



# **NORTHWEST TERRITORIES LEGISLATIVE ASSEMBLY**

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## **HANSARD**

**Wednesday, October 30, 2013**

Pages 3229 – 3260

**The Honourable Jackie Jacobson, Speaker**

# Legislative Assembly of the Northwest Territories

## Members of the Legislative Assembly

### Speaker

**Hon. Jackie Jacobson**

(Nunakput)

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*Minister of Public Works and Services*

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*Minister of Industry, Tourism*

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*Minister of Transportation*

**Mr. Norman Yakeleya**

(Sahtu)

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**YELLOWKNIFE, NORTHWEST TERRITORIES****Wednesday, October 30, 2013****Members Present**

Hon. Glen Abernethy, Hon. Tom Beaulieu, Ms. Bisaro, Mr. Blake, Mr. Bouchard, Mr. Bromley, Mr. Dolynny, Mrs. Groenewegen, Mr. Hawkins, Hon. Jackie Jacobson, Hon. Jackson Lafferty, Hon. Bob McLeod, Hon. Robert McLeod, Mr. Menicoche, Hon. Michael Miltenberger, Mr. Moses, Mr. Nadli, Hon. David Ramsay, Mr. Yakeleya

The House met at 1:32 p.m.

**Prayer**

---Prayer

**SPEAKER (Hon. Jackie Jacobson):** Good afternoon, colleagues. Item 2, Ministers' statements. The honourable Minister of Transportation, Mr. Ramsay.

**Ministers' Statements**

**MINISTER'S STATEMENT 93-17(4):  
INUVIK TO TUKTOYAKTUK HIGHWAY**

**HON. DAVID RAMSAY:** Mr. Speaker, I am pleased to update the House on the progress being made to advance the Inuvik to Tuktoyaktuk Highway Project. This winter we plan to begin constructing the final link between the NWT highway system and the Arctic Coast community of Tuktoyaktuk. This all-weather highway will be constructed in one of Canada's most challenging environments.

The Inuvik to Tuktoyaktuk highway is a legacy project of this government that will help reduce the high cost of living in our most northerly region and will assist in opening up new economic development and tourism opportunities for residents of the Inuvik region and the Northwest Territories.

On behalf of the people of the NWT, I would like to thank the federal government for their funding support for this project. Thanks to the Prime Minister's vision of establishing Canada's first permanent road to the Arctic Coast, and the strong support of the Members of this House, we have established a strong partnership arrangement to fund construction of this important new section of NWT highway. The project will produce significant employment opportunities for area residents and will assist to develop new workplace skills that may be applied to future projects at other NWT locations.

Mr. Speaker, I am pleased to report that the Inuvik to Tuktoyaktuk Highway Project is proceeding according to the plan. We anticipate receiving the necessary water licence, land use permits and

fisheries authorization to begin constructing the new highway in December 2013.

A significant amount of work had to be completed before achieving this milestone. The Department of Transportation staff and consultants have been dedicated to the project for the last four years to produce volumes of studies, geotechnical investigations, design work and environmental management plans. The department held numerous consultations with regulators, stakeholders and co-management groups, leading to commitments under 12 management plans and over 250 commitments to the Environmental Impact Review Board.

The final geometric design and the individual designs for the 68 watercourse crossing structures for the Inuvik to Tuktoyaktuk highway are complete. These detailed designs include special innovative engineering features to preserve the sensitive permafrost in the region and to ensure the quantity and quality in the adjacent water bodies.

Over the past year the department has been working successfully with a regional contracting company to begin upgrading Navy Road in Inuvik and the Source 177 access road south of Tuktoyaktuk to enable efficient construction of the highway over the next three winters. Mr. Speaker, I am pleased to report that this contracting approach has resulted in significant employment and work for many contractors and service providers in the Inuvik region. Over 10,500 person days of employment were secured by NWT residents.

The department has also advanced several other initiatives to maximize oversight and stakeholder engagement on the project. The Inuvik to Tuktoyaktuk Corridor Working Group will hold its first meeting on November 5<sup>th</sup> in Inuvik to discuss the first year of construction. This working group consists of 12 regional and government stakeholder groups dedicated to sharing perspectives on how to improve the effectiveness of construction activities and to how to minimize adverse effects on the land, water and wildlife.

Coordination and collaboration of efforts by government is very important in a public project of this size. The department is contributing to establish a project coordination office in Tuktoyaktuk and partially funding a career

development officer in Inuvik. It's important that we work closely with our colleagues in the Department of Education, Culture and Employment and Aurora College to train local residents so they may participate meaningfully in this construction project and develop new skills improving their ability to secure future jobs in the NWT. The first driver training program toward a Class 1 driver's licence with air brakes is scheduled to begin in mid-November in Inuvik.

We are also working closely with the Department of Environment and Natural Resources and regional management stakeholders to ensure wildlife and the environment are properly protected as the project is being delivered.

Mr. Speaker, as we ready ourselves to begin constructing the northern-most section of the Mackenzie Valley Highway, planning work is also moving ahead for the southern portion of the highway from Fort Good Hope to Wrigley. We are closely monitoring the construction schedule and budget and this is on track.

The department is working closely with Aboriginal and community stakeholders along the Mackenzie Valley corridor to ensure the planning, design, construction and operation of the permanent highway will meet the needs and expectations of NWT residents and businesses.

The Mackenzie Valley Environmental Impact Review Board held public meetings in Mackenzie Valley communities in September to determine the scope of the project developers' assessment report. The government continues to discuss the project with stakeholders throughout the Mackenzie Valley to gain valuable perspectives from the people who will be most affected by its construction.

Work is also proceeding to complete the collection of essential baseline data along the Mackenzie Valley corridor to support and initiate the required business case for the project to leverage federal funding and meet the requirements of the project's environmental review.

I will continue to provide Members with regular updates on our progress to advance the entire Mackenzie Valley Highway from Wrigley to Tuktoyaktuk. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Minister Ramsay. Item 3, Members' statements. Member for Range Lake, Mr. Dolynny.

### Members' Statements

#### MEMBER'S STATEMENT ON PURSUIT OF PROVEN SOLUTIONS TO ADDICTIONS TREATMENT

**MR. DOLYNNY:** Thank you, Mr. Speaker. The guiding principles of the 17<sup>th</sup> Legislative Assembly

clearly state that under extraordinary circumstances, Members of the Legislative Assembly should have the opportunity to discuss significant announcements, changes or initiatives before they are released to public. Unfortunately, it appears that the Minister of Health and Social Services and his entire department failed to dust off these principles, as numerous cavalier actions took place during the summer months that affected our dealings with addictions and health governance. Of course, Mr. Speaker, I'm talking about the closure of our only residential treatment facility and the removal of the Deh Cho Health Authority.

You might see a little theme happening here today and I would like to set the stage by reading some excerpts from a government document. "The greatest problem facing the people of the Northwest Territories in the year 2002 is addiction of substances such as alcohol, nicotine and marijuana, and addiction to problem gambling." It goes on to say, "Improved economic opportunities as a result of oil, gas and mineral exploration have done little to decrease the incidence of addictions in the year 2002. Many problems related to addictions remain prevalent."

These excerpts come from a document, entitled *A State of Emergency: A Report on the Delivery of Addiction Services in the NWT*. If, back in 2002, addictions were declared a state of emergency, sadly, in 2013, we must now be at a state of Armageddon. Ironically, if one didn't know any better, this 2002 document mirrors many of the current documents such as our Shared Path Towards Wellness, Mental Health and Addictions Action Plan 2012-15 and the recent Forum on Addictions.

My point is that we are plagued with study after study after study and still we are no further ahead than we were decades ago. We have a way of repeating the scabs of our past and it is painfully obvious that we attempt to recycle failed directions and repeated patterns. This pattern of activity needs to stop, Mr. Speaker.

The compass waypoints that this Department of Health and Social Services are using have been changing constantly. Until we put serious dollars into quality programs and strategic infrastructure to deal with these issues, we will lose the fight to addictions. History has taught us this lesson more than once, yet it appears we are too stubborn to listen.

As a Member of this House and a Member of the Standing Committee on Social Programs, all I ask the Department of Health and Social Services and its Minister is to...

I ask for unanimous consent to conclude my statement. Thank you.

---Unanimous consent granted

**MR. DOLYNNY:** All I ask the Department of Health and Social Services and its Minister is to select one proven pathway for addiction treatment, stop shooting from the hip, put the right amount of dollars to address the needs of all Northerners, not just a select few, and stop changing your minds every couple years. That's it. Simple. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Dolyunny. Member for Weledeh, Mr. Bromley.

MEMBER'S STATEMENT ON  
RESIDENTIAL TREATMENT CENTRE  
FOR ADDICTIONS

**MR. BROMLEY:** Mr. Speaker, I do not believe we have ever given consideration of a fully supported alcohol and drug addiction treatment centre the attention it deserves. We need thorough, informed debate to examine the pros and cons leading to a clear, evidenced-based decision and commitment to act.

Ministers have frequently said they are considering various forms of treatment. We've played regional politics, closing one centre to open one in another region, only to close it a few years later and never providing the support and oversight needed.

We need to remember that beating an addiction is not like going to the hospital because you cut your finger. Beating an addiction is one of the most difficult things a person can do in their lives. We need to treat the issue with the respect it deserves.

The recent Minister's Forum on Addictions was a respectful process and many people made the effort to express their views. Action taken so far by this government does not match that effort and many people are disappointed. Closing the only NWT addictions treatment centre was a shock. Though, in my mind, not unwarranted, it was poorly communicated. Hiring a coordinator to try to figure out what an on-the-land process might look like is a beginning, but does not, again, meet the people's expectations.

Let's take the momentum that the Minister's Forum initiated and springboard to a clear assessment and debate on what a comprehensive treatment centre can do or not. Let's set a timeline, do the research and commit to making a decision to pursue a centre or abandon the idea and focus elsewhere. Let's not bury this potentially critical and currently festering question as a potential action and a Mental Health Strategy that we hope to do someday. Enough dithering, pose the question, encourage research and debate to answer it, make a decision and move on.

In the past I have suggested a promising but modestly tested treatment model developed in the Yukon that showed real evidence of success, which relies, to some degree, on a treatment centre.

Other jurisdictions may have programs we can adapt and base in the North as well. I'm not talking some point in the future. Let's have the Minister of Health come forward during this session and announce a timeline to make this final assessment. While on-the-land treatment is going ahead and I don't want to detract from that, we should not be making this up as we go along. We need to look at the latest research and make an objective and soundly based decision on whether or not a treatment centre is a necessary part of our treatment program in the NWT.

We need to put as much resolve into this as we are asking from those who are trying to break their addictions. Let's get it done. Mahsi.

**MR. SPEAKER:** Thank you, Mr. Bromley. The Member for Nahendeh, Mr. Menicoche.

MEMBER'S STATEMENT ON  
FULL-TIME MENTAL HEALTH WORKER  
FOR FORT LIARD

**MR. MENICOCHÉ:** Thank you, Mr. Speaker. For years the mental health worker position in Fort Liard has been filled by temporary contract workers. Residents are tired of professional staff turnover at the Deh Cho Health and Social Services office in Fort Liard. They're always dealing with inconsistent service delivery.

It's hard enough to build trust and to share painful, intimate details and it's harder still when you're constantly facing someone new. Getting help with your mental health isn't like getting your car repaired or your house painted. Residents need dedicated, full-time mental health workers who can provide a complete range of referrals and treatment options.

It's great to see the government making headway with its Regional Recruitment Program, but here's the tricky part: The Department of Health and Social Services now handles its own recruiting, so finding full-time health care workers in places like Fort Liard is outside the mandate of the Regional Recruitment Program.

It's difficult to untangle the reasons for high staff turnover. One factor isn't specific to the North; there is a nationwide shortage of health care professionals. Another factor is leadership. Evidence clearly shows that people don't stay in jobs if they don't have strong leadership. This should be on the government's radar as it tackles health care governance. There's also the question of competitive benefits and training opportunities.

These are proven ways to build capacity and keep staff engaged and upbeat. These are smart ways of heading off the constant staff turnover.

The final consideration is that work done by health care professionals in the small communities often leads to burnout. This government isn't doing

enough to find seasoned employees and professional couples who are genuinely able to handle the intensive workload and make a commitment.

Residents in my communities want this government to build a strong and steady northern workforce. Quite frankly, there's no greater urgency than in the area of mental health and addictions. Thank you.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Member for Frame Lake, Ms. Bisaro.

MEMBER'S STATEMENT ON  
ACTING ON THE RECOMMENDATIONS OF  
THE MINISTER'S FORUM ON ADDICTIONS

**MS. BISARO:** Thank you, Mr. Speaker. On June 12, 2012, the Minister of Health and Social Services tabled the Mental Health and Addictions Action Plan 2012-2015. One year later, June 3, 2013, the Minister's Forum on Addiction and Community Wellness Healing Voices report was tabled.

A year ago, as the Minister was setting up this forum, I rose in this House and I complained about the lack of action on the issue of addictions by the Department of Health and Social Services. I felt that the Minister should be taking action, not consulting. Now, one year later, I'm again complaining about the lack of action on addictions and community wellness.

Five months ago a very comprehensive forum report was received. It makes 33 primary recommendations and 34 secondary recommendations. But since June, what has the Health and Social Services department put in place to work on addictions problems, to take action on some of these 67 recommendations? Not much, from what I can tell.

Well, there has been some action. The Minister has closed the only treatment centre in the NWT, but we have yet to see any northern treatment programs to replace what has been lost, even though those treatment programs are called for in the forum report.

Addictions, drugs and alcohol are huge afflictions for our territory. We all know that. We knew that a year and a half ago when the 2012-15 action plan was tabled. We knew it a year ago when the Minister's Forum was set up. We knew it five months ago when the forum results were tabled, and we know it now as Members all speak to the problem. What has changed in the last 18 months? What progress has been made to attack the issue of addictions?

It's well known that our jails are mostly populated by inmates who are there because their addictions led them to break the law. It's well known that family violence in the NWT is associated with, and the result of, alcohol and drug abuse. I've previously called alcohol a scourge on NWT

society. It still is. Unfortunately, I see little improvement in alcohol and drug treatment and prevention programs from the first time I stood in this House to address the issue.

As we will hear later today, the Standing Committee on Government Operations, while consulting on the Liquor Act, heard story after story of the negative impact of alcohol and drugs on Sahtu communities. Everywhere in the NWT, our residents are asking for help with the effect of addictions on their lives.

I seek unanimous consent to conclude my statement.

---Unanimous consent granted

**MS. BISARO:** Everywhere in the NWT our residents are asking for help with the effect of addictions on their lives. What is the government actually doing about this? Very little, from what I can see. We have to stop talking and start doing.

**MR. SPEAKER:** Thank you, Ms. Bisaro. The honourable Member for Inuvik Boot Lake, Mr. Moses.

MEMBER'S STATEMENT ON  
SUPPORTS FOR NORTHERNERS TO  
ADDRESS MENTAL HEALTH AND  
ADDICTIONS CONCERNS

**MR. MOSES:** Thank you, Mr. Speaker. You're hearing that there's a theme here today, and we're speaking about mental health and addictions in the Northwest Territories. It's a sad day that we have to speak about this again. I think this is our second or third time that we've come to this government talking about the importance of getting a treatment centre or getting some kind of programs in place for people that are battling addictions and have no place to turn except go down south without the support of their family and their friends.

I've spoken up in this House before, where I've talked about reports that have been shelved. A lot of people have done good work for these reports that have been shelved and no action has been taken to them. I looked on the website dating back to 2002, looking at some recommendations that came out of that report, which was, back then, entitled, A State of Emergency. Back in 2002 it was an emergency then and it's an emergency now. We're getting into more and more worst-case scenarios that are happening in the NWT. All you have to do is look at the coroner's reports of the last few years and all the deaths that have occurred that were alcohol related.

Back in 2002 there were recommendations looking for medical detox services across the Territories, yet, we still don't have any. There was also talk about having mobile treatment back in 2002, and yet we have to spend all this money to go out to hear it again in 2013. They also talked about youth in crisis and affecting working with our youth. Our



youth are in crisis. Speaking of reports, there was another report in the last Assembly, called Forging the Future, where our young leaders, our youth leaders brought to this government two recommendations. One of those recommendations was the recommendation for a youth treatment centre, and yet we don't see any action taken on that.

This government has been doing a lot of investment in a lot of different areas in the short time that we've all been here together in the 17<sup>th</sup> Legislative Assembly, but we've got to start looking at investing in our biggest and our greatest resource in the NWT, and that's our people. We have to start investing in our people and making them healthy. We want a healthy economy, but we have to have healthy people. When we get more money and continue to allow these oil and gas companies to come in and do work, we're not meeting the needs, because our people aren't healthy to work in those companies. It's about time we should start investing in our people and get them healthy so that they can be part of society and be part of the workforce.

**MR. SPEAKER:** Thank you, Mr. Moses. The Member for Sahtu, Mr. Yakeleya.

MEMBER'S STATEMENT ON  
RECOMMENDATIONS OF THE  
MINISTER'S FORUM ON  
MENTAL HEALTH AND ADDICTIONS

**MR. YAKELEYA:** Thank you, Mr. Speaker. I, too, want to speak on this topic here. Someone told me that quitting addictions, quitting alcohol is easy. Staying sober or staying free from that is challenging. Also, somebody told me that when you overcome your own addictions, it is very, very difficult and our greatest battle starts with ourselves.

We have to clearly acknowledge our fears and be willing to follow certain prescribed remedies to stay free of our addictions. Countless men and women I have known have gotten and stayed sober and clear of addictions. Some of them may wonder how they did this. Well, I have also heard that each of us, within us, have our own solutions, our own methods of resolving our own issues in life, and I say good for them, pass it on. Others need mentors and supports for them to be there, to guide them as they walk this road. Of course, there are the treatment programs. There are some that provide some relief for people to go to look at their issues with addictions and the impact that has caused them in their life.

We have heard people in the Sahtu, as my colleague Ms. Bisaro said, talk about the impacts of alcohol addiction. We have seen people and heard people who want to sober up and be free of addiction, people who want to have healthy families and live in healthy communities. People are asking

for support for themselves and their families. We can, as legislators, be there for them, make a difference in life by saying no to addictions.

I call upon this government to implement recommendations from the Minister's Forum on Addictions that was over the last summer that they went through. I will ask the Minister of Health as to the follow-up on the recommendations to the report. Thank you.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Member for Hay River South, Mrs. Groenewegen.

MEMBER'S STATEMENT ON  
CREATIVE SOLUTIONS TO ADDRESS MENTAL  
HEALTH AND ADDICTIONS CONCERNS

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. Obviously, we are having a theme day on addictions. Addictions is one of the most challenging and perplexing issues that faces the North. Substance abuse permeates every health indicator that we claim. Addiction shows itself in our institutions of education, our corrections, in court facilities, our health facilities and in just about every other social indicator that we could possibly list.

Addictions are robbing many of our residents of their potential, their dignity, their valued relationships, and trapping them in the throes of poverty, low self-esteem, and often depression and anxiety. As my colleague from Range Lake has stated, enough studies. Enough platitudes. Enough political correctness. There is a thief in our midst. There was an international outcry of the global community when they drew the line on the weapons of mass destruction that we heard about so much in the media recently.

I would tell you that the addictions that are trapping and slaving the people of the Northwest Territories and killing and debilitating our people, young and old, has gone on too long. It is mass destruction. If a force from without was inflicting these conditions on our people, we would mount the biggest public safety laws, harm and loss reduction laws. We might even call in the military if this was something that was coming from without, but this is something that's coming from within. Largely under the radar, we continue to grow accustomed and acclimatized to the ravages of addictions.

If what we have done in the past isn't working, it is time to think outside the proverbial box. It's time to sound the alarm, as my colleague Mr. Moses said. It is time to call this what it is. It is a crisis. It is an emergency. How many accidents, how many drownings, how many assaults, how many deaths, how many family break-ups, how many more statistics of all of these things are we going to, as legislators, stand by and observe and not do something radical to try and address this in our communities and in our North?

Later today I will have some questions with some ideas for the Minister of Health and Social Services. Thank you.

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. Member for Deh Cho, Mr. Nadli.

MEMBER'S STATEMENT ON  
ON-THE-LAND ADDICTIONS  
TREATMENT PROGRAMS

**MR. NADLI:** Thank you, Mr. Speaker. An on-the-land program has been mentioned many times in this House. It is important we understand what communities view as on-the-land programs, which is using the land to heal ourselves, living upon the strengths of local traditional knowledge and also healing philosophies.

I'm concerned that this government, in the great spirit of devolution, is offloading responsibilities to communities and leaving the crises of addictions services to communities. I understand there are some successful initiatives in some communities. In the small communities, we are challenged with local capacity. I encourage the Department of Health and Social Services to not abandon our communities. I strongly recommend that this government work closely with local communities such as interagency groups and also with local organizations.

In Fort Providence there is a very special place called T'elemie, which is the site of the local healing lodge. It was built in 1996. The facility was developed by local leaders and people who envisioned helping their people with alcohol and drug addictions. The location is about 20 minutes from Fort Providence. With an arbour and encircled by sleeping cabins, the T'elemie Healing Lodge has been extensively used by the Residential School Society, local school and friendship centre. The T'elemie Healing Lodge is the place for meeting and gathering for the local community. It represents the symbol of community resourcefulness.

I have asked the Department of Health and Social Services what is an on-the-land program. To that, I was told it is really up to the communities. So I have gathered what I think is an on-the-land program. It's somewhere in the bush, on the land, the water, with animals and nature. It relies on the power of nature and the environment as the healing elements. It also has a facility and it's accessible. The program will be designed and implemented and also, at the same time, monitored and evaluated. It's based on healing and also the recovery philosophy and also on the alcohol and drug philosophy, also on the Dene and on-the-land philosophy. It also features individual and group counselling.

I seek unanimous consent to conclude my statement. Mahsi.

---Unanimous consent granted

**MR. NADLI:** Mr. Speaker, the on-the-land program will also feature a 30-day program or something like that, with preparation and follow-up. It will also provide counselling, and counsellors will have safety measures in place and also, perhaps, a coordinating body. I hope the Department of Health and Social Services will provide leadership and immediately begin working with communities. Mahsi, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Nadli. Member for Yellowknife Centre, Mr. Hawkins.

MEMBER'S STATEMENT ON  
NEED FOR CONCRETE ACTION ON  
MENTAL HEALTH AND ADDICTIONS

**MR. HAWKINS:** Thank you, Mr. Speaker. I think everyone knows how I feel about this particular issue but, just in case someone hasn't heard, I'm certainly willing to share it, once again, in this Assembly.

How far have we carried this message of addictions and the need for action? Study after study keeps telling us the same things our Minister's Forum on Addictions keeps telling us. What have we learned? We've learned the same things over and over again, yet we've realized nothing.

What we have realized is we've seen the closure of the Nats'ejee K'eh. That was a bombshell. That was a shocker to every single person who was caught by surprise.

I'm mad that that happened. You know what? I'm very upset that that happened. I've always said that there was a place in our North for that particular facility, and anyone who would shut that down has done an insult to the treatment of the addictions. I'll tell you why. This story doesn't end there. If you go to the Forum on Addictions recommendations, the forum says they've heard repeatedly that residential treatment centres, such as Hay River's Nats'ejee K'eh Centre, are important and they need some changes and they need some help.

The Forum on Addictions panel was a waste of time if it just gets shut down. Why did we even bother? People know how I feel about this particular issue. We need to do something.

We heard recently: If you had a broken arm, what would happen? We'd send you to the hospital, because you deserve treatment, you need treatment. If you have a mental health and addictions problem, where do we send you? My answer drove silence, and that's the problem.

What has the public learned from this? Their government continues to ignore their issues, people feel lost and helpless, and the fact is homes and good families are being destroyed. I've talked and characterized addictions like a cancer, watching people fall apart, families be destroyed. If this government was writing its story, I would call it a

narrative. I would certainly describe it more of a tragedy than any hope or inspiration.

Do not give up on our people. Do not give up on the fight for addictions. We need to be relentless every day. We will be back every day, if necessary, because this problem matters and we need action. Thank you.

**MR. SPEAKER:** Thank you, Mr. Hawkins. Member for Hay River North, Mr. Bouchard.

MEMBER'S STATEMENT ON  
CLOSURE OF NATS'EJEE K'EH  
TREATMENT CENTRE

**MR. BOUCHARD:** Thank you, Mr. Speaker. I applaud all the Members here talking about drugs and alcohol, addictions and facilities. This summer we definitely were frustrated with the process that was in place from the closure of the only drug and alcohol facility in the Northwest Territories. This affected three MLAs, the Member for Deh Cho and the two main Members from Hay River.

There were six positions at K'atlodeeche and eight from Hay River. Those people were in the community. Those were people that were given very short notice that their jobs were done. There are 14 families that have been affected by this closure, and that's not answering any of the addictions issues that we have in the Northwest Territories, as my colleagues just mentioned.

I have no problem and I don't disagree that in some instances on-the-land programs work. Youth definitely need support. The difficulty is how this information was given to us. We sit here as MLAs on a steady basis going to meeting after meeting, discussing issues a year in advance of what we're going to do, and we get notice a week before the actual closure of the facility was going to happen.

The three MLAs that were affected have been asked on a daily basis for the last three or four months since the closure, where were you guys in supporting this. Did you guys support this? Why didn't you guys say something to the community? Because we got sideswiped. The department, the Minister sideswiped us. You know, shame on the government for doing this to us. My colleagues here in Social Programs have spent hours discussing this and they were told last minute as well.

I understand that the closure is complete, but this government has to come up with a solution. What is going to happen to that facility? Is that facility going to be mothballed and another facility that's closed throughout the Territories is never used when we're sending people from the Northwest Territories to the South again? Don't we have a solution that we can do in house, in the Northwest Territories? We promote this as business, we promote this on a steady basis that we want to do things in the North. Why didn't the department, when they decided to

close this facility, have a solution for the use of that facility?

The problem is larger than that. What is happening with other addictions like cocaine, solvents and prescription drugs? The department has no solutions, yet they're willing to close the facility as a kneejerk reaction.

It's a shame for the government to do this and I do not appreciate it. Thank you.

**MR. SPEAKER:** Thank you, Mr. Bouchard. Member for Mackenzie Delta, Mr. Blake.

MEMBER'S STATEMENT ON  
SUPPORTING COMMUNITY MENTAL HEALTH  
AND ADDICTIONS PROGRAMS

**MR. BLAKE:** Thank you, Mr. Speaker. This Assembly needs to prioritize the importance of our community members who wish to take programs to help themselves and their families to live a healthier lifestyle. The recent shutdown of the Nats'ejee K'eh Centre in Hay River has caused great concern for Northerners. As a result, clients are now looking at similar programs in the South.

Clients who wish to lead sober lives and who wish to go for treatment and counselling services should be given the highest priority. Rather, they are told to stay sober for one month and then we'll send you to treatment. In most cases, some clients need help as soon as possible and have a hard time leading that one-month sobriety.

My concern is that we lose too many of our people to alcohol and drugs, and if we can help them when they need that extra support, we should be looking at alternative methods and getting them the help that they wish to receive.

I'd like to go back in history. In the late '70s there was an alcohol centre established in Fort McPherson. The founding members took it upon themselves to go through an alcohol and drug treatment program in Alberta and went on to get further training so that they, in turn, could help members of their community. The success rate of the community programs that were offered in the 1980s is extremely high. We have many of our community members in each of our ridings that have 20, 30 and 40 years of sobriety. Similar programs are being practised in some of our communities through various funding organizations, but we all know funds are limited and come with criteria. We need to sit down and analyse what's working and what's not working.

**MR. SPEAKER:** Thank you, Mr. Blake. Item 4, returns to oral questions. Item 5, recognition of visitors in the gallery. Mr. Menicoche.

### Recognition of Visitors in the Gallery

**MR. MENICOCHÉ:** Thank you very much, Mr. Speaker. It gives me great pleasure to recognize in this House again, my partner, Lucyanne, step-daughter Brittany Jewel, and a big special welcome to my daughter, Deidra Villeneuve.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Mr. Blake.

**MR. BLAKE:** Thank you, Mr. Speaker. I, too, would like to recognize Lucyanne and Brittany Kendo, originally from Tsiigehtchic.

**MR. SPEAKER:** Thank you, Mr. Blake. I would like to welcome everybody here today. Thank you for taking the time and taking in our proceedings here today in the House.

Item 6, acknowledgements. Mr. Yakeleya.

### Acknowledgements

#### ACKNOWLEDGEMENT 11-17(4): 50<sup>TH</sup> WEDDING ANNIVERSARIES IN THE SAHTU

**MR. YAKELEYA:** Thank you, Mr. Speaker. Today I would like to recognize two distinguished couples, Andrew John and Marie Therese Kenny and John and Camilla Tutcho, who celebrated their 50<sup>th</sup> wedding anniversaries on September 23<sup>rd</sup> in Deline.

These two couples are well respected throughout the Sahtu communities and the North for their traditional knowledge and traditional contributions to our youth.

On behalf of the Sahtu, I'd like to congratulate them and wish them a continuous lifetime of happiness. Mahsi cho to their children and grandchildren.

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Item 7, oral questions. The Member for Nahendeh, Mr. Menicoche.

### Oral Questions

#### QUESTION 398-17(4): FULL-TIME MENTAL HEALTH WORKER FOR FORT LIARD

**MR. MENICOCHÉ:** Thank you very much, Mr. Speaker. Earlier I spoke about not having a full-time mental health worker in the community of Fort Liard. I would like to ask the Minister of Health and Social Services when will there be a full-time mental health worker in the community of Fort Liard.

**MR. SPEAKER:** Thank you, Mr. Menicoche. The Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. There are many vacancies in the Health and Social Services department and health and social services authorities. Specific to the full-time mental health worker in Liard, I don't have the information on exactly when that individual position would be filled, but we do know that it's one of the positions we are having difficulties filling. We do have a system that we are trying to employ. The Member referred to Health and Social Services taking over the human resources section to fill the vacant positions. That's exactly what we're doing. We're expecting that we would have a good plan in place in March of this coming year that will give us a better handle on how and when to fill all the vacancies that we have across the North.

**MR. MENICOCHÉ:** I know that with Human Resources we went through great strides of improving our recruitment, including a Regional Recruitment Strategy as well. I would just like to know, just in terms of that, has the Department of Health and Social Services undertaken a parallel type of move, because the real question is the sooner we get mental health workers and social service workers into the community of Fort Liard, the sooner we can establish consistent health and mental wellness approach in that community.

**HON. TOM BEAULIEU:** Yes, the Department of Health and Social Services works in partnership with Human Resources and Aurora College to develop some supports that would put a number of initiatives in place that will allow us to recruit and retain positions at all levels throughout our system. Thank you.

**MR. MENICOCHÉ:** Mr. Speaker, has the department, as well, addressed the concern about the high turnover rate in small communities? Are they looking at any type of programming or systems to help these professionals stay in the community longer and thereby provide a better service to the community and residents? Thank you.

**HON. TOM BEAULIEU:** Mr. Speaker, as I indicated in my response, we are going through the recruitment aspect of it. Also as important, if not more important, is the retention aspect of the job. We recognize that we have a high vacancy rate. I think we have a vacancy rate of 26 percent in social workers. I do believe that is the highest number of any particular profession in the health and social services system at this time. Therefore, I have actually met with all of the CEOs at the Joint Senior Management Committee. One of the priorities that I have given to them was to develop a recruitment and retention system for our system for both health and social services. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Menicoche.

**MR. MENICOCHÉ:** Thank you very much, Mr. Speaker. Some of the successes in the Education

department in the smaller communities is hiring couples and/or seasoned teachers that are willing to stay in communities. I would just like to know, will the Minister and will the recruitment department as it were, be looking at those kinds of strategies to keep people in the communities for longer and longer stays? Thank you, Mr. Speaker.

**HON. TOM BEAULIEU:** Mr. Speaker, I'm not sure we spent a lot of time on tying in other professions going into the community. One of the main things that we've discovered, certainly, are that when the RCMP moves into a community, they often come with a spouse that is also a professional, whether a social worker or often a nurse, so we utilize that employee as well at that time. The problem with that is that the RCMP stay two years, or three years if they ask to stay the additional year. Often the partners of the other professionals that are coming into community also end up being short term. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Member for Hay River South, Mrs. Groenewegen.

QUESTION 399-17(4):  
CREATIVE SOLUTIONS TO ADDRESS MENTAL  
HEALTH AND ADDICTIONS CONCERNS

**MRS. GROENEWEGEN:** Thank you, Mr. Speaker. My questions are for the Minister of Health and Social Services. I think it's safe to say that the Minister doesn't have a magic wand. This is not a problem with an easy solution and that's why we highlight it and bring it up here again today. I believe that when we are identifying a problem, if we have any ideas about what some solutions might be, it might also be good to bring those up as well.

We have tried a lot of things. Let's not say that our government has done nothing to address addictions because we certainly have tried a lot of things. Unfortunately, they have not addressed the problem to the degree that it certainly needs to be addressed.

As a result of the Minister's Forum on Addictions that went around and did consultation, some health care officials came to Hay River, met with our local Metis government and I was fortunate enough to be invited to that meeting. In that meeting there was discussion of a new model that I have not known of ever being tried in the Northwest Territories before. That is sending professionals, not taking the people out of their communities, but sending professionals or a group of specialists into the community to work with the community to have people receive counselling and treatment in their own community, in their own space.

I would like to ask the Minister what is the status of that idea that was shared with us that night. Thank you.

**MR. SPEAKER:** Thank you, Mrs. Groenewegen. Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. A mobile treatment was one of the recommendations of the Minister's Forum. We think that mobile treatment is certainly a possibility. Mobile treatment has been tried in other jurisdictions. I believe that mobile treatment has also been tried in the Northwest Territories in the past. So far what we've done is we've recognized that mobile treatment is something that is possible. We are developing a program around what mobile treatment could look like. We've talked to Poundmaker's Lodge, which is a healing lodge in Edmonton, and found out if they have had individuals involved in mobile treatment, to see if they could assist us in developing something for the NWT. Thank you.

**MRS. GROENEWEGEN:** I think it's a good idea. I think if we could harness the efforts of the local people that are involved with people who are dealing with addictions, such as the RCMP, the local nurse, interagency groups in communities like Hay River, if we could involve those people in finding solutions and addressing the problem, not on a one-time basis where a team comes in, but where there could be continuing follow-up and continuing interaction with the community, so that they could monitor and people would have a place to reach out to if people needed counselling or needed an anchor or a sponsor or somebody to talk to about the situation as they progressed down that journey.

I'd like a little bit more detail when the Minister says mobile treatment and we're all supposed to understand what that means. Could he add a little bit more detail to that as to what that might look like and if that might be something similar to what I've described? Thank you.

**HON. TOM BEAULIEU:** All indications that we've had for mobile treatment are actually what the Member is describing; they are professionals in a certain facility that design their program, their healing program, around going out to the communities rather than bringing people into a centre for residential treatment. They meet them in their own environment. One of the treatment options that we are looking at is where a team of three counsellors are going into a community and work with the community. That was targeted at addressing youth treatment. We found that to be a way where we can treat youth without sending youth out to facilities down South that specialize in treatment. Thank you.

**MRS. GROENEWEGEN:** I think the issue is of trust and building relationships. So if you did have these professionals that were providing this mobile treatment, I would like the Minister to confirm if

there could be continuity, if there could be a long-range relationship developed with the community or the people who could be the helpers also in the community going forward, not just a one-time deal where some people you don't know come into town, everybody is all excited, everybody jumps on board and says let's do this. I want something that's sustained, that is supported and that will see some results. Thank you.

**HON. TOM BEAULIEU:** Part of any treatment program, whether it be residential treatment, on-the-land treatment, mobile treatment, in order to have any treatment programs have success, we have to have an after-care program. That is one of the other recommendations that were made in the Minister's Forum and also we recognized that just by talking to the community counsellors. An after-care program is very important and how we develop an after-care program, depending on the size of the community, will determine its success. Thank you.

**MRS. GROENEWEGEN:** So we've had this idea shared with us by the senior officials in the Minister's department. The Minister has shared this mobile treatment idea with us here in the House today. It's not a cheap solution. It's going to take money. It's going to take a lot of money to see this laid out and rolled out in an effective way.

Does the department have the financial resources to back up this idea of mobile treatment and how soon could we see it started? Thank you.

**HON. TOM BEAULIEU:** The department has been working on wellness plans. Right now, we are funding the communities to develop wellness plans to do some of this work. We're also going to use some of the money that we were using in Nats'ejee K'eh to do some of this type of issue. I'm not sure we are going to have all the money to do all of the programs, but the idea, I guess the general idea would be that once the mobile treatment team has gone into a community, then the after-care program will come into play. We're assuming further on down the road there could be a follow-up mobile treatment. That could be coupled with on the land, it could be coupled with treatment of youth. So the idea is it will continue to flow, so once mobile treatment is started in the community it will continue.

We know that the addictions are very high, especially in Aboriginal communities; therefore, we are trying to address that issue by sending mobile treatment people in. That's once we've had an opportunity to evaluate a pilot of such so that we make sure we are doing the right thing. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. The honourable Member for Weledeh, Mr. Bromley.

QUESTION 400-17(4):  
RESIDENTIAL TREATMENT CENTRE  
FOR ADDICTIONS

**MR. BROMLEY:** Thank you, Mr. Speaker. I'd like to follow up on my Member's statement from earlier today. Of course, we're focusing on treatment for alcohol and drug addictions, so my questions will be for the Minister of Health and Social Services. We've heard the Minister explain in the past that there are many options for treatment in the South. Could the Minister explain how the department selects these addictions treatment centres? In other words, how does the department decide which are eligible and which are not?

**MR. SPEAKER:** Thank you, Mr. Bromley. The honourable Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Treating people in southern institutions is not a new thing. Treating people in southern institutions is not something that happened because Nats'ejee K'eh shut down. This is something that was ongoing. Individuals have come to us and have gone for treatment while Nats'ejee K'eh was still operating, have gone for treatment in the South. How the department selected this is after working with the various treatment centres down south, they looked at the places they felt would best suit our needs for the people of the Northwest Territories and had signed contracts at four treatment facilities down south.

**MR. BROMLEY:** Thanks for that response and I'm certainly aware that we've done this for a long time and this is not something that we just started. I imagine that these different treatment centres use different approaches to treatment and that may be appropriate for people with different backgrounds.

Could the Minister provide an overview of the main schools of thought in terms of how to treat addictions? Thank you.

**HON. TOM BEAULIEU:** I guess, in general, there could be a treatment centre down south that we are in a contractual relationship with that may be able to address more complex types of treatment. It could be dealing with harder drugs. There could be a treatment centre down south that could treat alcohol. There could be a treatment facility that would deal with a lot of the traditional and cultural type of treatment. And there's a treatment facility down south that may be able to address women's treatment. Thank you.

**MR. BROMLEY:** If we're going to make progress on this, we need to be able to define what we think success looks like and find a way to measure it.

Could the Minister explain how the department currently defines and measures success in terms of addictions treatment? Mahsi.

**HON. TOM BEAULIEU:** That's a very difficult question. Success is largely measured by the individual themselves who is attending treatment. Sometimes the counsellors and individuals determine success by the individual attending treatment. Sometimes they determine success by the individual finishing treatment and sometimes they determine success by the length of time the individual stays clean and sober after treatment. There's no specific time. Some people say they have reached success if they have been sober six months, some is a year and some don't ever believe they will ever reach success because they will never feel they are completely away from addictions and addictions is a daily battle. So success is very difficult to measure. If we were to develop a program to follow an individual once treatment was completed, then we would also have to get some approvals from individuals that had gone through treatment. Once an individual has finished treatment, they don't want to be in touch with that facility. Some do, but not everyone. But a lot of them say no, once I'm done here, I'm done. Thank you.

**MR. SPEAKER:** Thank you, Mr. Bromley. Final, short supplementary, Mr. Bromley.

**MR. BROMLEY:** Thanks to the Minister for that. I believe the Minister provided a range of possible measures. I was hoping to hear how he defines success, what we mean by success. So I'd appreciate any comments the Minister might have on that.

Could the Minister commit to provide this House with an evaluation of the success of each of the current addictions treatment centres that we refer people to? At a minimum, statistics on short-term and long-term relapse rates would be useful, but I imagine the department has other measures of success it could report on. Mahsi.

**HON. TOM BEAULIEU:** Thank you. I view success as a change in life, a complete change in lifestyle of individuals from using or consuming to not using or consuming, but also change other parts of their life as well. We can do that. We can go and try to determine what we consider to be success for the facilities that we've engaged in and will be in a contractual arrangement until March 31, 2014.

We can also go back to the records and maybe look at some success rates at Nats'ejee K'eh to see what type of rates they felt were success rates. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Member for Mackenzie Delta, Mr. Blake.

QUESTION 401-17(4):  
GWICH'IN WELLNESS CENTRE

**MR. BLAKE:** Thank you, Mr. Speaker. Just a follow-up from my statement. The Minister of Health

and Social Services mentioned that there will be a lot of on-the-land programming. Has the Minister been working with the Gwich'in to offer programs at the Gwich'in Wellness Centre? Thank you.

**MR. SPEAKER:** Thank you, Mr. Blake. The Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. Yes, we have. We've met with them. We had some discussions. The deputy minister went up to Inuvik one time when I was not able to go and also had some further discussions with them. I met with the vice-president of the Gwich'in Tribal Council here in Yellowknife about two weeks ago, I would say, and we talked specifically about the use of that facility. He recognizes, and the Gwich'in recognize, that it would just not be able to be completely a centre used for only treatment, but that that centre could be used for other things. It could be seasonal. So we've had that discussion and we're willing to work with the Gwich'in to use that facility for something.

**MR. BLAKE:** Thank you. I believe this facility is ideal, as there are no distractions. I'd like to ask the Minister, can we expect to see programs offered this winter. Thank you.

**HON. TOM BEAULIEU:** Thank you. That is my hope, but I don't have the information here with me on the treatment options that we're moving forward with at this time. But I do believe that we're definitely looking at something with the Inuvialuit further north and we've had these discussions with the Gwich'in. So I'm hoping that something can come out of this this winter and I can certainly update the Member on that, if that is the case. Thank you.

**MR. BLAKE:** Thank you. I realize it takes time to develop the proper policies to operate this facility. I'd like to ask the Minister again, will we see programs offered at the Gwich'in Wellness Camp within the next year. Thank you.

**HON. TOM BEAULIEU:** Thank you. If the Gwich'in are able to line up some other uses for the facility. I recognize that they have talked about the other departments that may be able to use that facility and then it becomes feasible for them to operate. At that point, they said that that building could be available for a treatment program or two. So if they're able to run some other programs and I can't remember specifically, but he mentioned that they had worked with ENR, they've worked with Justice to make that a possibility. If that place is operational and we have a program developed, we certainly want to put a program in there, certainly before the next year is up. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Blake.

**MR. BLAKE:** Thank you, Mr. Speaker. Just from what the Minister has said, it sounds like funding is

an issue here. If this is a focus of the department, will the Minister agree to help the Gwich'in to take care of the maintenance of the building? Thank you.

**HON. TOM BEAULIEU:** Thank you. I think what we would rather do, I suppose, is to get into a contract on the number of people who would be taking the treatment and then pay the rate for that treatment as opposed to agreeing to pay for the operating costs of the facility. So I think that is probably the way we would go, certain costs for a certain number of people that are in treatment. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Member for Sahtu, Mr. Yakeleya.

QUESTION 402-17(4):  
COMMUNITY-BASED ON-THE-LAND  
ADDICTIONS TREATMENT

**MR. YAKELEYA:** Thank you, Mr. Speaker. I talked in my Member's statement about some of the support that's needed in someone's life when they want to put away alcohol or any type of addiction. Coming from a small community, in communities the people are listening to me now, today, at this very minute. They have enough motivation and courage to say I want to do something with alcohol, put it away or do something with addictions, drugs or whatever type of addictions they have.

Are there any types of programs right now, from listening to the Minister's Forum, where they can take their family who say we want to go up to their cabin and stay there for a bit to deal with those issues?

**MR. SPEAKER:** Thank you, Mr. Yakeleya. Minister of Health, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. From October 23<sup>d</sup> to 25<sup>th</sup> last week, we had gathered 50 people, 60 people in Fort Simpson to look at the development of an on-the-land youth treatment program. We need to be able to get that information and we've hired an individual specifically to develop that program. We need to look at what the youth had to say, how they see the program developing.

Now, I have to say that when we were travelling in the Sahtu, the people over there certainly want to see not only the youth go out on the land but the elders and the youth together to go out on the land for treatment. I've seen that in my own riding as well. So we kind of have a general idea of what on-the-land treatment with youth and on-the-land treatment is going to look like. So, certainly, we could end up with that type of treatment.

**MR. YAKELEYA:** Thank you. It's said that we need to think like our ancestors had been thinking. They knew the culture and the customs, Mr. Speaker. The culture taught them how to live in harmony with each other, so the people are saying we need to

think like this again and that we must rely on a power greater than ourselves and that they don't need alcohol in their lives.

So I say this: When will the Minister present a concrete on-the-land program for people in the small communities so they can take advantage of this service and this program?

**HON. TOM BEAULIEU:** Thank you. I think we have to really look at the philosophy of on-the-land treatment. We're asking Aboriginal governments to provide us with proposals on what they see as something that will work for on-the-land treatment for the people, whether they be elders, the youth or families. This is not going to be a program where the government is going to come in with a program and then determine how the program will be set up. On-the-land treatment is something that would be community driven. We've received proposals from counsellors in the Sahtu even, and they're very good, but what we're trying to do is get the Aboriginal government to present that, whether it be the same thing or not. That's how we wish to address those issues.

**MR. YAKELEYA:** Certainly, the Sahtu people have been asking for on-the-land treatment programs ever since I became the MLA 10 years ago. With the closure of the Nats'ejee K'eh program, now the focus is coming back to the on-the-land treatment programs. I would ask the Minister to look at the programs. It may not fit within the prescribed policy or requirement, and this is coming from an Aboriginal community, government, that this is how they see it.

I would ask the Minister if he would dust off the proposals from the Sahtu to say yes, this could work for Colville Lake, Tulita or Deline. This can work in Fort Good Hope or Norman Wells. Would the Minister be willing to do that, to say yes, we can work on something like this? It's been done already.

**HON. TOM BEAULIEU:** I can say that on-the-land treatment program is going to be very specific. It's going to be very specific to that community. I doubt if one program is going to even fit into two communities. Just about every individual community would have their own on-the-land program. There is going to be slight differences in every one of them. That's why we're really relying on Aboriginal people in the communities that said to us when we travelled and when the forum travelled, we want on-the-land treatment, so we're asking them to come to us, bring us a proposal on what it is that they see on the land, and we will go out and try to find the funding to do that.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Speaker. It seems that we have a disconnect. The Minister is asking the Aboriginal governments, the



communities, to give us the proposal for on the land. The communities are saying this is what we believe is an on-the-land program and it seems that we're not connecting as we need to sit down together and talk about this. We do have the proposals, I've seen them myself and I actually passed them on to the Minister.

