idea, certainly something that I think we should be looking at here in Victoria. I'm sure my South Island colleagues would agree with me on that. It is a good idea. It's great to be able get out there and go to drugstores and educate them. It's great for service clubs to do that. I really do hope we do this. That's one component. We all know that the folks that want to make crystal meth will get around that anyway. It's a cultural change.

It's interesting. In Washington State there is actually a law. According to their state law, stores cannot sell more than three packages of cold medicine. So the KIRO news team decided to go out there and see if they could break that law. Interestingly enough, they did. Although they said that most stores followed the law, they found stores that were selling way over the limit. They found that it was quite easy, actually.

We do have to be cognizant of the fact that we will.... This is just another piece in this issue. The whole idea of Meth Watch is a great piece, but it is just a piece. We also need to get to the kids a little bit more carefully, and I think we need to get to the kids with their peers.

[1120]

I think we need to recognize that we have a huge problem in British Columbia. We certainly have one in Victoria, and I was very pleased to see the member bring this forward. I was very pleased to see the Solicitor General talk about the support for Meth Watch.

I think we should all embrace it within our communities, but don't let's lose sight of the fact that the people who sell this stuff are usually the scourge of the earth. These are people who are pushers. These are people who know how to work the legal system. They can be in and out in two minutes. They know there is a demand for it, and they certainly know there is a demand when it comes to youth and diet drugs. I would like everybody in this House to recognize that that is one big door open for these pushers to get through when they're hitting kids who are actually trying to, as I say, lose weight.

I support the motion.

L. Mayencourt: It is a great pleasure to rise in support of the motion put forward by the member for Maple Ridge–Mission. I want to commend him for the work that he and his community have been engaging in over the last several months in trying to address the issues of crystal meth on a very local level.

British Columbia has for one reason or another become a very significant place for the manufacture of crystal meth. It has been a place where we have noticed the spread of crystal meth following the SkyTrain route, following the 401 highway, following Highway 97 up to the north. It is definitely something we really have to pay attention to.

I am constantly amazed at the kinds of situations people end up in as a result of crystal meth. Part of it is about developing a plan, developing an idea of what we should do in order to address the issues of crystal meth. We have a five-point action plan that's inside the *Crystal Meth and Other Amphetamines: An Integrated B.C. Strategy* report that was produced in August of 2004.

They call for us to educate the public. What public are we talking about? Well, as many of the members have spoken of already, we need to educate retailers — retailers that might be selling products they don't realize are part of the crystal meth recipe, if you will. We need to reach into our school systems. I am always very supportive of schools that have champions who will go into classes and talk to kids about drugs and alcohol.

I think that is something that has greatly improved over the last couple of years. I remember first coming to government in 2001 and going and visiting with some folks that were in the education field to educate kids about alcohol and drug addiction. I saw some of the materials, and frankly, it was pretty dull stuff. We

live in an age where kids really like to see something that is splashy. They like to see something with colour, something that reaches them on their level.

I know that over the last few years we've seen a great improvement in the materials that kids get in terms of dealing with this. But I do not think that at this point we are serious enough within our school system about dealing with the issues of crystal meth and other drugs and alcohol. I think we have a long way to go on that, and I would encourage those folks that educate our kids to consider bringing this closer into the classroom. I think kids really need to know about this.

We need to reach out to youth centres. We have a number of youth centres in my community. Being able to reach those kids and talk to them about the dangers of crystal meth.... All of this is pretty simple stuff. It's about standing in front of someone and talking about the issues that are important.

We have to work towards building safer communities. One of the things I'm extremely proud of is the safer community initiative that this government has launched, a holistic approach to dealing with the issues of street crime, alcohol and drug addictions, enforcement, harm reduction and so on. I really think that the initiatives related to safer communities are very, very important to us.

[1125]

We need to support research. We need to be able to tell people what it is they need to be looking for when they're suspicious of a crystal meth lab or a crystal meth dealer in their neighbourhood. I'm very supportive of the Meth Watch program that has been launched not just in Mission but in other areas of this province as well. I'm really encouraged that store owners, ordinary retailers, are taking action. The fact of the matter is that we have to do a fairly comprehensive plan to attack the crystal meth industry.

We should identify key at-risk groups. It's really amazing to me, when I look at the kinds of people that get involved in the crystal meth scene — women of child-bearing age; children in homes where parents or other family members engage in the use of methamphetamines; kids engaging in methamphetamines, such as street youth and youth that attend dance raves and so on; sex trade workers; in my community, the gay community, and other populations that are using this stuff quite readily.... It's surprising to me that it isn't just a city thing. It is something that's happening in Fort St. John, in Prince Rupert, in Prince George and so on. Being able to identify those key at-risk groups is very, very essential to us being able to address the needs that are out there.

We need to increase the skills of the service providers. Frankly, some of the education around.... Crystal meth has been around for a long time, but it's relatively new in terms of how many people it is affecting. We need to work with our community groups, whether that's alcohol and drug treatment facilities or schools or addictions counsellors or corrections staff. We need to be able to tell these folks what it is they need to do in order to deal with this in an effective manner.

Then we also have to work on reducing the individual harm. I think this is important. We need to provide information to the public about methamphetamine use and its harmful effects. Right now we're not doing a very good job of it.

A lot of people have mentioned this — that using crystal meth enhances your sexual pleasure. Wow. That doesn't sound so bad to a lot of kids. It allows you to stay up longer. It allows you to be more active and awake and what have you, and this is something that is an issue for street youth. But the effect of it long term is very severe. Sometimes these kids and adults will go into a psychotic state as a result of using crystal meth. This stuff is really bad for you.

What happens to youth and to others who use this drug is that it slowly eats away the brain. In the simplest terms, what it does is start to destroy parts of the brain that are necessary for them to be able to make decisions, to be able to remember things, and all sorts of stuff. I have seen kids go from zero to 60 on crystal meth and then come to a screeching stop at some emergency ward like at St. Paul's or VGH.

There's nothing you can do for them. They are in a psychotic state, and they might remain in that state for the rest of their lives. That's really bad stuff. That's stuff that breaks the hearts of moms and dads, and it breaks the hearts of communities. There is a long-term effect of this. Those kids that remain on this drug, who use it, who get into that psychotic state — we'll be looking after them for the rest of their lives. I think it's very important that before we get to the point of them being in this state for the rest of their lives and of us having to look after them, we should be investing dollars now at the front end to educate and inform people, to provide service providers with the right tools and technology and research to be able to do the things that we do and to engage people like retailers in the Meth Watch program. I think those are all important things.

There's another one that I think we should be doing, and it has not been talked about here yet. But I think it's very important. There are a lot of.... People call them precursors. Basically, it's just ingredients that make up crystal meth. They start with over-the-counter cough, cold and allergy medicines that contain pseudoephedrine or ephedrine. There are a lot of products that sit on our drugstore shelves that contain those drugs. I think we need to do better controlling of those items. I think we have to start doing a little bit more homework on whether or not this is being sold in bulk or what have you.

[1130]

I also think it's time for drug companies that produce pseudoephedrine and ephedrine — and other manufacturers that come forward with products used in the manufacture of crystal meth — to actually plunk some money down with the Minister of State for Mental Health and Addiction Services and help us take this crystal meth strategy from this book into communities. It is going to cost us some money to be able to do that, and I really feel like it is time for the drug companies especially to step forward. They can't make this stuff

without your product. It is time for you to engage in a partnership, much as the retailers have done here — a real, genuine partnership with the Ministry of Mental Health and Addiction Services. Put some money down on the table, and help us execute the crystal meth strategy here in British Columbia.

That's all I have to say about this for now. I am very, very supportive of the member's efforts. I watched the news this weekend and watched him and the member for Maple Ridge talking about crystal meth and the difficulties they face in their communities. They're doing a great job, and I salute them for it. I fully support this motion.

J. Bray: I'm very pleased to rise in support of this motion. First of all, I want to commend the member for bringing this forth, for actually showing the leadership, not only in his own community in the Fraser Valley but here in this Legislature, to deal with this very, very serious issue.

The motion before us now is actually a very comprehensive motion, because it talks about the various segments of dealing with this problem, from educational awareness to building cooperative strategies between government and the private sector. It talks about effective treatment programs. I want to focus on just one particular area. I know that the member for Vancouver-Burrard talked about some of the other strategies, so I don't want to repeat that. It's something I hear in my community a lot, especially around issues like crystal meth and other hard drugs. It is where the motion talks about advocating more appropriate sentencing of convicted manufacturers and distributors.

Let's be clear. In downtown Victoria the largest-growing segment of the population that uses crystal meth is our street-involved youth. Let's be very clear. The manufacturers and the distributors are preying on these individuals. These are individuals that might be homeless, might have suffered abuse or might have fetal alcohol spectrum disorder. The manufacturers and the distributors are preying on these vulnerable people.

The manufacturers and distributors are the scourge of our society. They are the vilest, most dangerous scum that exist. Until we decide as a society that people who will prey on the most vulnerable by giving them the most dangerous drug we know and getting them addicted instantly so that they have an ongoing cash flow.... If we're not prepared as a society to take those distributors and manufacturers and lock them away forever, then we're always going to be faced with the problem of people deciding that they want to make a buck off of the most vulnerable in our society.

Crystal meth destroys lives. Therefore, the manufacturers and the distributors destroy lives. They do it wantonly, they do it willingly, and we seem to have a system of justice that, at times, doesn't take these issues very seriously. We have, in many ways, a very good criminal justice system. We certainly have outstanding police officers in our municipal forces and RCMP. We have great corrections staff, and we do have good

judges, but at times my community gets frustrated when the scum that make and sell this stuff to our kids appear to get slaps on the wrist and figure it's a cost of doing business.

We need the appropriate sentences which make it very clear that under no circumstances does our society endorse that activity. That means, in my mind, that if you want to sell this stuff, this poison, to our kids, then you go to jail, and you never come out — period, end of discussion. The resources.... Instead of continually processing these distributors and manufacturers through the court system, we spend the money from doing that on treatment, on outreach, on education.

[1135]

I really applaud the member for bringing this forward and talking about advocating for more appropriate sentences. As we know, that falls under the Criminal Code of Canada. That's a federal jurisdiction. But we need a united voice in this House to talk about this issue. We can't fool around anymore, because in the meantime, our kids are dying. In my community it is our street-involved youth and our aboriginal urban youth who are dying because of these people who make and sell this.

I haven't heard Carole James talk about this, but I hope that she will find a microphone when she hears this debate and that she will stand up with this House in unification and say: "Absolutely, we need more treatment. Absolutely, we need more outreach. Absolutely, we need more education. Absolutely, we need more appropriate sentencing for the manufacturers and the distributors of this poison." I hope that's what she does. That's the leadership that the member has brought forward to this House, and I hope all members unanimously support this motion. It is our kids that are paying the price for our indifference.

R. Stewart: There is a lot of debate over the relative harms associated with the recreational use of marijuana; however, there is no debate related to the harms of crystal meth. It is harmful cognitively, it causes permanent damage, it is strongly addictive, it harms our children, and it ruins generations.

Let's take a look at the manufacturing of crystal meth — the manufacturing of those two drugs, in general. In both cases, the manufacturing or growing of pot and the manufacturing of crystal meth in a neighbourhood present enormous challenges, not just for the fact that we're creating something illegal and potentially harmful to many people but that we're doing it in a residential setting all too often.

In a few minutes after the House rises, I will be speaking with someone who lived at the Cape Horn townhouses in my riding, at which were discovered 28 separate grow ops last week. I will be speaking to her because, after complaining for a long time, she ended up having to move from the neighbourhood in order to protect herself and feel safe again.

That was just grow ops. Quite often the public has this image of a marijuana grow op as something that is relatively benign — we will catch them or not, and the

neighbourhood won't really be affected — but all too often, that isn't how it comes about. That isn't what happens. What happens is that a drug grow rip, a fire or some other terrible thing brings the police and fire department to the scene. In some cases during a grow rip, we end up with the wrong house being attacked. It turned out that the rippers decided to attack a house that they weren't quite certain had the marijuana or, in some cases, the meth lab.

Certainly, I have spoken about it before. The year before last we had to deal with two grow ops right in our own neighbourhood, on my daughter's paper route. Those two grow ops were eventually shut down, following numerous complaints from ourselves and our neighbours. Today we know of another suspected grow op in the neighbourhood. We know the former residents who sold their homes. They took great care in taking care of an absolutely beautiful home. Things have changed, and once again we fear for what could happen in our own neighbourhood.

Crystal meth presents a much more volatile risk. As the member for Victoria-Hillside pointed out, crystal meth has been glorified in the minds of some children, in the things that it can do. There are some who believe that crystal meth can help you lose weight. That by itself is a significant problem in our health care system and, certainly, in our education system, where the glorification of thinner and thinner is causing challenges with nutrition of our children. When you put next to that the pressures associated with a drug that might well be seen by some of them as being the perfect nirvana of a cure for what ails them — when, in fact, it can cause tremendous harm — you've put in place a very serious situation.

[1140]

In our local paper we had an Education Week supplement in which children were designing ads. One of the ads was for a weight loss centre, and the ad designed by the children shows clearly the children's perspective of what the ideal shape of a person should be. I found the ad quite disturbing as the father of four children myself.

I want us to grasp this issue for all of the things it is. It is potentially harmful to our children simply because of the horrible addictive qualities of a disgusting drug, and we must push for tougher laws for those people who manufacture it, distribute it and sell it to our kids — period. That applies to all addictive hard-core drugs. We must look for greater and tougher penalties and must look to the courts for enforcing the existing law, but we have to also look for changes in the Criminal Code.

With those activities — whether it's a grow op or a meth lab, where the risks associated with the manufacture of a product takes place next to me, next to you, in the house next door, in the apartment upstairs — we need tougher laws and tougher sentencing for those people who would deem to inflict that kind of terrible risk upon unknowing neighbours.

I urge us to urge the federal government and our courts to once again take more seriously the risks that

our families are facing in our communities and to stand up; to rally with other parents in our communities, as I have and as I will; and scream as loudly as we can that the people that harm our neighbourhoods and harm our children will be put away, that this society protects our children and our neighbourhoods and that the people who would do them harm will be dealt with severely by a court system and a justice system that takes seriously the protection of the next generation.

G. Hogg: It's a pleasure to speak to the motion from the member for Maple Ridge-Mission. Many of my colleagues have spoken eloquently of the issues and concerns as they apply internationally and the scourge that crystal meth has wrought upon our communities.

One of the measures of the increase in use of crystal meth is found in the intake numbers in the adolescent treatment centres and the residential centres that exist around our province. Particularly for my community that would be Peak House.

Over the past five years crystal meth has increased steadily to become the number one drug that youth come into treatment for. Five years ago crystal meth was barely even on the radar screen. If we look at the numbers from April 1, 2004, through September 30, 2004, there were 27 youth who were admitted into the program, 11 of those from the Fraser valley. Of 15 female youth who were in the program, 67 percent identified crystal meth as their drug of concern. That's up from 54 percent in '03-04. For the males, 25 percent reported crystal meth as their primary drug problem, and that's up from 13 percent in '03-04. There are also, of course, many mental health issues associated with it, and those have increased and have been looked at as well.

Primary drug of concern for males and females: crystal meth was 48 percent; cannabis, 26 percent; alcohol, 18.5 percent; and cocaine, 7.5 percent. We've been looking at the change in terms of the age of first use. In 2001-02, 15.2 years of age was the first time they used crystal meth. In 2002-03 it dropped to 12.1 years. In '03-04 it is 11.9 years of age for the first usage. It shows how pervasive this drug is and how it is becoming ever more pervasive within our communities.

Within our addictions services programs 20 percent of youth who have come in during the past year have identified crystal meth as their concern. This is up from previous years. We don't have many statistics or exact numbers, but in the past youth identified pot as their first choice, alcohol as second, with cocaine and others in third place. Now pot is first, alcohol is still second, and crystal meth and cocaine are now running together in that third position.

Over the past year 233 adult intakes were received, and 35 of them were for meth, which is 15 percent. In the past year, out of 70 youth intakes 14 percent were for meth, which is 20 percent of the intake.

[1145]

San Francisco reports that crystal meth users are 400 percent more likely to get HIV than anyone in the overall gay community. We've seen those studies re-

flecting the types of issues and concerns across our province.

Peace Arch Community Services in the Surrey-White Rock area has been the primary provider of services. They have received funding through the Fraser health authority to develop a video which features a number of crystal meth users and are using it as a teaching tool and taking it to the schools as part of a programmatic approach.

One of the concerns I have when we take these approaches is that sometimes it's so dramatic in terms of the video that it doesn't reflect and identify.... Youth don't identify with it. I was involved with the development of a program some 15 years ago, some television commercials around alcohol usage. We started with a picture of a car rushing down a road, and it flashes to black as people are deemed to be in an accident and killed. It had very little impact with youth, because despite the fact that two out of three youth in the high school programs and in their adolescence knew someone who had been killed or knew somebody who knew somebody who had been killed or maimed as a result of a car accident, it didn't connect with them. It was something that had impact on those of us who were nice, middle-class people who understood and saw the world in conceptual terms, but it didn't connect with youth.

Eventually, as a result of using some focus groups.... We talked to youth about what might have some more impact, what might be useful. We eventually developed a commercial which showed a Chevy up against a telephone pole with some steam coming out of the hood, the flashing red light in the background. A taxi drives up, and out of the taxi steps the father of a youth, dressed in his pyjamas. That had impact, because youth could see that happening to them. Unless it's relevant and something they can actually identify with and think is possible, then it doesn't connect.

Sometimes we develop systems and responses that are too conceptual and removed from the place where youth and adolescents live. They have to be able to understand and believe that it can have an impact, that it can affect them. Too often I think that we take approaches which are pretty dramatic and somehow create a separation between the reality of what youth experience and the reality of how the adult world, which is making some decisions around that, identifies with it.

The motion speaks to a multidisciplinary approach. It talks about looking at developing support to restrict manufacturing precursors; advocating for more appropriate sentencing of convicted manufacturers and distributors; increasing the addiction treatment options; and also, importantly, assisting communities in designing local solutions.

Certainly, we tend to make all of our social problems legal problems. If we could solve all of our problems simply by passing legislation, we'd have a pretty much perfect world by now, I'm sure, with the intelligence of Legislatures across this country and around the world. Unfortunately, we don't have what most of

us would see as a perfect world as yet, so legislation isn't the only solution. It's a framework and a structure. It's really ensuring that the issues, principles and values reflected in that are promulgated and understood within the communities, because real solutions come through the issues we talked about earlier with early childhood development. They happen in the context of families.

Real solutions come from communities, where we look at the development of social capital. We look at the Rotary clubs and Kiwanis clubs and Elks clubs and Boy Scouts and all of those groups that have contact with each other. Their relationships and connections have the ability to effect change and make a difference. It's from there and early childhood development that we must start with this. We just need to have the legal framework to support and structure it.

Mr. Speaker, I'm delighted that the member for Maple Ridge-Mission has put this before us and given us a chance to talk about it. Hopefully, it will be seen as a beacon and a starting point for us to continue some of the creative and innovative approaches which have been developed across this province.

D. Hayer: I take special interest in this motion by the member from Maple Ridge-Mission, because we have just begun a pilot project in my community of Surrey — with the help of the Surrey fire department, the RCMP, B.C. Hydro, Surrey building inspectors and the B.C. government — to intensify the battle against another insidious drug problem: the dangers of marijuana grow ops in our neighbourhoods. This motion, however, tackles the horrors of crystal meth addiction and steps to combat it.

Crystal meth is a terrible drug and incredibly addictive. It is a cancer that gnaws at the lives of our young children who fall prey to the criminals who relentlessly pursue them. We must, for the future well-being of our society, be equally relentless in fighting against these criminals.

[1150]

We must make selling and producing the vile, addictive chemicals not only difficult but also costly to the criminals. We must advocate for changes to the sentencing of convicted purveyors of this drug so that there is a serious deterrent to this activity. Our courts must hand out lengthy jail sentences. If we don't, if we continue to allow these criminals to receive little more than a slap on the wrist, we will allow them to sentence many of our children to degradation, to a life of desperation, to brain damage, even to death from the evil effect of this horrible drug.

I am encouraged that this motion also calls for increased addiction treatment options and for provision of local options to prevent the epidemic of crystal meth addiction from escalating. Believe me, without powerful tools to fight this plague, without lengthy jail sentences, without the rights of victims having at least the same weight as criminals in our court system, without treatment options, we will lose many of our most precious assets — our children.

Our future must not be compromised by criminals. We must take every measure possible to combat the sale, the production and the effects of this highly addictive and dangerous drug. We are taking steps right now in Surrey to battle marijuana production, to protect our neighbourhoods, and we will need to take steps right now to battle crystal meth addictions and protect our children. We must also fight this to protect our emergency services providers, as meth labs contain highly toxic, explosive chemicals. As well, those who are there to protect our communities — firefighters, ambulance paramedics, police officers — face guns, explosives, vicious dogs, booby traps and other sickening devices designed to injure or even to kill the innocent people who are just doing their job to protect us all.

It is time to stop these criminal activities, these poisons on society. Therefore, I pledge my entire support and that of my community to this very worthy motion.

D. MacKay: Noting the hour, I am going to have to restrict my comments here. I had quite a bit I wanted to say on the scourge called crystal methamphetamine and what it's doing to our young people.

We've heard what happens in the manufacturing of it. We also know now what's involved in the shopping list to manufacture this stuff. We know that it's not made in sanitary labs. It's made on kitchen counters, on kitchen stoves — not the cleanest of conditions. I can't believe that young people are willing to try the crap that comes out of those stoves and out of those home-made labs, but they do.

It can be used in a variety of ways. It can be used orally, by snorting, by smoking or through intravenous use. Having been a peace officer for 28 years and retired 15 years ago from the RCMP, I have to tell you that when I started looking into the penalties associated with the crystal meth thing that we're talking about today, I had to do quite a bit of work to get myself familiar with the penalties associated with it. I found everything under the Controlled Drugs and Substances Act.

When I started looking at the penalties, I looked at the penalties for those people that are manufacturing or selling that junk to our kids, but one of the penalties I forgot to look at is the penalty associated with users of that drug. In the year 2000 there were two deaths in British Columbia associated with the use of crystal meth. In the year 2003 there were 13. To the end of May 2004 — I don't have the final numbers, but up to the end of May — there were six deaths attributed to the use of the crystal meth. That's something that a lot of people seem to forget. We're always concerned about the person pushing the drug, and we never look at the penalties associated with those kids that use the stuff.

When I found out that crystal meth was in schedule 3 under the Controlled Drugs and Substances Act, I saw that possession of crystal meth only carried a maximum penalty of seven years or a summary conviction of \$1,000 fine or six months in jail. Possession of methamphetamines for trafficking carried a maximum

penalty of ten years or a summary conviction of not exceeding 18 months. Trafficking carried exactly the same penalty. That really blows me away.

The cost of marijuana.... You just have to look. I heard somebody say that the possession of cannabis is not an issue. I can tell you that those tragic deaths that happened in Alberta were the result of a marijuana grow op. In my years of service with the force I knew that people involved in the drug trade started off with marijuana, because it was a soft drug, and moved to something a little harder to get a bigger buzz out of it. You can't tell me that the possession of marijuana.... It's different. The penalty section for the possession of marijuana is different than it is for crystal methamphetamines, and I don't understand that.

[1155]

I think, in all fairness, that the legislators who passed that legislation probably thought they were doing the right thing. I think it's time we started having a second look at what we're doing, because the penalties don't reflect what's happening in reality to those young kids who use it.

In my view, we have to move the maximum sentences for possession of methamphetamines to the minimum sentences. Collectively, those of us in this House should work with our Solicitor General to make sure that the penalties contained in the Controlled Drugs and Substances Act are reversed. The maximum penalties should become the minimum penalties for possession of those drugs.

R. Hawes: Thank you to all of my colleagues who spoke on this issue. This is an issue that's near and dear to my heart.

In closing, I do want again to give tribute to the Maple Ridge community and the leadership shown not just from city hall and Mayor Kathy Morse, her council and her staff but from Insp. Janice Armstrong of the RCMP, who has particularly been a leader, and her force and her staff. As well, there's Len Garis, the former fire chief of Maple Ridge, now in Surrey — the Surrey community is benefiting from his knowledge and his passion for pursuing this topic — and also the Ridge Meadows Rotary Club under the leadership of Mary Robson.

Maple Ridge has been a leader for the province. They are making a huge difference to our kids, and they are saving future generations. I would urge other communities to follow.

With that, Mr. Speaker, I close debate.

Motion approved.

Hon. G. Abbott moved adjournment of the House.

Motion approved.

Deputy Speaker: The House stands adjourned until 2 p.m. today.

The House adjourned at 11:57 a.m.