November 2, 2015

Mr. Rodney: Thank you, Mr. Speaker. It was an honour to help launch Alberta's new tobacco reduction strategy just under a couple of years ago, and it was hailed at that time as a leading approach to reducing smoking and preventing tobacco use in the first place. The path towards a tobacco-free future has also been laid out in previous private members' bills such as the Smoke-free Places Act and government bills such as the Tobacco Reduction Act. Meanwhile, the NDP's Budget 2015 is hiking taxes for tobacco for the second time in a year. To the Minister of Health: what specific plans does the minister have to ensure that tobacco taxes are channelled towards tobacco prevention and cessation programs?

The Speaker: The Minister of Health.

Ms Hoffman: Thank you for the question, Mr. Speaker, and to the hon. member for asking it. Definitely, we have a number of different people in the department who are working on initiatives around wellness, and one of them, of course, is around reducing
tobacco consumption. That's one of the reasons why they're using evidence to help drive recommendations, that they bring forward to me, like removing menthol products from the marketplace. It's really clear that of students and minors who are smoking, a large number were smoking menthol products, and that's one of the reasons why we've removed that product from the market.

Mr. Rodney: Again to the Minister of Health. I know Albertans are looking for more specifics than just that. Hopefully, they are still forthcoming. She did mention wellness, and I really appreciate that. Given that the path to wellness has already been laid out in North America's first robust wellness strategy and given that Alberta enjoys a rich history of leading the way with wellness programs for Alberta students and those in the workplace and our seniors, can the minister please tell us: what specific wellness programs will the minister invest in, utilizing the tax increases, that is, for both tobacco and alcohol?

Ms Hoffman: Thank you very much, Mr. Speaker. We are absolutely committed to making sure that we have a sustainable health care system. That includes having access to cessation supports like calling 811 and being able to talk to somebody around how you can access different supports in your own community. That's obviously a really valued investment, and I find a relation because members opposite proposed cutting significantly from the budget . . .

An Hon. Member: Chaos.

Ms Hoffman: . . . and did want to pursue a situation that would result in a great deal of chaos. We're committed to providing stability, and this revenue will help us do that.
Thank you, Mr. Speaker.

Mr. Rodney: Unfortunately, Mr. Speaker, I didn't hear any specific wellness programs she'll invest in.
Let's try this for the final question to the Health minister. Given that the ministry is charged with an obligation to help create a healthy environment for Albertans and given the proliferation of ecigarettes and related products, which are both condemned as public health risks and praised as smoking cessation aids, and given that Albertans, you know, could become subject to a patchwork of e-cigarette legislation, can the minister please tell us: what specific products, locations, and strategies is the minister proposing regarding the restriction of the use of e-cigarettes and products in Alberta?

The Speaker: The Minister of Health.
Ms Hoffman: Thank you very much, Mr. Speaker. With regard to the specific line item on wellness and how that'll be used in the upcoming budget, I'd be happy to discuss that and will discuss it with the hon. member when we debate the budget estimates in the coming weeks. In terms specifically of e-cigarettes I'd be really happy to hear recommendations from the hon. member and any members of this House on ways that we can ensure safety and wellbeing for all Albertans, including youth.
Thank you.

*Youth Addiction Treatment Services*

November 4, 2015

**Ms Jansen:** Thank you, Mr. Speaker. It’s crucial that government provides the supports necessary to address problems caused by drug addiction. One of the supports that was introduced to help support young people was the protection of children abusing drugs program created in 2006 by our government. PCHAD allows for youth to be mandated into a court-ordered 10-day detox and stabilization. It was a huge achievement. To the Minister of Health. After that initial 10-day period families are often left with little choice about ongoing addiction treatment. With the rising fentanyl crisis and increased cases of relapse, will you commit today to a meeting with stakeholders and affected parents on this issue?

**The Speaker:** The Minister of Health.

Ms Hoffman: Thank you very much, Mr. Speaker, and thank you to the member for the initiative she's shown in the past and continues to show today. We know how devastating addiction issues can be for families. I have met with a number of different stakeholders, and if the hon. member would like to propose a meeting with an additional group of stakeholders, I am certainly welcome to receive that invitation.

**Ms Jansen:** I would, and thank you for that. Mr. Speaker, after an initial 10-day detox many young people still don't have the ability to make sound decisions about their recovery path. To the Justice minister: would you be willing to reevaluate PCHAD and examine whether a mandated longer term solution might be needed?

**The Speaker:** The hon. Minister of Justice.

**Ms Ganley:** Thank you, Mr. Speaker, and to the member for the question. This is of course a critical issue. Youth who are suffering from addictions are a tragedy in our province, and the number of
young people we're losing is an absolute tragedy. I'm happy to review our programs to see what's necessary and to hear from people and make the best evidence-based decisions we can on what's best to support our young people.

Ms Jansen: Thank you, Mr. Speaker. Finally, to the Minister of Infrastructure. We know now that you've taken away $13 million in funding for addiction and detox beds, putting it into a $4.4 billion slush fund. When will you decide if Alberta's addicted kids are important enough to put it back?