Would the Minister then say, okay, Fort Good Hope, Tulita, Deline, Colville Lake even, we think we have a program. Let's work on it together. I'm asking when can the Minister then say the Sahtu or any other regions, you can start having your on-the-land programs in your region.

**HON. TOM BEAULIEU:** When we discontinued funding to Nats'ejee K'eh, we had indicated to the individual governments, Aboriginal governments that approached us and asked us what we were going to do, we said at this point we had discontinued the funding and now we are working on developing something that's going to work community by community, and we have promised them that sometime after the end of this fiscal year we would have things in place that would allow individual communities to access funding to run on-the-land programs.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. The honourable Member for Range Lake, Mr. Dolynny.

QUESTION 403-17(4):  
HOME CARE HEALTH SERVICES

**MR. DOLYNNY:** Thank you, Mr. Speaker. I'm going to give the Minister a bit of a break on addictions. Earlier this month our Minister of Health and Social Services held a joint meeting with our federal Minister of State for Seniors, the Honourable Alice Wong, here in Yellowknife. The theme that came out of this meeting is how we can help our seniors and the challenges they face. I, like many, were interested in what exactly this territory will embark on to support our growing influx of seniors. My question today will be for the Minister of Health and Social Services.

Canada, in general, is way behind on home care help, as we have been informed by national patient advocates. Other provinces have taken steps to recognize this underfunded part of our health care system.

Can the Minister shed some light on what are his department's plans to address our home care shortfall?

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. We will be coming forward with enhanced home care in the next budget session. We have been working on developing enhanced home care. We're working with the federal government. The federal government is providing us some funding directly for home care as well. It's part of the overall continuum of care for seniors in the Northwest Territories. We do have a strategy to develop care

for seniors and the idea is to maintain people in their own homes as long as possible.

**MR. DOLYNNY:** I'm encouraged and looking forward to the strategy and the budget here coming up for seniors. For the record, I just want to let you know, my personal experience with home care workers has been excellent, professional and totally respectful.

Seniors' safety is a paramount factor for life longevity. What is the Minister planning to do to address the growing safety needs of our seniors?

**HON. TOM BEAULIEU:** Senior safety, for me, is something that is sort of like an emerging issue. That may sound like an unusual response, but when you watch things at a national level, you're starting to see the very beginnings of what the various provinces are doing to develop a system that tries to keep the seniors safe. Simple things like putting in peepholes, grab bars, alarms and those types of things is what the jurisdictions are working on. We, as the Department of Health and Social Services, in my responsibility for seniors, are looking at those types of things with our other national partners.

**MR. DOLYNNY:** Again, I appreciate the Minister's response on that. Seniors often deal with a rotating cast of nurses and personal care workers each with their own different style of delivering care. In fact, patients can encounter what is called a kaleidoscope of different messages that increase the risk of communication breakdown.

Can the Minister indicate what is his department doing to improve and address this kaleidoscope of different messages our seniors receive?

**HON. TOM BEAULIEU:** As the health professionals develop the electronic medical records, when the health professional comes into the home, whether it be a home care nurse or if that senior has gone to the health centre to visit with a doctor or a registered nurse, that electronic medical record is designed to be the basis of the continuum of care. So that individuals who have been given some advice on what to do, or changing medicines or any sort of issues that was in the past where there were some confusing messages coming in from the different types of individuals or nurses that they were dealing with time to time, you would see that this is there to try to address that issue.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Dolynny.

**MR. DOLYNNY:** Thank you, Mr. Speaker. Again, thank you to the Minister. Finally, the Minister is quoted in the Yellowknifer on October 14, 2013, which I'll table later today, that is directly related to the topic that we're talking about here today. I'm going to quote here: "If we're able to hold 10 seniors back for 10 years, that's \$1 million a year." Can the Minister explain this quote to the House?

**HON. TOM BEAULIEU:** On average, long-term care is about \$100,000 per year per senior, so that was why. I just did the math, so 10 seniors would be \$1 million for one year.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Member for Hay River North, Mr. Bouchard.

QUESTION 404-17(4):  
CLOSURE OF NATS'EJEE K'EH  
TREATMENT CENTRE

**MR. BOUCHARD:** Thank you, Mr. Speaker. In follow-up to my Member's statement, my concerns on the closing of the facility on the K'atlodeeche, I'm just wondering if the Minister of Health has a set plan for that facility in the near future.

**MR. SPEAKER:** Thank you, Mr. Bouchard. Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. The building will be secured by Public Works. There may be a couple of individuals that are continuing to work around the building. However, the plan, as I relayed to Chief Fabian, was to get together with the council and also ask if he had any issue with engaging the Stanton Elders Council to work with us on future use of that building. I don't know what the future use of that building would be at this time, but we are consulting with some people to develop some ideas on what we can do with that building. Thank you.

**MR. BOUCHARD:** Mr. Speaker, I'm just looking for clarity. Is the Department of Health going to maintain the cost of this facility or is it being switched over to the Department of Public Works and Services in their control so it becomes a territorial facility open to any opportunities within the territorial government or is it remaining in the control of the Department of Health?

**HON. TOM BEAULIEU:** Mr. Speaker, until the Department of Health officially gives up the asset, it would remain with us. The thought is that we do that. Public Works has always maintained the building, so that's continuing. This is a government asset sitting on reserve land, but we will continue to use the building. Public Works will continue to maintain the building. At some point down the road, if Health has no use for that building, it will be put back in the government inventory for other uses. Thank you.

**MR. BOUCHARD:** Obviously, being the optimist, I'm looking at this as an opportunity for the Department of Health. I am wondering if the Minister is looking at any opportunities to decentralize positions and replace some of the 14 positions that have been lost in the region.

**HON. TOM BEAULIEU:** Mr. Speaker, that thought hasn't been contemplated at this time. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Bouchard.

**MR. BOUCHARD:** Thank you, Mr. Speaker. I guess my final question would be, if the Department of Health doesn't have a current use for it, would they be willing to turn it over immediately if an opportunity were to present itself from one of the other departments.

**HON. TOM BEAULIEU:** Mr. Speaker, I'm sorry; I didn't hear the Member's question.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Mr. Bouchard, could you restate your question to the Minister?

**MR. BOUCHARD:** Thank you, Mr. Speaker. My question was if the Department of Health is willing to hand over the facility if an opportunity presented itself for some other department.

**HON. TOM BEAULIEU:** Mr. Speaker, if there was a better use for the building within government overall, I think, as a government we will make that decision to use that facility for something else like training or something that would be used outside of Health's mandate. As I indicated, we need to have that discussion with the people from the reserve – it's built on the reserve – and then take their advice on what we should be doing with that building. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Member for Inuvik Boot Lake, Mr. Moses.

QUESTION 405-17(4):  
POLICE SERVICES TO ADDRESS  
ALCOHOL AND DRUG PROBLEMS

**MR. MOSES:** Thank you, Mr. Speaker. I have questions today for the Minister of Justice and looking at how we can work on preventing and controlling substances that go into the communities, but also what can the RCMP staff do when they are in a community to assist the community and some prevention and training programs.

My first question for the Minister of Justice is what has been done so far. I know there have been a lot of good alcohol and drug busts of bootleggers in the Sahtu region, for example, and up in one of the communities of Beaufort-Delta, but what has been happening within the RCMP "G" Division in terms of working the point of entry for alcohol and drugs going into the small communities? Obviously, we have high incidences in the small communities of alcohol and drug use. It's getting in there somehow. What is the Department of Justice and the RCMP doing to control that? Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Moses. Minister of Justice, Mr. Abernethy.

**HON. GLEN ABERNETHY:** Thank you, Mr. Speaker. In the individual communities, we have community policing plans where the community

leadership and the RCMP get together and set their priorities. That helps them focus their particular area in areas the community wants. But it does take cooperation with community members to stop alcohol from coming into the community. We do have the Crime Stoppers number where individuals can phone in and not give their name but identify if they believe there is alcohol coming into the communities. That has been a valuable tool and the RCMP continue to promote that, that 1-800 number, so that individuals can call.

It doesn't always necessarily result in bootlegging charges, because if you are apprehended with booze, it wouldn't actually fall under bootlegging. You actually have to be arrested during the act of bootlegging to be charged with bootlegging, but we are getting people with possession. I have shared with Members a significant number of photos that have come in over the last year, where the RCMP has been able to get out there with tips from communities and stop the alcohol from coming in. A lot still needs to be done. Thank you, Mr. Speaker.

**MR. MOSES:** Mr. Speaker, I do agree a lot more needs to be done in this area. With the RCMP staff and with the community program planning, community plans, is the RCMP trained on the Mental Health Act and the provisions in the Mental Health Act when dealing with clients that might be under the influence? Are they trained fully and understand the provisions where they can have somebody possibly admitted under the Mental Health Act that might be dangerous to themselves or to others? Thank you, Mr. Speaker.

**HON. GLEN ABERNETHY:** I know that Members are aware of the Mental Health Act. As far as their specific training, I can't say, but I will confirm to get that information for the Member. Thank you.

**MR. MOSES:** Continuing with working with the RCMP in terms of going into the schools and into the communities, I know the RCMP has a successful DARE program. Are there any other types of campaigns or teachings or education that the RCMP can do, not only in the school setting – I believe that's only for Grade 5 students – but outside of just the Grade 5 classroom, is there something that the RCMP can do in the community in terms of education or some promotion and prevention in terms of bootlegging and drug and alcohol use? Thank you, Mr. Speaker.

**HON. GLEN ABERNETHY:** Mr. Speaker, as I indicated earlier, every community has their own individual community policing plan and some communities have put more attention on that exact topic than others. Regardless, it is something that's important. I know that RCMP officers from across the Territories have been working with youth on many different levels. We have the DARE program, as the Member mentioned. I also know that in many communities, the communities themselves, the

youth themselves have engaged with the RCMP on the Not Us! campaign and other campaigns, which is about education, awareness and working with the youth to help them begin that abstinence from alcohol and drugs. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Abernethy. Final, short supplementary, Mr. Moses.

**MR. MOSES:** Thank you, Mr. Speaker. I'm glad the Minister brought up the Not Us! campaign because that was my final question. I know there is a lot of funding out there for communities to access the Not Us! campaign. Some use it very wisely and very effectively; others use it in other areas that might not be as effective in getting to the problem of dealing with the drug dealers or the bootleggers.

Would the Minister commit to possibly looking at a stronger campaign that focuses on the bootleggers that access our small communities? Thank you, Mr. Speaker.

**HON. GLEN ABERNETHY:** Mr. Speaker, I understand the Member's point. Just for the record, the program is a program by the community for the community, designed for the youth to meet the needs that they've identified. I think it is really important to empower the youth to design their own program, but we are certainly willing to provide them with examples from other communities where it is actually hitting the exact topic that the Member is talking about. We would like to leave it up to the communities and to the youth in those communities to set their own priorities as to how they want to use these dollars to promote avoiding alcohol and drugs and how they want to address it. We are happy to share the information, but we would like to leave it up to the community youth. Thank you, Mr. Speaker.

**MR. SPEAKER:** Thank you, Mr. Abernethy. The honourable Member for Deh Cho, Mr. Nadli.

QUESTION 406-17(4):  
ON-THE-LAND ADDICTIONS  
TREATMENT PROGRAMS

**MR. NADLI:** Thank you, Mr. Speaker. This government is a big government. It's got lots of people and lots of money. It's a big system that operates on a daily basis. Of course, its mission is to deliver programs and services to people. At this point, people are asking for help in trying to take that first step in admitting they do have a problem and they want to sober up. My question is to the Minister of Health and Social Services. What immediate steps is the department taking to support established on-the-land programs? Mahsi.

**MR. SPEAKER:** Thank you, Mr. Nadli. The honourable Minister of Health and Social Services, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. The department has approved three proposals for

on the land. We are going to treat them as pilots so we can do an evaluation of those. That will give us good groundwork needed to work with communities to develop further on-the-land treatment programs. Thank you.

**MR. NADLI:** It seems the Minister has stated this is in its infancy stage of trying to flush out a framework in terms of how this will work. How will the Department of Health and Social Services see itself involved in on-the-land programs? Mahsi.

**HON. TOM BEAULIEU:** We spend slightly over \$6 million in community counselling. A lot of the community counsellors are from the communities that they work in, so they may be involved. The other thing is certainly our involvement would be that we are a funder for the on-the-land treatment program. Where we can assist in other areas, the department is prepared to do that.

**MR. NADLI:** From a cost standpoint, can the Minister expect to see 33 different on-the-land programs or will the Minister provide leadership and develop a policy framework to ensure the efficiency of the delivery of the on-the-land programs? Mahsi.

**HON. TOM BEAULIEU:** One of our initiatives, through the Aboriginal health and community wellness division, is to develop wellness plans in all of the communities. Within those wellness plans, we are going to determine whether or not an on-the-land treatment program is what that community wants. Once that has been determined, our intention is to try to fund all of the treatment programs that are being proposed over the next couple of years. Money permitting, our intention is to try to fund them. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Nadli.

**MR. NADLI:** Thank you, Mr. Speaker. In terms of cost, what allocation of resources would the department identify as a possible source? Would it consider, with other departments, the possible consideration of revenues from liquor sales? Mahsi.

**HON. TOM BEAULIEU:** We would be coming forward through the regulatory process, the business planning process and presenting our full-blown costs for on-the-land treatment to the House. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. The honourable Member for Frame Lake, Ms. Bisaro.

QUESTION 407-17(4):

REPORT OF THE MINISTER'S FORUM ON  
MENTAL HEALTH AND ADDICTIONS

**MS. BISARO:** Thank you, Mr. Speaker. My questions today are addressed to the Minister of Health and Social Services. I want to follow up on my Member's statement.

I spoke about the Mental Health and Addictions Action Plan 2012-2015, which was brought forward

about a year and a half ago, and then I also spoke about the Minister's Forum report. I'd like to know from the Minister with regards to the Minister's Forum report and all the recommendations that are within it, can I get an update on what the department is doing in terms of those recommendations, what kinds of actions are they taking, are they updating the original Mental Health Action Plan or doing something different. Thank you.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. We are not planning on updating the Mental Health and Addictions Action Plan. The Mental Health and Addictions Action Plan is something that is taking us from now to the end of this government. There is no time to update it. Within that action plan, we called for a Minister's forum and visit with the people to get information from the people on what they think will work in this area. That's what we've done. Thank you.

**MS. BISARO:** To the Minister, thanks to the response, but he didn't really address my question with regards to the recommendations that are in the Minister's Forum report. There are 67 recommendations in there. What is the Minister doing to put those recommendations into some kind of an action or to take some action on those recommendations? Thank you.

**HON. TOM BEAULIEU:** The department in general, we have an Aboriginal community wellness division; we have money that's being put into addictions from the House. We've got some additional funding to address some of the issues that we laid out in one of the two, either the action plan or the recommendations from the forum. We're moving ahead in areas that we have been talking about for the last several months since we've got the forum's recommendation. We intend to carry them out. I think we're moving in that direction. It's a difficult thing to answer what are you doing to carry out. We're following the plan. Wherever we find the money, we are trying to action things that were recommended by the Minister's Forum. Thank you.

**MS. BISARO:** To the Minister, I guess I'm feeling very puzzled. I'm sure my face looks puzzled. I don't think that this is a difficult thing to tell us exactly what you are doing. There are 67 recommendations in this report. The Minister says they're following the plan. Well, I want to know how you're following the plan. There is any number of things in there that could be done sooner than other things in there.

Can the Minister give me some indication of two or three things they are trying to do first before they do the other 63 or 64?

**HON. TOM BEAULIEU:** The first set of recommendations, the most prominent set of recommendations were around treatment on the

land. So we are developing a treatment on-the-land program with the communities. We are receiving recommendations from those communities. We are proposing to run some of those recommendations or proposals as pilot programs. We are trying to develop a youth treatment program. Like I said, there's a consultation process in Fort Simpson where we're trying to develop an on-the-land youth program. We're looking to other jurisdictions to see what they're doing with mobile treatment, I think. Those are the top three recommendations, so we're moving on those things. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Ms. Bisaro.

**MS. BISARO:** Thank you, Mr. Speaker. That certainly helps. I thank the Minister for that explanation, but it sounds as though we're starting with recommendation number one and working our way down to number 67. That's a concern for me. Number 67 says, "Establish an advisory board with regional representation to oversee the implementation of the forum's recommendations...provide annual reports," et cetera. So can the Minister tell me if this advisory board is something that is on the radar within the next short time period, or is it going to be one we've done from number one to 66 and then we do 67? Thank you.

**HON. TOM BEAULIEU:** Thank you. No, we're not doing it chronologically. What we're doing is we're trying to address what we consider to be top priorities. The recommendations to debrief the Minister's Forum, we have talked about putting a group of people together. That group of individuals may actually have met, but I'm not 100 percent sure, so I wouldn't say that here in the House. But we've talked with individuals that could work on debriefing the Minister's Forum, so we're approaching this. We're not going to do it chronologically, for sure, I can assure the Member of that, but we are trying to get through all of them. We didn't ask for recommendations so we could shelve them, like has been said before.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Member for Yellowknife Centre, Mr. Hawkins.

QUESTION 408-17(4):  
CRACK COCAINE AND PRESCRIPTION DRUG  
ADDICTION TREATMENTS

**MR. HAWKINS:** Thank you, Mr. Speaker. I look forward to this opportunity to ask questions to the Health Minister regarding crack and prescription drug use and what we are doing about it.

I was talking to my eight-year-old son yesterday, and this is no word of a lie and I dare anyone to counter that. He told me he heard about crack, and I'm telling you that was a shock to my wife and I to hear about it. We asked him what this is and he

says, the kids talk about it at school. It's not about one school, it's the fact it upsets me and actually really ticks me off that my eight-year-old son is starting to understand what these things are.

So my question for the Health and Social Services Minister is: What is he doing to help people who suffer from crack and prescription drug addiction in the Northwest Territories? I want to hear what he's doing about those types of problems. It really upsets me not only as a legislator, but as a parent. Thank you.

**MR. SPEAKER:** Thank you, Mr. Hawkins. The Minister of Health, Mr. Beaulieu.

**HON. TOM BEAULIEU:** Thank you, Mr. Speaker. The Member is correct that these are two very serious issues. Crack and crack cocaine have caused all kinds of problems in all of the communities, small communities. Communities are trying to deal with it; people are trying to deal with it in various ways. There is something that an individual can get to a counsellor that we will send individuals for treatment for crack cocaine addictions.

Prescription drugs are a little bit different issue. Prescription drug addiction is a very hidden addiction, so it's something that's difficult to bring out into the public. People can say, well, that person sells crack, that person is on crack and that person is on crack, but it's very difficult when it comes to prescription drugs to easily identify that. In those cases, it's a lot of personal responsibility that individuals have to take and all we can do is get the messaging out there that we're available to help. Thank you.

**MR. HAWKINS:** Thank you. Personal responsibility and sending people out for treatment, let's follow that thread to see where we go.

We send people out and we have contracts down south and I'm aware that they're coming up in the new year. Let's start with finding out first what the success rate is of the people we send out of the Northwest Territories on these treatment programs. Thank you.

**HON. TOM BEAULIEU:** Again, success rate is something that's very difficult to identify. I don't have the information on the number of people who went out for crack cocaine addiction, came back and stayed clean. So I'm assuming that would be the success, because crack, unlike alcohol, is once you're back into it, you're back into it and you are no longer successful. So first we determine what success is and then we start looking at the different numbers. Thank you.

**MR. HAWKINS:** The citizens of Yellowknife feel very strongly about this, and I'm not trying to raise the ire of the Members here or certainly the public, but quite often you hear, when we call for a treatment centre here in Yellowknife, they say, well

geez, the Legislative Assembly has an anti-Yellowknife attitude. Well, some days it really feels like that, but when they closed the Nats'ejee K'eh Centre, you think that they have an anti-treatment attitude. They've hurt Northerners. They spent a quarter of a million as a retainer for these treatment services down south.

What is the Minister willing to invest in the Northwest Territories to open up treatment programs for the people where they need it?

**HON. TOM BEAULIEU:** Thank you. We had allocated \$2.2 million to run Nats'ejee K'eh. So if there's a treatment program in the Northwest Territories that we consider to be a treatment program that is working well for the community, a treatment program that can retain their staff and that's attractive to the people of the North, we would put that money into that. So I guess that's what we're willing to spend. We're willing to spend whatever we were spending prior to the Nats'ejee K'eh closure. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Final, short supplementary, Mr. Hawkins.

**MR. HAWKINS:** This government, this very government had spent upwards of \$10 million in fire suppression in the Northwest Territories this year and successive years and years before that. We spend a measly \$2 million or \$2.2 million on addictions.

Can the Minister of Health and Social Services explain to me how we're meeting the needs when we spend five times the amount on fires than we do putting out the fires of the cancer of addictions and prescription drugs when it's hurting real people? Thank you.

**HON. TOM BEAULIEU:** Actually, we were spending \$2.2 million on the treatment centre, but we have \$6 million on community counselling and we have in and around \$12 million coming from the federal government in the Wellness Fund. So that's money that's going into the wellness of people. So it's actually not one-tenth or 20 percent of what we're spending on fires, it's more than that. Thank you.

**MR. SPEAKER:** Thank you, Mr. Beaulieu. Time for oral questions has expired. Item 8, written questions. Mr. Menicoche.

### Written Questions

#### WRITTEN QUESTION 29-17(4): SPECIAL NEEDS STUDENTS

**MR. MENICOCHÉ:** Thank you, Mr. Speaker. My questions are for the Minister of Education, Culture and Employment.

1. What is the current teacher to pupil ratio in the Deh Cho region?

2. What is the percentage of students classified as special needs in the Deh Cho region?
3. What is the percentage of students classified as special needs in the NWT?
4. What is the percentage of students classified as special needs in all of the Yellowknife school system?

Thank you.

**MR. SPEAKER:** Thank you, Mr. Menicoche. Item 9, returns to written questions. Item 10, replies to opening address. Item 11, petitions. Item 12, reports of standing and special committees. Item 13, reports of committees on the review of bills. Item 14, tabling of documents. Mr. Dolynny.

### Tabling of Documents

#### TABLED DOCUMENT 152-17(4): ARTICLE FROM YELLOWKNIFER TITLED "KEEP SENIORS AT HOME LONGER: MINISTER"

**MR. DOLYNNY:** Thank you, Mr. Speaker. I'd like to table a document in relation to my oral questions today. It's regarding Keep Seniors At Home Longer: Minister, an October 14, 2013, Yellowknifer article. Thank you.

**MR. SPEAKER:** Thank you, Mr. Dolynny. Item 15, notices of motion. Item 16, notices of motion for first reading of bills. Item 17, motions. Item 18, first reading of bills. Mr. Ramsay.

### First Reading of Bills

#### BILL 27: AN ACT TO AMEND THE REVOLVING FUNDS ACT

**HON. DAVID RAMSAY:** Mr. Speaker, I move, seconded by the honourable Member for Monfwi, that Bill 27, An Act to Amend the Revolving Funds Act, be read for the first time. Thank you, Mr. Speaker.

**MR. SPEAKER:** Bill 27 has had first reading.

---Carried

Item 19, second reading of bills. Item 20, consideration in Committee of the Whole of bills and other matters: Bill 12, An Act to Amend the Education Act; Bill 22, Territorial Emblems and Honours Act; Bill 24, An Act to Amend the Liquor Act; Committee Report 7-17(4), Report on the Review of Bill 24, An Act to Amend the Liquor Act; Committee Report 8-17(4), Report on the Review of Bill 12, An Act to Amend the Education Act; Tabled Document 70-17(4), Electoral Boundaries Commission, Final Report, May 2013; and Tabled Document 107-17(4), NWT Capital Estimates 2014-2015, with Mrs. Groenewegen in the chair.

### Consideration in Committee of the Whole of Bills and Other Matters

**CHAIRPERSON (Mrs. Groenewegen):** I'd like to call Committee of the Whole to order. We have a number of matters before us today. What is the wish of the committee? Ms. Bisaro.

**MS. BISARO:** Thank you, Madam Chair. We would like to deal with Bill 24 and Committee Report 7-17(4).

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Is committee agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Ms. Bisaro, do we not want to deal with Tabled Document 107-17(4) as well?

**MS. BISARO:** Thank you, Madam Chair. We do, if we can hear from Mr. Miltenberger.

**CHAIRPERSON (Mrs. Groenewegen):** Okay. Thank you, Ms. Bisaro. We'll reconvene after a short break.

---SHORT RECESS

**CHAIRPERSON (Mrs. Groenewegen):** I would like to call Committee of the Whole back to order. Minister Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. Over the last few weeks, Members of the Legislative Assembly have been working hard on reviewing the departmental capital budgets for the 2014-15 fiscal year.

As part of their review, Members of this House have recommended amendments and other commitments to the Department of Transportation's 2014-15 Capital Estimates.

I have considered these recommendations with my Cabinet colleagues and offer the following commitments:

1. Recommendation for chipsealing Highway No. 1  
Highway No. 1 from kilometre 187 to 206 is currently a priority to be resurfaced in 2014-15. The department will commit to resurfacing this section of road next summer.
2. Recommendation for upgrading of Mackenzie Valley Highway winter road  
This winter the department will improve the strength of the crossing at 12 Mile Point by watering the snow fill to create a solid base and will cover that base with rig mats. Going forward, the department will look at a more permanent solution, such as a portable bridge, for the 2014-15 winter season.

With respect to the recommendation for multi-year funding for the Detah access road, the Financial Management Board has approved \$2 million to

resume the Detah Access Road Project in the 2014-15 fiscal year.

I will also assure Members that the additional funding for the Detah access road will not be financed through reducing funding from another project.

I will follow through with this adjustment in the Supplementary Estimates (Infrastructure Expenditures), No. 1, 2014-2015, which will be introduced in the House next week. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Ms. Bisaro.

#### COMMITTEE MOTION 107-17(4): RESUME CONSIDERATION OF THE DEPARTMENT OF TRANSPORTATION DEPARTMENT SUMMARY, CARRIED

**MS. BISARO:** Thank you, Madam Chair. I move that this committee resume consideration of the Department of Transportation department summary on page 9-2.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Bisaro. The motion is in order. To the motion.

**AN HON. MEMBER:** Question.

**CHAIRPERSON (Mrs. Groenewegen):** Question is being called.

---Carried

We will resume consideration of the Department of Transportation at page 9-2, infrastructure investment summary, infrastructure investments, \$90.4 million. Agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Does committee agree that we now have concluded consideration of Tabled Document 107-17(4)?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Ms. Bisaro.

#### COMMITTEE MOTION 108-17(4): CONCURRENCE OF Tabled DOCUMENT 107-17(4), NORTHWEST TERRITORIES CAPITAL ESTIMATES 2014-2015, CARRIED

**MS. BISARO:** Thank you, Madam Chair. I move that consideration of Tabled Document 107-17(4), Northwest Territories Capital Estimates 2014-15, be now concluded and that Tabled Document 107-17(4) be reported and recommended as ready for further consideration in formal session through the form of an appropriation bill. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Bisaro. The motion is in order. To the motion.

**SOME HON. MEMBER:** Question.

**CHAIRPERSON (Mrs. Groenewegen):** Question is being called.

---Carried

Committee, we have agreed to consider Bill 24, An Act to Amend the Liquor Act. I will now ask the bill's sponsor, Mr. Yakeleya, to introduce the bill. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. It is my honour to appear in front of the Assembly today as a sponsor of Bill 24, An Act to Amend the Liquor Act. I had the pleasure of attending the committee's public hearings on this bill in the Sahtu communities. Today I want to discuss the key points and concerns raised by those who came and spoke on the bill and what this bill proposes within the Sahtu.

Decision-making of limits on sales of alcohol in Sahtu would occur at the regional level. Regional service delivery and decision-making is not a new concept. In the Sahtu there are many examples where services are supplied and decisions are made on a regional level, such as the health and education authorities, the renewable resources board and the Sahtu land claim.

During the committee hearing on this bill, we heard a lot about the restrictions, whether they should or should not be brought back and whether people should or should not be able to buy as much alcohol as they want. This bill on its own will not bring back restrictions. What it does do is allow all the residents in the Sahtu to be involved in the decision as to whether there should be limits on sales of alcohol at the liquor store that serves the region.

We do know, according to the RCMP, limitations do help the enforcement in our communities. The Norman Wells liquor store is unique in the Northwest Territories. It is closest to the neighbouring Sahtu communities, meaning that changes made at the liquor store affects the entire region.

Over a year ago, residents of Norman Wells voted to lift all restrictions on how much alcohol you can buy per day at the local liquor store. Those in favour won the vote by a slim majority, 113 to 101, which is 25 percent of voters deciding. This is 113 people of the total population of 2,680 in the Sahtu. Approximately 30 percent of the Sahtu population lives in Norman Wells, but 100 percent of the population have to live with the results of the decision to remove the liquor restrictions. The liquor store not only serves the local population but the other four Sahtu communities. True, liquor can

come from Yellowknife or Inuvik. When you consider how much it costs to travel there compared to the trip to Norman Wells, plus the cost to purchase the alcohol, we know that most, if not all, the alcohol in these communities comes from Norman Wells.

However, from the Liquor Commission, since the restrictions were lifted from the Norman Wells liquor store, sales of wine and coolers were each up by 17 percent, beer sales were up by 3 percent and sales of spirits were up 46 percent in 2012. That's nearly 7,000 litres more than 2011. I have pictures to show what RCMP have seized from bootleggers.

Norman Wells has about 2 percent of the NWT population and 5 percent of the NWT liquor sales. Since the Norman Wells liquor restrictions were lifted, I have heard strong support for a regional approach to liquor sales. The sale of liquor in the Northwest Territories is already a highly regulated industry. Although liquor stores are owned and operated by private vendors, they must be licensed by the government and buy its product from the government. The government also regulates the model of store. For example, the Norman Wells liquor store is based on a consignment model and receives inventory on consignment from the Liquor Commission.

The Liquor Act already restricts who alcohol can be sold to. It also already provides for a referendum to apply, remove or change liquor restrictions. The bill before you changes who participates in that decision-making. This bill will not impact the operation of liquor stores in other regions. There is precedence for treating regions differently as the municipal statutes allow for various approaches for liquor sales amongst the communities in the Northwest Territories.

The committee heard from the Sahtu residents that lifting the restrictions would result in increases in alcohol in their communities and an increase in social problems. This is supported by early RCMP statistics; crimes had increased in the Sahtu communities and there are more bootlegging charges and charges laid related to the arrival of large amounts of liquor into a community. For example, in Tulita, 30 percent of the calls seeking the help of the RCMP during May 2013 occurred in a single day, the day after an arrival of a large quantity of liquor.

The RCMP reported that in 2012, the percentage of alcohol-related service calls doubled over previous years: assault-related calls increased by 50 percent in Tulita and 133 percent in Colville Lake; the RCMP in Fort Good Hope, Tulita and Deline responded to an average of 117 more alcohol-related calls in 2012 than in 2011; in Fort Good Hope where the population is only around 559, police responded to over 600 alcohol-related incidents. The Sahtu Health and Social Services



Authority has written to me about the safety of front-line workers dealing with intoxicated, agitated and threatening community members.

People who want to quit drinking need practical options for doing that and support in their communities when they quit. We don't have the treatment programs and services in the region to help people deal with addictions. We don't have enough police resources to enforce restrictions in other communities. We are limited in what we can do by the search and seizure provisions under the Charter of Rights and Freedoms. Limiting how much alcohol people can buy at the point of purchase is one of the few really effective tools we have.

People of the Sahtu have a strong tradition of working together. When there's a problem affecting the lives of people – famine, disease, an enemy – people came together and tried to find a solution. It wasn't every man for himself. The regional approach proposals here may not work for every region, but it is what is right for the Sahtu region. Yes, one region may be treated differently, but the Sahtu wants to make a decision on a regional basis.

If involving the entire region in decision-making around liquor sales means saving lives, rescuing families, stabilizing communities, then there's no inconvenience. In the long run, it is more inconvenient to deal with trauma, Fetal Alcohol Spectrum Disorder, increased health care costs and generational legacy of alcohol abuse than any other current argument against a regional approach to the liquor sales in Norman Wells.

This bill simply sets a framework for regional decision-making. If we decide to hold a regional plebiscite, it would be a long process. It might take about two years to implement the changes. There will be lots of opportunities for community members to have a say in what should be included.

Madam Chair, I urge all Members of this Assembly to support this legislation and give voices to the residents of the Sahtu. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. I will now turn to the chair of the Standing Committee on Government Operations, the committee that considered the bill, for opening comments. Mr. Nadli.

**MR. NADLI:** Thank you, Madam Chair. The Standing Committee on Government Operations has considered Bill 24, An Act to Amend the Liquor Act. Bill 24 is a private member's bill brought forward by Mr. Norman Yakeleya, Member for Sahtu. It amends the Liquor Act to allow for regional decision-making on liquor sales in the Sahtu region.

During the month of September, the Standing Committee on Government Operations conducted

public hearings on the bill in Yellowknife, Deline, Fort Good Hope, Tulita and Norman Wells.

One amendment was made to the bill, with the concurrence of the Minister, during the committee clause-by-clause review on October 16, 2013. A motion was carried to report Bill 24 to the Assembly as ready for consideration in Committee of the Whole.

This concludes the committee's opening comments on Bill 24. Individual Members may have additional questions or comments as we proceed. Mahsi, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Nadli. I will ask Mr. Yakeleya if he would like to bring witnesses into the House.

**MR. YAKELEYA:** Thank you, Madam Chair. I do.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you. Is committee agreed?

**SOME HON. MEMBERS:** Agreed.

**CHAIRPERSON (Mrs. Groenewegen):** Agreed. Thank you. I will ask the Sergeant-at-Arms to escort witnesses into the Chamber.

Mr. Yakeleya, for the record, could you please introduce your witnesses.

**MR. YAKELEYA:** Thank you, Madam Chair. On my right is Kelly McLaughlin, drafter of Bill 24; and on my left is Glen Rutland, legal counsel to me as the sponsor of this bill.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. I will now open the floor up to general comments on Bill 24. Mr. Menicoche.

**MR. MENICOCHÉ:** Thank you very much, Madam Chair. I am pleased to see and watch the Member pursue one of the initiatives from his riding. It's been a long time coming. Certainly, they are really concerned about the amount of alcohol that gets to the small communities. Also, you can see it in the news, as well, with the arrests and the amount of alcohol that is being purchased locally and being transported to the smaller communities.

I do want to say that I have had serious inquiries from Fort Simpson's concerned residents, as well, because they were wondering about this bill and how it affects my riding of Nahendeh. It is a similar situation. It has a central liquor store and five surrounding communities. I guess one of the concerns is, while it may be applicable to Fort Simpson liquor store, as well, perhaps if I can ask about whether the legislation is going to change so that it is flowing out to other regions. I just have that initial concern there, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Yakeleya.

**MR. YAKELEYA:** Madam Chair, I thank the Member for the question. The legislation is specific

to the Sahtu region. Mr. Menicoche raises a very good point because the only other liquor store in the Northwest Territories that has restrictions is the Fort Simpson liquor store. However, this legislation specifically speaks to the Sahtu region. Could I ask Ms. Kelly McLaughlin if she has any comments?

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Ms. McLaughlin.

**MS. MCLAUGHLIN:** Thank you, Madam Chair. The Member noted the bill is structured so that it relates to the Sahtu community, and lists the specific communities to which this provision applies and it's triggered by the Sahtu communities in this particular bill.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. McLaughlin. Mr. Menicoche.

**MR. MENICOCHÉ:** Thank you very much, Madam Chair. I just need some certainty specific to the Sahtu region. So just to that, I guess that was my only concerning question and I'll listen to other Members, if they should have other inquiries as well. I thank the Member for the response. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Menicoche. Mr. Dolynny.

**MR. DOLYNNY:** Thank you, Madam Chair. I'd like to thank the sponsor of the bill, Mr. Yakeleya. I'd like to thank the hospitality of the people of the Sahtu for sharing their time, their stories, their struggle and thoughts on Bill 24.

Furthermore, I wish to thank the Sahtu community leaders, band councils, chiefs and elders for your wisdom and guidance.

Bill 24 is simplistic in design, yet opens up the bigger issue of social responsibility when it comes to alcohol and its devastating effects. We heard from the sponsor of the bill that the Sahtu is unique, but does the Sahtu not suffer from the same issues as the rest of the NWT or northern Canada, for that matter, when it comes to alcohol abuse, bootlegging and social problems?

So aside from uniqueness and what was also tabled in committee's report in the House, what else did we hear from the Sahtu people? We heard this would create too many demands from other NWT jurisdictions. So, does this bill allow for the call for similar mirror legislation, allowing plebiscite restrictions in places such as Inuvik, Hay River, Fort Simpson, Yellowknife and Fort Smith? In a non-legal sense, it does set up for some interesting precedent. Mathematically, this is almost impossible to duplicate.

We heard that the bill was unconstitutional for the committee to consider. So we asked ourselves, does the amendment offend the constitutional right to vote in the Sahtu? Does it discriminate on the basis of place of origin and what about the voting

rights of Norman Wells residents? Are their rights offended?

It is clear that Bill 24 affects the voting rights of any given Sahtu community in relation to liquor restrictions. So the question of dilution of voting rights, is this discrimination with respect to goods, services, accommodation or facilities? According to our legislative legal counsel, it is doubtful this would constitute discrimination pursuant to the Human Rights Act. To constitute such discrimination, Bill 24 would have to deny or discriminate a Sahtu community of such which is available to the public. Again, Bill 24 does not deny citizens of any Sahtu community to have a liquor store or to buy or sell alcohol.

So do we have a constitutional infringement with Bill 24? I can assure that committee had their constitutional Charter glasses on during the whole process of the bill. So no, I do not feel this bill touts constitutional infringement.

To recap Bill 24, are we setting up territorial precedent? Maybe, but as I said earlier, very difficult to reproduce mathematically. Are we creating inequalities under the Minister's authority? Yes, but from a very narrow point of view. Are we creating inequalities across the NWT? No, as Charter acts and land claims all differ in design already. Finally, if we're doing all three of these, is this good public policy moving forward? Well, I'm going to let the historians judge this question in the years to come.

So, committee, I ask you to put aside what has just been proven and battle tested from a constitutional sense so I can share my final thoughts.

Alcohol is the root of all evil and it is clear we need a rational, sobering perspective to all this. Admittedly, almost all of our issues of alcohol abuse boil down to personal responsibility and community support. In the end, this bill sets the premise of doing what is right for your neighbour, and it is clear from the people of the Sahtu they need our help.

Therefore, and in light of a regional town being restricted by a potential future plebiscite, this should not prohibit the people of Norman Wells or any township from helping their neighbours in their time of need. The sponsor of this private member's bill, Mr. Yakeleya, has taken this serious issue head-on, with the potential of a political price to pay for his actions. I commend him and he undoubtedly has my respect moving forward.

Therefore, it is in the context of human compassion, legislative stewardship and the hope of a free vote by all Members here today that you will stand beside Mr. Yakeleya and the people of Sahtu and vote in favour of this bill. Mr. Yakeleya, you have my full support.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Dolynny. General comments. Next, I have Mr. Bromley.

**MR. BROMLEY:** Thank you, Madam Chair. Welcome to the Member for Sahtu and his proposed legislation. I think the first relevant fact for me is we're talking about the sale of a government-controlled substance. So this is already sort of beyond the course of normal business. So we are used to specific regulations and guidance being put forward on controlled substances like liquor. I thought it was very interesting. I was not on the committee and I did not travel, but I've been listening closely to the committee and found it interesting that they found considerable merit in both the pros and cons to the proposed legislation. So, no, this has not been an easy road or a clear road necessarily, at least in the beginning, and I appreciate the change and the Member's flexibility to accommodate that change in ensuring that the decision was made by communities that represent at least 50 percent of the residents of the Sahtu.

We've been pointing our fingers very strongly at the lifting of restrictions at the liquor store in Norman Wells as the cause of this situation. But I'm very concerned, because we've seen this sort of phenomenon in lots of regions of the Northwest Territories where there has been no change in restrictions, but we've had large industry come in with large resources and people's disposable income soared and resulted in the same phenomenon; and the RCMP, I think, can attest to that, as could our Minister of Social Programs. I've spoken to the Member for Sahtu and he agrees that it's almost certainly... Perhaps I could pose that as a question. Would you agree that this is part and parcel of the equation here, that it's a combination of the lifting of restrictions as well as the additional disposable income that people have as a result of the exceptional levels of development activity, the oil money in the region? Maybe I could start there. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Bromley. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. Thank you, Mr. Bromley, for the question. When we start to have the oil and gas coming to the Sahtu communities and start to explore for the oil and gas, that could be beneficial to the North and the Sahtu people. The comments by our leadership were starting to look around at the lifting of the liquor sales at the Norman Wells liquor store and we're starting to see that, with the additional work and the amount of work that's in the Sahtu, and the lifting has certainly contributed to the amount of liquor being purchased at the Norman Wells liquor store, even to the point where people who were also on income support were also starting to buy a lot more liquor than one needs to be, because certainly, the

amount that they're purchasing is not for personal consumption. We do see a correlation there with the funds coming in, the activity and the lifting of the sales at the Norman Wells liquor store.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Anything further, Mr. Bromley?

**MR. BROMLEY:** Thank you, Madam Chair, and thanks to Mr. Yakeleya. Of course, we know the results are vastly increased consumption leading to increases in crime and, ultimately, if this continues, and we're talking about orders of magnitude increases in consumption here and family violence and addictions and so on, and I think that's fundamentally the motivating factors that are causing people in the Sahtu to speak out so clearly here. I guess I've been convinced. I've listened closely to concerns about improperly curtailing businesses involved in the sale of liquor and I'm convinced by our legal advisors that this is not a discriminatory action or an unconstitutional action. I'm also convinced that the business that does exist is viable and known to be viable under restrictions, not that this will immediately result in a restriction, but it could, and so that needs to be considered, and I believe I'm okay with the situation there.

The government has raised the concern that this bill introduces inequality of communities across the Northwest Territories. Currently, every community has a voice for themselves. This changes it now to where a region can sort of dictate to a community what the situation will be, and I'm convinced this is proper, but it is a departure, as the government notices, and so it introduces a level of inequality across the communities. I'm convinced here by the people of the Sahtu and their MLA, in this case, that this exception is a legitimate exception, because it's a fairly dire situation, but, I guess, in the end I'm left with a question about the complexity of the situation if another community – and I've been assured this is unlikely in the near future – wanted a liquor store and so on, then the complexity of it starts to increase and become confusing to voters.

On that basis, and given some of the departures here from the normal treatment of equality across communities, I'm hoping there's some commitment to monitor the impacts and evaluate this proposed legislation should it pass here today. I'm hoping that's in place. I'd welcome any comments from the Member for Sahtu on that. With that, I'll conclude my general comments. Mahsi.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Bromley. I didn't hear a specific question there. I'll think we'll just take that as general comments and move on to Mr. Bouchard.

**MR. BOUCHARD:** Thank you, Madam Chair. I'd like to thank the Member for Sahtu, Mr. Yakeleya, for all his hard work in bringing this bill to our committee and to the Assembly here, and I definitely appreciate the situation that's in the Sahtu

right now and, obviously, befitting that we had a whole question period on drug and alcohol problems throughout the North. I understand the issue before us.

I'd also like to thank the members of the Gov Ops who have taken this to the public in the area of the Sahtu and got the general information from those people and their concerns.

I guess I do have some issues with this bill on several levels. The first area that I have a concern with is I'm not really supportive of restrictions and their effectiveness in curbing alcoholism and drinking problems in communities. I believe in areas where they've had it in the past or currently there are still drinking problems and there are people carrying on and continue to have issues out there, and I understand this does not necessarily mean that there's going to be a restriction placed in the Sahtu. It just gives them the potential to have that. But yet, they're giving control, and if it ever happened, restrictions would be in place. I'm not a strong believer that those restrictions would be effective.

The other area of concern, obviously, coming from a regional centre, is that outside communities have control on activities that happen in a regional centre, and if we flipped the coin and regional centres wanted something controlled in a small community, we would probably be called bullies and it would be seen as an issue that the larger centre...David and Goliath type of concept. It begs the question and the precedent that if this is allowed to happen, that, you know, now we're dealing with liquor, but it may be other issues within this government where the communities surrounding the regional centres say we want to be able to control what happens in the regional centres. Whether that has to do with Education, whether that has to do with Health, whether it has to do with any department in the GNWT, I feel that we're setting a precedent in allowing this to happen.

We've discussed, and I know the Members have talked about sales going up, and I know we couldn't prove why that was happening. Whether that was due to the fact that industry had come into the community, like some Members had talked about. The ability for someone that used to go to Yellowknife on a vacation and buy a case of whiskey for their own personal consumption now doesn't have to do that. They can go to Norman Wells and do that.

The other concern that I have, and when we're talking about prohibition, restrictions and that type of stuff, it's been done in many areas before in history. It's been going on for years, for decades, with very little positive results. I think by putting restrictions in place probably increases some of the criminal activity. I think it promotes bootlegging. If I live in a community where there are restrictions in

place and four of my friends want to sit around and have a case of beer, we are done the case of beer and we want to drink some more, we are restricted in what we can consume, so we would just go to a bootlegger and get that. It promotes that type of activity, I do believe.

Respectfully, to the people of the Sahtu and to the Member, I just feel that we, as a government, definitely need to support drug and alcohol issues in the Sahtu and other regions, but I don't think this bill is an effective way of curbing the problem.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Bouchard. Ms. Bisaro.

**MS. BISARO:** Thank you, Madam Chair. I, too, want to congratulate MLA Yakeleya for bringing forward this private member's bill. He is responding to the concerns of his constituents and it's a good thing to do, and I know how much work is involved in getting to this point. I'd also like to thank the residents of all the Sahtu communities for their hospitality, for their stories and the sharing that they did with us as we travelled through their communities at the public hearings.

Alcohol, addictions, drugs, all of that, this is a really difficult issue. We talked about that earlier today. And it's not a difficult issue only in the Sahtu, it's a difficult issue everywhere in the NWT. But we heard from so many residents how much it is impacting them in their Sahtu communities and I cannot disagree with the residents who told us many things. They told us the liquor consumption had increased, as referenced by some of the other Members. They told us that the amount of the liquor coming into their communities had increased. They told us that bootlegging was much more prevalent. They told us that they see more and more drinking in their communities. They told us that calls to the RCMP had increased considerably. That wasn't in just one community; that was pretty much the message in every community and we visited four out of the five communities.

We heard that these problems with alcohol, the drinking, that these were not new problems. They admitted that these were problems that were there before, but we heard a number of people tell us that the rationing system which was in place before had given them some relief to a certain extent from the abuse of alcohol. Now that things were wide open, many of them felt that it had a huge impact on the alcohol consumption and on the addictions issues that they were facing.

I can find no fault with the legislation itself. It simply is asking for an opportunity for more people to vote on a plebiscite, if there is a plebiscite, if the Minister determines that a plebiscite should be held. That's a big if. I think my main concern is that I don't know that this bill is the solution to the problem at hand and the problem that Mr. Yakeleya is trying to address. It's addiction, it's alcohol consumption, it's

the need for programs in all of the communities and this is one way, I guess, or one small step in trying to address that problem.

Many people in the communities expressed concern for their youth. They felt that the situation had changed and that more and more of their youth are drinking and that they are drinking more. One person actually referenced youth as being poisoned by alcohol, because they were drinking so much that they were putting themselves into a situation where they were being alcohol poisoned. We heard time and time again that people struggle with alcohol and addictions and that they want help and that they need help to address their problem.

We weren't just discussing the bill in these communities. We were discussing the social issues, the health issues. It was wide-ranging. It was interesting to me that in every meeting, at least one person who was there got up and said that the community has to offer help itself. So in every community there was at least one person who recognized that and stated that the people needed to get better and they need to take some action.

We've also heard – this is from somebody who does not support the bill – that most Sahtu communities have restrictions and that it is a responsibility of the community to make those restrictions, put them in place and then to abide by them. That was an opinion of somebody who submitted to the committee.

Many people talked about the need for stiffer penalties and that's reflected in the committee's recommendations in our report. The committee's recommendations also reflect the cries for programs that we heard. We had so many people who spoke to us and said we need programs to help us get our people better, to get our people healthy. They don't have them. They say that they have applied, spoken to people, asking for help and that they get no response.

The interesting thing to me and I was just reviewing the committee recommendations that we determined. As a member of the committee, it was a really valuable experience, but it's interesting to me that of all our 15 recommendations, not one of them is a recommendation to change the act. They are all recommendations to various government departments to do things like make on-the-land addictions treatment available in communities, that the Department of Justice establish an effective mechanism for anonymous reporting of bootleggers and bootlegging. They all reference the problems that we heard and how committee determined the government could help these people with their issues.

It has been pointed out already, but I will say it as well, that the Finance Minister has rightly pointed out that the bill will establish different powers for the Minister in different places in the territory. That's a

concern expressed by the government, but I don't think it is that big a concern. It isn't a big concern for me. I don't think it's a big deal. I think it certainly can be worked around. I don't think we're going to see people take advantage of that difference and different powers in different places.

We also heard, and I think MLA Dolynny referenced, that some people felt that this bill would make things unconstitutional and it had to do with voting and so on. Committee considered that several times and determined that we do not feel that if this bill passes, it will create a situation where somebody is losing their rights and that it's an unconstitutional situation.

For me, I had to ask myself is this bill the right solution to the Sahtu problem. I'm not sure. I think it may be a part of the solution, but I think there are other things that we can do and I think that's reflected in our recommendations. Why don't we restrict sales at the point of sale, at the liquor stores in Norman Wells, Inuvik and Yellowknife? Because it's not just Norman Wells where this liquor is coming from. It's coming in from Yellowknife; it's coming in from Inuvik. We heard that as well.

Why can we not come down harder on bootleggers? Why not reinstate alcohol in committees? Require permits? The community would issue a permit for people to bring liquor in. They could charge a small amount of money. They can use that money towards local programs. There are a lot of possibilities.

I ask myself, as well, is this bill going to solve the woes and the problems of the Sahtu communities and I have to say no, it's not going to. But this bill and the requests from the residents in the Sahtu is an ask and a cry for help and I think we need to provide the support that these residents are asking for. It's a start. It's not a big step, but it is a small step.

Lastly, I think I just want to mention one thing that is also in the report. The last paragraph states: "The committee understands the Finance Minister's decision that under circumstances specific to this bill, Cabinet will not support it. The committee therefore respectfully requests that Cabinet abstain, or allow a free vote of its Members." I just want to reinforce that. I believe that and I would ask that that would happen. I would ask Cabinet members to either abstain or have a free vote. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Ms. Bisaro. General comments. Next I have Mr. Moses.

**MR. MOSES:** Thank you, Madam Chair. Just before I begin, I would like to commend the Member for Sahtu, Mr. Yakeleya, for his commitment to his constituents and taking a big step standing up for his people and what the people

believe in and what they do need. I would like to thank my colleagues from the Government Operations committee as well as staff that travelled with us on this important matter. One other thank you to the people of the Sahtu region for their warm welcomes, their great hospitality and, as Ms. Bisaro mentioned, their great storytelling.

The Sahtu region is a region that, in all my travels, is one that is very spiritual, probably the most spiritual region that I have travelled to in the Northwest Territories. Upon my visit and the consultations that we took on this tour, I heard and felt the spirit of individuals, families and communities that were broken and hurt. As Ms. Bisaro said, crying for help and the need for help.

You've heard some comments here today about increased sales, increased restrictions would benefit the bootleggers, but what we heard from some of these people is that bootleggers had an opportunity to actually purchase more alcohol now, instead of finding other people to purchase it for them. So they can go in and buy as much alcohol as they want. What we heard was stories of them loading them up on sleds and heading out of town. They said they buy hard alcohol because hard alcohol doesn't freeze.

What we also heard was the history and that in the '70s, the Sahtu Secretariat, the regional council, made a motion to put in these restrictions and the rationing system, and the whole region voted on that. The new vote that went on in Norman Wells did not allow the communities to have that say, and that was taken away from them.

We heard from leaders, business groups, residents, elders, youth and the RCMP. We heard from very strong people with strong voices. For somebody to speak up in a community setting in a meeting, that takes a lot of guts and a lot of courage, and for them to speak up on such an issue, I think that sheds light to the issue at hand.

Things that we heard, as I mentioned, there was an increase in sales, increase in consumption, but we also heard that there was an increase in deaths in the region and deaths in our youth. When we're going through the consultations, we did have a discussion and said the government doesn't have all the answers and this has to be done in partnership. It's been mentioned here before that it has to be done through personal choice and communities have to jump on board, as well, should this go through and how we work together.

Just to touch on the bootlegging side of this, we did hear from the RCMP specifically that they have been getting more calls in the small communities; they've been having more people in jail cells. They've seen an increase in that as well as hearing more bootlegging going on in the communities. We heard residents talking about the amount of people

they see walking in town intoxicated. They've seen an increase in numbers they haven't seen before.

The bill itself, you know, it's not going to solve all the problems, but it is a good start. From that, we can start focusing on the other needs in that region, but also other regions throughout the Northwest Territories that focus on treatment, education and prevention. I guess what was most shocking to me was in one of the communities where I spoke to a couple of RCMP officers I had known that had worked in the community of Inuvik. They said this bill needs to go through because it's really affecting the lives of people in the community and they've seen an increase in that time in speaking to the chief and especially the leadership was very important.

I guess in my last meeting in Norman Wells is where we did get a lot of both sides of the story. It's always good to hear. We did hear a lot from the small communities who were all in support of this bill. I wouldn't say Norman Wells was half and half; I would say there were more people in support of the bill than against it. Some things mentioned was the bill that took the restrictions off was the allowance of some transient people that come up to Norman Wells and only stay there for a year or two and then leave. They make decisions for people that live there their whole lives and it affects their whole lives. Actually, one of the people who were at the meeting said that if the amount of people that came to the voting meetings when the restrictions were lifted were more than there was when we were talking about the bill, we probably wouldn't be talking about this right now because the vote was so close. If you had more people out to the discussion of the bill, it probably would have been voted down.

One group that really touched me when they spoke was the youth. The youth were very candid. They were very open, telling us all the issues they've seen. We had youth tell us how they are able to access more alcohol now because adults who buy for them, who wouldn't want to use up all their restrictions for the day, can actually buy more booze now and, as such, buy for the youth. The youth were telling us that. As a result, there were some very strong and heartfelt stories from the youth as well.

Madam Chair, I know there is development and activity going on in the Norman Wells region. As I stated earlier in one of my statements, if we don't have healthy people in those communities – and from this tour, there's a lot of hurting people there – we're not going to have people to fill those jobs for the development and we're going to have to continue to bring people up from down south.

The committee listened very well during this tour. The report was read the other day and there were 15 strong recommendations that go outside of just

the restrictions. We're looking at social issues that need to be addressed.

I just want to leave you with this one quote that one of the elders had left us with when we were leaving one of the communities. "Hope you make a good decision for us." I'm here because I listened to a lot of residents of the Sahtu region. As I said, it's probably the most spiritual region I've ever travelled to. Upon the travel to the communities, I could feel the broken spirits that were there and those spirits need to be uplifted again. They need to be rendered and they need the help. I'm one to sit here and say I will help the Member on this bill as well as assist the residents of the Sahtu, so they can have a healthy society again. Mahsi, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Moses. Next I have Mr. Blake.

**MR. BLAKE:** Thank you, Madam Chair. I, too, would like to thank the Member for the Sahtu, Mr. Yakeleya, in bringing this private member's bill forward. I spoke to a lot of residents in the Sahtu from a variety of the communities there. They, too, have told me about the increase in consumption, the increase in the cases with social services and also the policing. Through our committee business, we have seen an increase of over \$2 million in the Sahtu region. That's a clear indicator that there's a lot more happening in that region. Some say it might be just because of development, but nonetheless, there's a \$2 million increase of alcohol that's been bought in that region. It's affecting the people, as you've heard very clearly from my colleagues from the committee.

One of our colleagues mentioned that he didn't want to see this as a rippling affect. Madam Chair, I would like to see this as a rippling affect. People in the Beaufort-Delta also brought this same issue up, I believe four or five years ago, when I was in a different role in a leadership meeting. They wanted to see the same sort of thing happen in the Inuvik region. Because there's no restriction on alcohol sales, that really affects the surrounding communities and I've seen it firsthand.

I'd really like to thank the Member for bringing this forward. I spoke to a number of leaders, also, that said something needs to be done in Norman Wells to help the communities. With that said, Madam Chair, I will be supporting this bill. Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Blake. I'd like to briefly return to Mr. Bromley. I think he had a question for Mr. Yakeleya that didn't get addressed, so I'd like to go back to Mr. Bromley, please.

**MR. BROMLEY:** Thanks very much, Madam Chair. I ended with the query about follow-up with this legislation. Given that it is stepping out in a new way in how we run plebiscites across the Northwest Territories and it's a departure, has the Member

considered any follow-up, working with the appropriate authorities for follow-up and monitoring and evaluation to see how this works and be prepared to consider amendments if deemed to be appropriate? Thank you.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Bromley. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Madam Chair. Before I respond to Mr. Bromley's questions, I want to thank the Members for speaking to the bill. Certainly I look forward to continued support as we go through this process.

The question to Mr. Bromley's question on the point of evaluation on monitoring, certainly, Mr. Bromley, this is quite unique. It's doing something that is bold and imaginative for a solution. Not maybe the perfect solution the way I'd like to see it, as legislators doing something that's right for the people who spoke to us in the Sahtu in the communities. Even though we went to four of the communities, we had an opportunity to hear from all five of the Sahtu communities. I certainly would entertain, for sure, the process of evaluating and monitoring and seeing how it's going, is it doing what it's stated it would do. It's a long process, however, something that needs to be considered as part of the regulations. That is something I would support.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Yakeleya. Anything further, Mr. Bromley?

**MR. BROMLEY:** Thank you, Madam Chair. I think this is a bold and innovative approach to a situation here. I also agree with a lot of the comments I've heard, that we need a more comprehensive solution that deals with the health of people. So that this becomes a moot issue, but as we heard earlier today in the House, that is a huge and challenging and long-term undertaking. Whereas, this is a pretty quick piece of action that can help provide some alleviation while we do that more comprehensive work. So on that basis, I also will be supporting the bill. Mahsi.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Bromley. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** Thank you, Madam Chair. As we sit in this House, we are legislators who pass bills and make laws of general application and the Liquor Act is one of those bills. The other thing we do in this Legislature, as one of our guiding principles, is we've worked hard over the years to make sure that communities, at their request, have the maximum amount of authority as possible. This particular Liquor Act, which was put in place in 2008 after years of work, reflects where the main concern at the time, which we heard and responded to, was the request for the communities to have the ability to control liquor in their respective communities by a majority vote.

As legislators, as we've looked at bills like the Wildlife Act, or any other bill that has been years in the making, budget bills, we do our best to make sure that they reflect to the largest extent possible the wishes of Northerners as a territory. The concern we have is that by amendments such as this, there will be implications and consequences and precedents. If we enact this bill as presented, then there are two things. We are committed to working and giving communities the maximum amount of authority possible. For example, we're working with Deline on their self-government agreement-in-principle and supporting the right that they espouse to have, which is the ability for community control over liquor in their area. The other issue is the signal is going to be clear that as a government we are now prepared to look at laws of general application and possibly start moving towards a patchwork of enforcement and application.

It may not be germane to the issue in the Sahtu, but it is germane to us as legislators. As we pass laws in a careful, measured, thorough way, trying to do what's best for all Northerners, we have to contemplate that. We have to be very cognizant of that, conscious of that fact and what are the implications of our actions.

No one debates or disagrees with the issue and the challenges of alcohol and the need for us to continue to invest our resources to deal with the alcohol issues. Mr. Yakeleya and I, in his 10 years as MLA, have had numerous discussions about alcohol, the ravages, the incredible social cost that alcohol abuse places on our territory and we always come to the same agreement at the end of the day, that the ideal is for us as a territory and us as Northerners to be able to make the right personal choices. As Mr. Yakeleya and I have come to realize over our years, the personal choice is the only thing that is going to really change what happens with a person and their abuse of alcohol. We can help and we try to do that in many ways, but this bill, as people have pointed out, is not a silver bullet, it's not a panacea; it's an attempt to respond in a political way to a specific issue in the Sahtu. But if you overlay the broader concerns for ourselves as legislators and the need to ensure that we continue to govern and pass bills of general application, it is the position of the government that we can't support this bill. It has nothing and is not a reflection on Mr. Yakeleya. He should be commended for working so hard on it to reflect the concerns of his people. Of course, this is a bill of the government and we will be voting as a government on this bill for that very fact. Thank you, Madam Chair.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Miltenberger. Next for general comments I have Mr. Nadli and then return to Mr. Hawkins. Mr. Nadli.

**MR. NADLI:** Thank you, Madam Chair. I'd like to thank, first of all, the sponsor of this legislation. I think it's commendable that Mr. Yakeleya is working with his people and I respect him for that.

I'd also like to thank the people of the Sahtu that showed their Sahtu spirit in welcoming us into their community. What was fairly prominent, of course, and very obvious, was the personal testimony that we heard from communities in terms of the plight in dealing with alcohol.

This legislation simply is asking for help and the communities are asking for help. We heard from leaders, elders, parents and youth. There is a problem. There is a problem and we need to help out.

The other point that I wanted to make is we have to balance our business responsibility with social responsibility. Unfortunately, at this point, this government has its relationship with the Liquor Commission and also the liquor outlets and it's a challenge to try to balance those two. At the same time, I think if we call for development and we do in fact welcome development, it's going to be based on ensuring that we have really well-thought-out and developed social impacts meditative measures to monitor development so problems of this nature do not get out of hand where we can't control it anymore. I don't think that's the aim of resource development.

I think this legislation sits across this map for a future framework for decision-making. I say that because it was just recently that First Nations people were allowed to drink alcohol and vote. In this light, communities are asking to be involved with the public decision-making process. If they are indeed part of this public government, those communities should have a say. Mahsi.

**CHAIRPERSON (Mrs. Groenewegen):** Thank you, Mr. Nadli. I'll ask Mr. Dolyunny if he can take the chair. I'd like to make some general comments. I think we've heard from everybody now. Thank you.

**CHAIRMAN (Mr. Dolyunny):** Okay, committee. Mrs. Groenewegen.

**MRS. GROENEWEGEN:** Thank you, Mr. Chairman. I will be supporting this legislation as brought forward by Mr. Yakeleya. I've listened to the general comments and the debate with great interest. I'd like to thank Mr. Yakeleya for responding to the requests for his support on this issue and bringing it here to the Legislative Assembly.

To Mr. Miltenberger's comment that we can't have a patchwork of legislation as legislators, might I suggest that as we devolve more authority from our government through self-government agreements and other things, there is necessarily going to be a patchwork, and it is not unprecedented, and to me this is a form of devolution of authority to a region



who is asking for it. When we look at things like self-government agreements for communities or for regions or for groups, we look at giving them control over issues, potentially, like this, so if this legislation being enacted gives the people of the Sahtu that authority to control this substance within their region, it gives them more control, more authority, I think it's a good thing.

To be honest with you, when it comes to alcohol, I know that maybe this is not, as someone said, the panacea that is going to address all the problems and all the issues. Agreed. But if I can make somebody go one mile further, have to take one more turn in the road, one more step to make it more difficult, I will.

You know, alcohol is, as we said in our theme day today, having a terrible impact on our people and ironically we want to sit here and say, well, it's people's personal choice, but if we can help people with that personal choice, let's do it. Anything that can help deter it.

There are lots of people who are listening to this who can say I can drink alcohol. It doesn't affect me. It doesn't affect my life negatively. If people have a problem, well, let's just come up with more programs for the government to help the people who've got a problem. And good for you, you know. Good for whoever can drink and not have it affect them negatively.

I made a choice a long time ago not to drink, just on principle alone, because I saw the devastation of it, and if that in any way sends any message to anybody that you can have a happy and fulfilled life without having to turn to alcohol... You know, people drink in excess when they're sad, when they're happy, when they're celebrating, when there's a sports game on television. I mean, like, any excuse. I hate alcohol. I hate the effects of alcohol. I've watched it for the 40 years mostly. You know, I grew up in a little town and I didn't see a lot as a child growing up, but what I saw when I came to the North made me make a decision not to drink. Even in business, my husband and I made a pact when we started off in business 35 years ago. We will never sell alcohol, just because we're trying to make a point. We're trying to draw a line in the sand and say look, people don't need this.

I'm not trying to sound holier than thou. I'm just telling you that I hate it and I hate to see what it does to people. If you can manage it, well, good for you, but if people want to have a say in how this particular substance is controlled in their communities and their region, I say take it on, run with it. See if they can, through more autonomy, more say, bring about a positive impact.

Will people bring it from somewhere else? Perhaps. Will people load it in their sleds and haul it into the communities? Good. I hope they go off the trail. I wouldn't care if they did, with their boxes and cases

of liquor. I'm sorry; I wouldn't care. I just deplore it. I have seen too much devastation. Ironically, we as a government have so much to do with alcohol, you know. I mean, we buy it from the suppliers, we bring it in, we warehouse it, we ship it, we stock it, we give it out on consignment. Now, people aren't going to want to hear this, but a lot of money that we give to support people who are on government assistance, I have to tell you, we finance a lot of alcohol consumption in the Northwest Territories too.

This seems like a big circle to me. But, you know, it's not politically correct to talk about it because people have a personal choice. Hey, it's their personal choice. We're not allowed to criticize. It doesn't matter how far down it takes the community or takes a family or takes an individual.

I support this, and thank you to the Member for bringing it forward. I'll support any motion or any legislation or any action which curbs the consumption of alcohol in the Northwest Territories.

**CHAIRMAN (Mr. Dolynny):** Thank you, Mrs. Groenewegen. With this, it concludes our general comments. Mr. Hawkins.

**MR. HAWKINS:** Thank you, Mr. Chairman. This has been both a difficult and challenging issue that many of our Members have been dealing with as of late. I want to thank, first off, Mr. Yakeleya for his passion and his commitment to the people of the Sahtu. He has challenged this hill with great fervency and zeal. I can tell you that this has not been, hey, let's do this, and what do you guys think. He's brought Bill 24 over with a lot of work, and I can tell you, when he first started talking about this a few years ago, saying we have to do something, it started with we have to do something. Then it went into a lot of work behind and a lot of communications and a lot of knocking on doors. This bill did not show up here on our desks before this Legislature overnight. I'm trying to really stress to the people that this just didn't come overnight. It came over with great passion, a lot of work, a lot of commitment and a lot of energy. I applaud the Member for his commitment and his passion for the job he is doing.

Let us not forget why we do this job. Many days I wish we could make everyone happy. To some of that, I'd like to talk about that. Are we going to make everyone happy by doing this? Sometimes we ask ourselves, you know, how do we do this. Well, it wasn't, you know, yesterday that I was asking about trying to solve one problem in reference to the power rates about, well, we engineer the power rates. In other words, we make decisions to do things. Now, I don't agree with everything they did, but what I'm saying here is we have the power to do things we want to do with the types of outcomes and objectives.

At the same time, alcohol consumption, control, management and monitoring is a decision we can make. We can engineer our own rules and laws. In other words, we have control of them, so we can decide what type of outcome we're striving for.

I happen to be a big fan of Stephen Covey, and I often quote him, and he's got some really simple ones. He says, "Begin with the end in mind." So what are we trying to do here? We heard the Minister or at least someone talk about personal choices. Yes, but we're trying to buy people a healthy window of time to ensure that they are healthy. That's a focus on the end. How do we get there? Bill 24 could be the right vehicle. I don't know if it's the vehicle to get us there, but it could be the right vehicle.

I've been using my political career in a manner of saying, you know what, let's break from the status quo. Yes, I try to bring a lot of ideas to the Assembly, and I certainly welcome a lot of ideas as well. Why would I see standing in the way of Bill 24 as a good thing? I can't imagine a single reason why.

When I struggled with this, I kept thinking to myself, as other Members have, and it needs to be said, which is what are we doing to the town of Norman Wells in the context of autonomy. Are we stepping into an area when we should be bolstering their autonomy and their authority and allowing them to make their decisions? I really struggled with that.

But at the same time, I also have to balance the problem of what happens to the surrounding communities. Do I vote to take away the autonomy from one area by extending that authority and relationship to a larger area? I struggled with this many a day, and I talked to a number of people, and actually, once again, I want to thank Mr. Yakeleya for not putting unfair pressure on any Member. He talked about why he needed this, but he never made anyone feel as if we were strong-armed, not that that's allowed, but strong-armed to make a decision. He brought it to us to say this is the case that we need to make, this is the case I'm trying to communicate with you and this will help our people.

The other thing I struggled with is thinking of the Sahtu as a whole region. There will come a day that they will govern themselves as a whole region and in their own relationship that they'll be working with each other. Are we ahead of the curve by asking ourselves, are we giving them the authority as a group rather than an individual? What will this do to Norman Wells? What will this do to the region? By the region, I mean Fort Good Hope, Tulita, Deline and Colville. I hope I didn't miss anybody. It wasn't intended that way if I did. The reality here, and we often think this ourselves, is we must weigh and balance the needs of many versus the needs of few. I keep thinking: What's the worst that could

happen? A little less alcohol could be sold if further restrictions were put back. What is the worst that could happen if we left them wide open? Well, as a matter of fact, I don't have to imagine; we are already starting to see those results.

I should also temper, sort of, some of my remarks now on to the communities. This isn't Norman Wells' fault alone. I did tell Mr. Yakeleya I would be speaking this way, as well, because I feel that is a challenging decision that involves everyone, this smuggling of alcohol into communities. But I'm not blind to the fact that – and I can't say I've witnessed this, but I've heard this repeatedly – many of the people bringing alcohol into the communities are related to the people in those communities, whether they're their brothers, their sons, their daughters, their uncles, their aunts, their grandmothers. But yet I'm also well aware of the challenge to deal with it with their own family. Could they call the police on their own family? I'm well aware of that. That's a constant juxtaposition that these families would find themselves in. I'm not sure they are doing anything right. I don't want to get them in trouble. It's a constant balance of struggle going back and forth. Sometimes what they're doing is the best thing they feel they can do for their loved ones is not doing that, and yet we get some of the results we have.

I would support anything that puts roadblocks in front of addictions. If the public wasn't listening today, I'm sure that the message is slowly getting out there that this side of the House, the Members themselves at large have great concern with addictions and finding roadblocks for addictions in the sense of stopping people's consumption of it and trying to help people with their troubles.

If it's not clear by now, I have chosen with great consideration to vote in favour of the bill. I consider that the rights of the many must outweigh the rights of the few. As I said earlier, as I talked about the engineering of power rates, sometimes we meddle in areas for the good, although maybe on the micro level people are concerned why we're in there.

As I said, I will be supporting the bill and I will be supporting it proudly, because I feel we must do something that outweighs the problems we are having now. I'm not sure that this will solve everything, but I feel that without trying something bold and new, we have solved nothing. To that, I thank you.

**CHAIRMAN (Mr. Dolynny):** Thank you, Mr. Hawkins. This concludes it. I believe everyone had a chance to speak in general comments. I will allow the sponsor of the bill to comment back on the general comments. Mr. Yakeleya.

**MR. YAKELEYA:** Thank you, Mr. Chair. Thank you, colleagues, for giving your thoughts, your opinions, your analysis to this bill that is being asked by the Sahtu people. I have been asked by the Sahtu people as a legislator – as Mr.

Miltenberger put it so eloquently, as legislators we do the unpopular, bold initiatives to represent your people on whatever issues. When you have your people pushing you for a resolution or solution on an issue such as alcohol, the impacts in the Sahtu region, then you listen to them and you work on their behalf.

I am here before you because we have chosen to do the right thing. Today is the right thing to give the people in the Sahtu to be part of a regional decision on the single most devastating product in our lives since it was brought into our large and small communities, and that is alcohol, the abuse of alcohol. We heard in our communities, when we went to visit them and heard them, that that's killing our people. We are legislators here to provide maybe not a silver bullet or to get around some of the legalities and complications of regulations and work, but to do something bold and take action. It may not be a perfect solution, and I agree with the Members, but it is something we are doing. We are doing something.

We are talking about a regional structure. We don't know how or when that regional structure will be put into force, but we are giving the people hope. As legislators, that is what we do. We give people hope. Be part of the solution. We do make a difference when we as legislators go and ask for their vote and say we will work on your behalf. Government is not always right. Sometimes they make errors and that is okay because we can correct them. We are in the position.

In the Sahtu we have wrestled with this issue for some time, with various results. It is success or no success. In the '70s the leaders got together and said, Minister, you have the power to put restrictions on the sale of liquor in the Sahtu. He did it. Today is different. The Minister still has that power and the Minister is not using that power.

I want to tell my colleagues, for the ones that are supporting me, thank you from the bottom of my heart. This bill here is raising many issues and confronts many issues on rights and the role as a legislator. This is who you are speaking for on behalf of the people.

I want to say to the people in the Sahtu, what you talked to us about, what you said to us, and I as your MLA, now I know what it means to go to bat for you and work for you. I didn't think this was going to be a lot of work until I started talking to the drafters and the lawyers and the legislators such as yourself, and that's a lot of work. You have people who are saying that's infringing on rights or it's not okay. I didn't think that it was going to be so difficult if you are talking about saving lives and evolving as a region such as we are doing now with devolution.

I want to say that I look forward for this legislation to go through, do the right thing. I'm asking Members to listen to the people in the Sahtu. Have faith in the

people. I'm quite disappointed that Cabinet will not be supporting this bill and have a free vote on this. I do not yet see their logic. That speaks louder than what we are doing as legislators.

I thank the people in the Sahtu and I thank the Members of the Assembly for the comments you provided on Bill 24. Thank you.

**CHAIRMAN (Mr. Bouchard):** Thank you, Mr. Yakeleya. Does committee agree there are no further general comments? Mr. Yakeleya.

**MR. YAKELEYA:** Mr. Chair, I'd ask for a recorded vote.

**CHAIRMAN (Mr. Bouchard):** We're doing a clause-by-clause review. Does committee agree?

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Bouchard):** Does committee agree that there are no further general comments?

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Bouchard):** Okay, we can proceed to a clause-by-clause review of the bill.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Bouchard):** Bill 24, An Act to Amend the Liquor Act, Clause 1.

---Clause 1 through 4 inclusive approved

**CHAIRMAN (Mr. Bouchard):** To the bill as a whole.

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Bouchard):** Does committee agree that Bill 24, An Act to Amend the Liquor Act, is ready for third reading?

---Bill 24 as a whole approved for third reading

---Applause

Thank you, Mr. Yakeleya, and thank you to your witnesses. Sergeant-at-Arms, please escort the witnesses from the Chamber.

Committee, do you agree that this concludes consideration of Committee Report 7-17(4), Report on the Review of Bill 24, An Act to Amend the Liquor Act?

**SOME HON. MEMBERS:** Agreed.

**CHAIRMAN (Mr. Bouchard):** What is the wish of the committee? Ms. Bisaro.

**MS. BISARO:** Thank you, Mr. Chair. I move that we report progress.

**CHAIRMAN (Mr. Bouchard):** I will rise to report progress.

### Report of Committee of the Whole

**MR. SPEAKER:** Item 21, report of Committee of the Whole. Mr. Bouchard.

**MR. BOUCHARD:** Thank you, Mr. Speaker. Your committee has been considering Tabled Document 107-17(4), NWT Capital Estimates 2014-2015; Bill 24, An Act to Amend the Liquor Act; and Committee Report 7-17(4), Report on Review of Bill 24, An Act to Amend the Liquor Act, and would like to report progress with two motions being adopted and that Committee Report 7-17(4), Report on the Review of Bill 24, An Act to Amend the Liquor Act, is concluded and that Bill 24 is ready for third reading and that consideration of Tabled Document 107-17(4) is concluded and that the House concur in those estimates and that an appropriation bill to be based thereon be introduced without delay. Mr. Speaker, I move that the report of Committee of the Whole be concurred with.

**MR. SPEAKER:** Thank you, Mr. Bouchard. Do I have a seconder? Mr. Yakeleya.

---Carried

Item 22, third reading of bills. Mr. Miltenberger.

**HON. MICHAEL MILTENBERGER:** I seek unanimous consent to return to item 16, notices of motion for first reading of bills.

---Unanimous consent denied

**MR. SPEAKER:** Madam Clerk, orders of the day.

### Orders of the Day

**CLERK OF THE HOUSE (Ms. Langlois):** Thank you, Mr. Speaker. Mr. Speaker, orders of the day for Thursday, October 31, 2013, 1:30 p.m.:

1. Prayer
2. Ministers' Statements
3. Members' Statements
4. Reports of Standing and Special Committees
5. Returns to Oral Questions
6. Recognition of Visitors in the Gallery
7. Acknowledgements
8. Oral Questions
9. Written Questions
10. Returns to Written Questions
11. Replies to Opening Address
12. Petitions
13. Reports of Committees on the Review of Bills
14. Tabling of Documents
15. Notices of Motion
16. Notices of Motion for First Reading of Bills
17. Motions
  - Motion 26, Universal Affordable Daycare
18. First Reading of Bills

- Bill 28, Supplementary Appropriation (Infrastructure Expenditures), No. 3, 2013-2014

- Bill 29, Supplementary Appropriation (Operations Expenditures), No. 3, 2013-2014

#### 19. Second Reading of Bills

- Bill 27, An Act to Amend the Revolving Funds Act

#### 20. Consideration in Committee of the Whole of Bills and Other Matters

- Bill 12, An Act to Amend the Education Act
- Bill 22, Territorial Emblems and Honours Act
- Bill 26, An Act to Amend the Legislative Assembly and Executive Council Act
- Committee Report 8-17(4), Report on the Review of Bill 12: An Act to Amend the Education Act
- Tabled Document 70-17(4), Electoral Boundaries Commission, Final Report, May 2013

#### 21. Report of Committee of the Whole

#### 22. Third Reading of Bills

- Bill 3, Wildlife Act
- Bill 24, An Act to Amend the Liquor Act

#### 23. Orders of the Day

**MR. SPEAKER:** Thank you, Madam Clerk. Accordingly, this House stands adjourned until Thursday, October 31<sup>st</sup>, at 1:30 p.m.

---ADJOURNMENT

The House adjourned at 5:28 p.m.