The Speaker: The Minister of Infrastructure.

Mr. Mason: Thank you very much, Mr. Speaker, and thank you for the question, hon. member. I don't think you've quite framed the question accurately. In fact, all of the detox centres that were specifically contained in the capital budget are still in the capital budget. There was uncommitted money for that purpose that we have now moved into the uncommitted fund that you're talking about. We'll make decisions in due course about the priorities, and that includes addictions, that includes making sure that the health of all Albertans is safe, among all other priorities that we have to deal with.

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

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**BRITISH COLUMBIA**

**Immunization Day**

November 5, 2015:

D. Eby: It's a pleasure to rise and recognize a constituent of mine that's on the premises — Dr. Charles Webb, the president of Doctors of B.C., who is here for immunization day at the Legislature.

I understand that Dr. Webb had the option, as a young man, of choosing whether to go to law school or medical school. Four weeks before going to law school, he decided to go to medical school — a great advantage for the province of British Columbia, a loss for the Law Society of British Columbia, but I think we're in net benefit.

Dr. Webb does a wonderful job for the province. I want to recognize him and his wonderful family for all their work in our constituency and for the province.

Hon. T. Lake: I want to join my colleague in welcoming Dr. Charles Webb for immunization day. Earlier today many of us, including our Parliamentary Secretary for Seniors and, also, the member for Cariboo-Chilcotin, had our flu vaccines.
Also with us in the precinct to do that this morning was Dr. Daniele Behn Smith, who is our aboriginal health adviser — really appreciate having her on board, on our team — and, of course, Dr. Perry Kendall, our provincial health officer, and David Pavan, a past president of the B.C. Pharmacy Association.

I just want to remind all members to ensure that their constituents know the importance of getting the flu vaccine.

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**ONTARIO**

*Reducing Smoking*

November 2, 2015:

**Ms. Sophie Kiwala:** My question is for the Associate Minister of Health and Long-Term Care. I know this government has worked tirelessly to achieve the goal of making Ontario smoke-free, and I know first-hand that we have come a long way towards making that goal a reality. Smoking prevalence has decreased from 24.5% in 2000 to 17.4% in 2014, representing 408,257 fewer smokers. However, the use of tobacco products remains the leading cause of preventable disease and death in Ontario. More than two million Ontarians still smoke, and thousands of youths still take up smoking every year.

While we have made great strides in reducing the number of Ontarians who take up smoking, Mr. Speaker, through you, I’m very interested in finding out how we are going to reduce the prevalence of smoking among Ontarians.

**Hon. Dipika Damerla:** I would like to begin by thanking the member from Kingston and the Islands for the question. She is absolutely right: We need to continue to drive down smoking rates in Ontario, and I appreciate the opportunity to speak to some of our initiatives.

To accomplish the goal of reducing smoking in Ontario, my ministry has invested over $340 million since 2007-08 for tobacco prevention, protection and cessation. We have listed smoking cessation drugs on the Ontario Drug Benefit Formulary and expanded access to nicotine replacement therapies for those undergoing addictions treatment.

While it is true that we have the second-lowest smoking rate in Canada, as I said earlier, there is still more work to be done. That is why effective this January, our government bans tobacco sales on university and college campuses and prohibits smoking on playgrounds, sport fields and restaurant bars, and we are moving to prohibit the sale of all flavoured—

**The Speaker (Hon. Dave Levac):** Thank you. Supplementary?

**Ms. Sophie Kiwala:** I commend the minister for all her hard work and dedication to this issue and for sharing this great news, but I do wish to touch upon the last point that the minister made about kids taking up smoking or other bad habits. Research shows that the younger a person who starts smoking, the more difficult it will be to quit later in life, and many start to smoke in their teenage years. In 2011, smokers continue to report that on average they
smoked their first whole cigarette at the age of 16 and started smoking regularly at 18 years of age.

Electronic cigarettes, or vaping, have been identified as emerging trends in Ontario. As a mother, I was concerned to see very young teenagers using these products, and I wonder if e-cigarettes are dangerous for our children and youth. Can the minister fill us in on how the Ministry of Health and Long-Term Care is addressing these concerns of parents?

**Hon. Dipika Damerla:** I’d like to once again thank the member for her question, and to take this opportunity to thank her for all of her work on the e-cigarette file that she has done so far, especially in committee last year. Thank you.

Our government is taking a responsible and cautious approach to protecting Ontarians, especially our youth, from any potential harm by regulating the sale and use of e-cigarettes. Specifically, we propose to ban the sale and supply of e-cigarettes to anyone under the age of 19 and to prohibit the use of e-cigarettes in certain places where the smoking of tobacco is prohibited. To be clear, our approach does not ban e-cigarettes or vaping, but what it does do is to regulate e-cigarettes and vaping.

**Debate on Bill 122**

November 2, 4, 5, 2015: