

Standing Committee on the Alberta Heritage Savings Trust Fund Act

9:06 a.m.

[Chairman: Mr. Ady]

MR. CHAIRMAN: I'd like to call the meeting to order and welcome the Hon. Roy Brassard, the minister responsible for Seniors, and his department people. The minister is before us this morning to discuss the Alberta Family Life and Substance Abuse Foundation, which is funded out of the Alberta heritage savings trust fund to his department.

Prior to inviting the minister to make some introductory comments, we do have some business having to do with scheduling. It was scheduled that the Hon. Fred Stewart would appear before us on November 6. We're giving some consideration, hopefully for the convenience of the committee, to moving that up one day to the Thursday. Friday is not a good day for most committee members. I wondered if it would be more convenient. The minister has consented to move it to 10 a.m. on the 5th, as opposed to the 6th. If there's consensus within the committee, we would move to do that. I hesitate to do it without the Liberal caucus being here. Could I have a show of hands? All those in favour of moving it to that day? Thank you. Based on that, I'll move to have the date moved to November 5, so we'll run from 10 a.m. till noon.

We have a further difficulty. As you recall, the Minister of the Environment is not eligible to appear before our committee because of his involvement in the leadership contest, and the acting minister is away on the date that he was scheduled. The best the Chair can offer at this time is to try to reschedule some date in the future, perhaps November 17 or 18. We won't be able to confirm that before next week, so you may just mark those two dates as tentative. It would be 9 o'clock on whichever of those days we're able to schedule, and it would be an acting minister that would appear.

I would remind the committee of the recommendation deadline. It will now be the 5th for all ministers appearing up through today. I would also advise you that there has been a report submitted to the Chair covering the investigative visits to Prince Rupert and Lloydminster, and the Chair will endeavour to have those copied and circulated to members of the committee before we adjourn today. If not, I'll have them available for you on the 5th. I believe that takes care of the business of the meeting.

We'd now invite the minister, if he chooses, to make introductory remarks, give us an overview of the family life and drug abuse activities during the last year, and then we'll open up for questions from the committee.

Mr. Minister.

MR. BRASSARD: Thank you very much, Mr. Chairman, and good morning, ladies and gentlemen. As mentioned, we're here to talk about the Alberta Family Life and Substance Abuse Foundation. In that it had just barely started last year at the time when the expenditures of \$400,000 and some were incurred, today we'll probably talk as much about where we're going as where we've been. I've brought along Dr. David Hewitt, who is the foundation's newly appointed executive director, and I'm going to ask him if he will add to my comments later on. Also, to my far left is my executive assistant, Leslie Ainslie.

The Alberta Family Life and Substance Abuse Foundation is a relatively new initiative to deal with our ongoing battle with substance abuse. The objective, of course, is to provide funding for research, development, and evaluation, with the long-term intent being to strengthen Alberta families through the discovery of new

knowledge and application of that knowledge. As I mentioned, it was established last year through legislation, and the formal appointment actually took place in March of 1992. The research and policy development required to establish the direction, the parameters, and the approach that will guide the foundation's work have just been completed.

I don't think we need to talk a great deal today about the dreadful toll that substance abuse takes on Albertans every year in terms of death, illness, injury, related crime, and the emotional pain to the families and friends of substance abuse victims. We're making a lot of headway in some areas, but we still have well over 30,000 admissions to the AADAC programs every year.

Alberta families, as we know, form the cornerstone of our society. While the family is changing, however, from some of the traditional images, it still provides Albertans with many of the skills and values that sustain us through life. Our goal, then, is to strengthen the family unit by studying the problem of substance abuse and its relation to family life. We're designed to support the development and evaluation of new education and public awareness programs in family life and substance abuse. We're looking at innovative basic and applied research projects on the relationships between family life and substance abuse and other innovative studies in the field of substance abuse itself to hopefully develop a comprehensive information base on substance abuse and how it impacts on the families here in Alberta.

We're going to work very closely with AADAC, our Alberta Alcohol and Drug Abuse Commission, the Premier's Council in Support of Alberta Families, other departments such as Health, Family and Social Services, Education, and the Solicitor General to make sure that we have a co-ordinated effort in strengthening families by addressing the research, prevention, treatment, and evaluation aspects of substance abuse issues. To make certain that we have good communication particularly between AADAC and the Premier's council on the family, we have designated members from each of those two boards on the commission.

As I mentioned, families are the foundation of our province, yet they are ultimately the most adversely affected by substance abuse. New methods must be found to prevent and treat substance abuse in ways that will address the overall goal of strengthening those families, and hopefully the foundation will help accomplish that objective. I certainly have the utmost respect for the work being done by AADAC. It's been in business for 41 years now, and they provide excellent programs and services. But we still have new programs popping up all over, and we still have medical doctors in this province referring people to the States because they feel that that's where they can get the best treatment. We really need to take a good, hard, honest look at what we're doing ourselves to make absolutely certain that we're keeping abreast of what is happening in this whole area.

The Family Life and Substance Abuse Foundation is not in the program delivery game however and will not duplicate or overlap with AADAC's service delivery role. Rather, the foundation is going to complement AADAC's work by looking independently for new ways to meet the challenge of preventing and treating substance abuse. We're looking basically at three groups of individuals. We have the initial experimenter, if you will, generally school-age children; the casual user, and that probably falls into the area of marijuana and other substances that are used on a casual basis; and then of course the addicted, confirmed user. Our number one element of abuse, if you will, is still alcohol, followed by marijuana. Prescription drugs are hard on its heels. There are others, but what we're getting into more and more is a combination of any of the three. We call them designer drugs. They're sophisticated and easy

to produce, and they are impacting on our society in a very significant way.

9:16

As I mentioned in my earlier comments, the 1991-92 fiscal year was really the development year, and our expenditures of \$424,000 hardly made a dent in our \$6 million budget. The remainder of that amount was returned to Treasury, and we started out in the 1992-93 year with a \$5 million budget. We have already approved a number of grants, and in response to any questions you might have about those grants, I'm going to ask Dr. Hewitt to respond to the nature of the grants. We are off and running, and it looks like we're going to make some fairly significant headway with the grants that have already been approved.

Mr. Chairman, I know that's a very brief overview. As I said, we've just barely got started, so I haven't a whole lot to report on, but I'd be happy to take any questions you might have.

MR. CHAIRMAN: Thank you, Mr. Minister.

The Member for Stony Plain, followed by Lloydminster.

MR. WOLOSHTYN: Thank you very much. I'd like to welcome the minister and his staff here. We realize that this is just the very inception of the program, and you really haven't had time to bring results to this committee. You're really just starting out.

However, I'd like you to comment on some of the directions. I don't have difficulty with this being a research foundation. I do perhaps have some concerns that we might be researching too many different things independently and that there is a lack of a co-ordinating body, which again isn't necessarily your problem here. You referred to alcohol as being one of the major problems, and I certainly wouldn't disagree with that statement. The problem I have is that I think addiction -- and I hope you're looking at research in this area -- to a substance, by itself, good or bad, is a disease. It's a transferring of what you are addicted to that creates the problems as we go through life, and this leads me to what I would say fits right into your mandate. It's a very serious problem, and it's a very serious family problem, and that is: are there any projects or any research that are going to be undertaken on how to combat the smoking of cigarettes by young people, publicly or privately? I'm going beyond just a sale to a 16-year-old. I'm talking about seeing six- and seven- and eight-year-olds lighting up all over the place. To my point of view, without research to back it up, it's a hunch that it's step number one, and where it will go through their lives, I don't know.

MR. BRASSARD: I don't think we have a program designed specifically to research tobacco, but I'm going to ask Dr. Hewitt, who's got about 17 years experience in the field of addiction, to perhaps respond to this. Could you help us out, doctor?

DR. HEWITT: The foundation, I believe, will deal with tobacco. It is an addictive substance, so it should be dealt with by the foundation. We currently have a proposal from an agency to evaluate some of the prevention efforts that are occurring in the school system now to try and get a better understanding of whether they're working or not. That proposal is under consideration by the foundation board, and they'll be making a decision on it in about a month.

MR. WOLOSHTYN: At any rate, I'm glad to see that you've got that thought in mind. However, if I could offer a comment or two, I would like it to be specifically directed at the very young children. You know that the stats bear it out that by the time girls are 14 or 15,

most of them are already hooked. They don't get hooked on their 14th birthday; they start a lot earlier. With respect to the schools, I would submit to you that perhaps they have an archaic don't smoke program and no time in the curriculum to implement it. That would just be an observation I would have from my past experience. I do commend you on that direction.

Again, I don't have a problem with the research direction, but what I would like to see -- and I saw this lacking in the comments, Mr. Minister. I found a very big void in your comments as to what would become of your research. Although I agree with your not being an implementing agency, I still think there should be a direction given that if your research does in fact identify areas, as it well could -- let's take for example my pet peeve: smoking and young people -- that schools could and should be doing more, are you going to have the clout through your foundation to influence Alberta Education to start an implementation program? Obviously if it's in the schools, they're the ones who should spearhead the implementation.

MR. BRASSARD: It's safe to say, Mr. Chairman, that everyone certainly around this table or certainly in government is anxious to come up with ways of combatting abuse of any substance regardless of what it is, whether it's tobacco or whatever. From my conversations with the Minister of Education I know that he is very, very anxious to participate and co-operate in the results of any such findings from our research.

I'd also say, as I mentioned earlier, that we've got a commission called AADAC that has been exceptionally effective. It's world recognized. They are constantly trying to come up with new methods and new ways of dealing with addiction, and they would be very, very co-operative in implementing any of the positive research we come up with. I don't believe that acting upon the findings of any of the positive research will be a problem because we're all out to accomplish the same goal, and that is to eliminate the dependency on whatever substance.

Back to your earlier comments about school age. You mentioned the ages of 12 and 13. We find that that is almost too late to attempt to identify and direct any effective programs. We feel that it starts closer to five and six years of age. We don't know exactly how we get a handle on that, and that's some of the research that hopefully will give us better direction.

MR. WOLOSHTYN: Now, in order that this council doesn't become a flash in the pan and sort of go off on the back burner -- and these things have a tendency of happening periodically, especially in this particular time in Alberta's history when there are slight political turmoils going on -- do you have a set of goals of any description by which you can measure the effectiveness of the council in order that a year down the road when you come back to this committee, as hopefully you will, you can outline to the committee and to the public that here are the areas that we wanted to go and here were our goals and here's how far we came down the line? Do you have anything of that nature laid out at this point in time?

MR. BRASSARD: Well, I'm going to ask Dr. Hewitt as the brand new director who doesn't start until tomorrow if he's given any direction. I expect that we will have an evaluation process. Certainly we've just barely got off on our inauguration kick with our grants, so it's really premature and hypothetical. Are you thinking anything along the lines of evaluation, doctor?

DR. HEWITT: Actually the foundation board has already started to think along those lines. In some of their early meetings this summer they began working on a mission statement for the foundation. They

began working on a global goal for the foundation and to also subdivide that global goal into more manageable kinds of goals. So the foundation board itself is very concerned about being able to demonstrate that they are doing something positive and that they have something in place to measure it. So we'll be working with their initial ideas about mission and goals and refining that. Yes, we intend to do that.

MR. WOLOSHYN: Thank you very much, Dr. Hewitt, and all the best in your new role that starts tomorrow.

MR. CHAIRMAN: The Member for Lloydminster, followed by Edmonton-Calder.

MR. CHERRY: Thank you, Mr. Chairman, and good morning, folks. Can I begin by saying that the interest I have on this subject is very dear to my heart being the chairman of the committee that went around the province in 1989 listening to what the people had to say. This is 1992, and basically we haven't done a great deal yet as far as the foundation is concerned. It was a 1989 promise by the Premier then on the election trail.

9:26

One of the things we found as the committee for the foundation was that people out there were wanting something done, and something done quickly, with the young people. I realize what the purpose of the foundation is, but at the same time are we really doing what the foundation has been set up to do? As you know, a \$200 million endowment was promised for this foundation. My question, I guess, is: what have we done up to this date? Is it strictly organizational, or has anything basically been done as far as research or finding new ways or demonstrating new ways that we can reach out and get hold of these young people? I believe it's the young people that we have to reach out to, not the adults. It's too late now. I always remember this, because when I was in Medicine Hat, one person came to the mike and said: "You know, you've destroyed the last three generations. Are you going to destroy the fourth?" So that's my question, Mr. Chairman. What is happening anyway?

MR. CHAIRMAN: Mr. Minister.

MR. BRASSARD: You're right. We really have just got started. It's mostly been organizational up to this point, and certainly the period that we're talking about, which is '91-92, has been totally organizational. However, we have just recently awarded I think 10 research contracts. We're working on an education and an awareness program as well, but I think two of those projects, the research projects that are referred to, deal specifically with youth. Perhaps, doctor, you could give us an overview of who we're looking at in those two specific projects.

DR. HEWITT: In the current fiscal year, we've just started, so we've awarded eight grants and two of those are focused on youth. One of them is to the Calgary Distress/Drug Centre, which has a variety of programs to provide information to youth, to provide crisis intervention and referral. They have had quite a fragmented program, and we have given them a grant to bring the various parts of their program together into one so that it can be more efficient and then to evaluate what the impact of that program is. They spend a lot of time doing crisis intervention, doing very early counseling with young people who come in, doing telephone information, and also helping them to get into a treatment system. That one's focused on youth.

The other one is to AADAC. AADAC has a comprehensive treatment program for adolescents that includes outpatient counseling in various locations in the province and two intensive treatment centres, one in Edmonton and Calgary. We've given AADAC a grant to evaluate the effectiveness of those programs, so the money will be used to do evaluation of current activities -- are the right people getting into the program; are the right kinds of things being done? -- and also to follow the young people who've gone through the treatment program after they've completed it to see what kind of effect the program had on them.

MR. CHERRY: My other question. I know you will possibly be working closely with AADAC itself, but I do believe that -- I'll just give you this example. The "Slim" Thorpe Recovery Centre out of Lloydminster has a committee put together that has done a great job there on the campus of Lakeland College and also in the high school. Now, that's all volunteer. They basically once a year get the young people and the parents and everybody who wants to come for an evening, and they have a good speaker. It's a very educational evening. Would one of the jobs of the foundation be to make sure of that? I still believe it's the young people we have to get at. It's not as much the older ones; it's the young ones. Perhaps grants could go in that direction, to ensure that those young people are very much aware of what's happening and what happens.

MR. BRASSARD: I agree, Mr. Chairman, that the young people are the ones that we have to reach. There's no question about that. But I don't think we can just walk away from the older people who are involved in the abuse programs right now either. There's a cause and effect here that takes place, and I think that we have to be aware of that. Certainly we are looking at a lot of programs for the young people, and that's going to be a major part of our focus; there's no question. We mentioned earlier a program that we were looking at in the schools and so on and evaluating programs we have on the go. One of the things that you touched on was the volunteer effort in this whole field of substance abuse. There's a lot of it. Part of our efforts are going to be to try and co-ordinate a lot of those activities and make sure that we're all heading in the same direction and working towards the same goal in a very organized manner.

I appreciate your comments.

MR. CHERRY: Thank you.

MR. CHAIRMAN: The Member for Edmonton-Calder, followed by Calgary-Fish Creek.

MS MJOLSNESS: Thank you, Mr. Chairman, and good morning. I'd just like to get a little bit into the fact that I know that in your opening remarks you talked about working very closely with AADAC. I think that's very important. I don't think anyone in here would dispute how important research is. We've been on the record, however, stating that we're a little worried that the foundation is duplicating a lot of the services AADAC is doing, so I am very pleased that you are working closely with AADAC. I know that there are other departments doing research as well, like Occupational Health and Safety, and I'm wondering if you've got any contract with other departments. Even Health, for example, may be doing research into some of these areas; I'm not too sure. I know that Occupational Health and Safety was doing some research into substance abuse in the workplace, which has an impact on the family. Are you working with other departments as well at AADAC?

MR. BRASSARD: Dr. Hewitt, would you like to respond?

DR. HEWITT: We will be working with Occupational Health and Safety in the heritage grant program. There is a health innovations fund within the Health department. We will be working with them; also, I think, with the heritage medical research fund. There are things that I think we can do together. The foundation board -- and certainly I am -- is very committed to doing things in co-operation with others. I think if we are able to jointly fund projects, we can have better projects done and we can make use of the results of those from a variety of sources.

The other avenue that helps co-ordinate this kind of research is there is a committee that is supported by technology and research that brings together the directors of various research programs in government to meet on a regular basis, to share information about what they are currently funding, to clarify their own particular roles, and to see where they could co-operate with each other on projects.

MS MJOLSNESS: Thank you. The minister mentioned in his remarks that the foundation was not into program delivery. Of course, that is the primary role of AADAC. I'm just wondering. We know that you can do all the research in the world -- and I do agree it's very important -- but unless it's able to be transferred into the community or onto the front lines, it's not all that helpful. We know that AADAC in their program delivery areas have been cut back in their funding, and I'm just wanting to ask the minister if he sees this as a problem at all: on the one hand we're funding research, and then on the other hand it's not able to be implemented on the front lines as well as it could be.

9:36

MR. BRASSARD: No, I don't. As I mentioned earlier, we've been in business in AADAC for 41 years, yet when I go into some of the detoxification centres, I am absolutely amazed at the recidivism that takes place in those programs. I asked one worker how often they saw some of the people that enter their program, and they said between 65 and 70 times for some people. I think it's critical that we take a look at the program delivery that we have in place, and not just what is lacking but the way we're doing things, and make absolutely certain that we're responding in a very innovative way to the changing scenario out there, just to simply reduce this recidivism. If we could reduce the 65 or 70 visits to half that, we could obviously deliver services to twice as many people. So I don't see a duplication. I think AADAC is certainly anxious to find better ways and different ways, and we can help them do that through the foundation.

I don't think there'd be any problem at all in the implementation of those new designs for their programs and everything. So I see it as a very co-operative and collaborative approach rather than any kind of a duplication. If we can help any of the program delivery agencies including AADAC be more efficient, obviously we can get more mileage out of our invested dollars, and hopefully then we can extend the money that they have to be applied to more people. So I feel it is a very supportive role.

MS MJOLSNESS: Thank you.

MR. BRASSARD: Perhaps Dr. Hewitt . . .

DR. HEWITT: May I supplement?

MR. BRASSARD: Please.

DR. HEWITT: The foundation is not going to deliver service; you're right. The foundation is very committed to helping frontline services do a better job. I want to give you one example of what

we've just funded, which I think reflects that commitment to helping. There's a treatment program in High Level called Action North Recovery. They have developed a new program for treating native women who come from the small communities around High Level. We've given them a grant to evaluate that program, and the evaluation will consist of looking at what the barriers are to women coming into the treatment program from their own community. What kinds of things interfere with them actually getting in? What kinds of things encourage them or support them coming? Secondly, when those women go back to their home communities, to look at what kind of impact they have on their own communities. By looking at those kinds of variables, the program itself at Action North Recovery can modify its program, make it more effective to try and help more in a better way.

MS MJOLSNESS: Okay. Thank you. That's helpful.

Mr. Chairman, my last supplementary. I wanted to ask about the treatment programs for youth. I know some comments have been made earlier. I know there are a number of youths that in the past have gone to the United States to get treatment, and I also know that Alberta health care quit funding them. There's no reason why we can't treat them, I believe, right here in Alberta. You talked about the foundation assessing the effectiveness of programs, but I'm wondering about the need throughout the province, if in fact the need is being met with all the young people that may need the treatment programs. Are there waiting lists in certain areas of the province? What I'm asking is: are the treatment programs sufficient to meet the need?

MR. BRASSARD: Well, Mr. Chairman, we are expanding the role, particularly in certain areas. One of the things that bothered me with the U.S. treatment programs: their success seemed to be very dependent on a secure environment. Literally you were locked up until you got past your obsession with whatever substance you were abusing, but then after that period of time you were returned right back to the environment that created the problem in the first place. It doesn't seem like an effective way of dealing with the problem. Other agencies have attempted to address that. AADAC certainly has.

I'm going to ask Dr. Hewitt if he has any comments, because, as I say, he's been in this 17 years and saw a great deal of evolution over those years.

DR. HEWITT: In terms of need, I think that the role of the foundation here would be to consider at least supporting studies that would look at assessing the need and whether the need is being met. The foundation right now is only in a position to look at proposals that are submitted by outside groups; we're not far enough along yet to actually initiate things on our own. So if there are community groups or agencies who want to examine whether there is a greater need than there is service, then I think I would like to see them submit proposals to do that. The foundation would give them full review and consideration.

MR. CHAIRMAN: The Member for Calgary-Fish Creek, followed by Ponoka-Rimbey.

MR. PAYNE: Although the people of our province recently rejected the all-Premiers unity agreement, I think there is widespread if not unanimous support . . . [interjections] I'm waiting for you to call these guys to order, Mr. Chairman.

MR. CHAIRMAN: Order. Order. [interjection] Order.

MR. PAYNE: Even though here in Alberta the unity agreement was rejected, every single Albertan I've talked to -- every, from the right-wing dinosaurs to the left-wing red Tories, all of them -- is fully supportive of the provision in the unity agreement that would force the federal government to shut down 12 federal departments that duplicate or overlap departmental functions in the provinces.

Following up on the question raised by the Member for Edmonton-Calder, I share the concern over the risk of this departmental or program operational overlap. I'm encouraged by some of the earlier responses which acknowledged that potential risk and which indicate an interest in developing mechanisms and procedures to reduce that overlap. I have to be honest with you, Mr. Chairman; the people I represent and I personally are very sceptical and yearn to be reassured that there won't be this kind of overlap.

Now, the minister twice in his opening remarks referred to -- I believe his words were that we're working on an education and awareness program. Obviously, I'm supportive of an awareness program, but my concern is: do we or do our kids six months from now on a Monday see an AADAC television commercial, on Wednesday hear a foundation radio commercial, on Thursday see a magazine ad from AADAC, and on Friday a newspaper ad or another commercial from the foundation, all designed to promote awareness of these issues? Perhaps I could just leave that as a question, and then I'll come back with a sup.

MR. BRASSARD: I think that's a very valid concern. I think that was a concern that has certainly been first and foremost in our minds when we were structuring the foundation simply because we don't need more of the same. Rather, we need a very constructive and exhaustive look into the ways we're delivering programs and how we can do that better. We don't see ourselves in the foundation duplicating AADAC's efforts in any way, shape, or form. It would be wrong. We don't see any of the kind of proposal that you're referring to where AADAC and the foundation would literally be competing for that abuser in the workplace.

I'm going to ask Dr. Hewitt again, because he has already done some preparatory work in this area but also has experience with the programs that AADAC have used in the past, to just give us an idea of how we're going to avoid that kind of duplication and misunderstanding between the two programs.

DR. HEWITT: I think the best way we can do that is for the foundation to provide funding to agencies like AADAC or others to actually conduct such education programs. In that way they're consistent with what AADAC is already doing, and the foundation isn't going out and putting something new on the air. So I would see the foundation being in partnership with AADAC or other agencies to produce those kinds of public awareness programs rather than doing it independently.

9:46

MR. PAYNE: Well, Mr. Chairman, I'm certainly reassured by that indication of an interest in co-operating and co-ordinating those kinds of public education efforts.

Mr. Chairman, the minister indicated in his response to my first question that we will not compete for "that abuser in the workplace." I guess my initial concern was for that competition for the abuser in the workplace, but my greater concern is the competition inside government. I was a senior civil servant for four years, and during that period of time I was struck by the amount of time and commitment and energy that's devoted to turf protection: fierce competition for program dollars, fierce competition for program policy approval. It's the in-house competition that concerns me as much as the marketplace competition. I wondered if the minister or

his officials could be equally reassuring on the potential for in-house conflict, in-house turf competition, and so on.

MR. BRASSARD: I think I could point to another program that has been very effective that in some ways has a lot of similarities. I refer to the Premier's Council on the Status of Persons with Disabilities. This agency was set up basically to advocate on behalf of various people within the community and has directed a lot of their concerns and questions to government and in many ways has forced government in government duplications to kind of refine what they're doing and bring it more on stream.

I see much the same cause and effect taking place in this instance, where the foundation is almost at arm's length from what is happening in agencies of our own like AADAC but also the workplace, social insurance, and others. Hopefully they're going to bring that same kind of perspective and introspection to what we're doing. So I see it operating almost more as an independent freelance that is coming up with new and innovative ways of doing things better and hopefully reducing some of the very duplication that you're talking about.

MR. PAYNE: Mr. Chairman, my final sup. I hope you'll regard it as appropriate. I would just like to ask the minister to comment on how feasible or how difficult it would be, in fact, to bring together as one organization the resources and the people in the programs and the funding of the foundation and of AADAC and possibly of the occupational health and safety heritage program. I'm just asking: from your point of view, is it feasible, is it doable, is it practical?

MR. BRASSARD: To operate as one unit?

MR. PAYNE: Yes.

MR. BRASSARD: Well, I think in that case we would simply have put this \$5 million into AADAC and asked them to do more of what we were doing and do it better. What we're asking for the foundation is to have them challenge AADAC in what they're doing and, indeed, come up with a better way of dealing with this whole area of abuse. I think it is not simply more of the same that we're looking for, and I don't think bringing two or three departments together and just saying, "Work on this," is an answer. Rather, having an agency, as I said, at arm's length taking a good look from a research base at the way we're delivering programs has got to bring more efficiency into what we're already doing.

MR. PAYNE: I appreciate those helpful responses, Mr. Chairman. Thank you.

MR. CHAIRMAN: Ponoka-Rimbey, followed by Lacombe.

MR. JONSON: I'll pass, Mr. Chairman. I did not have my hand up.

MR. CHAIRMAN: The Member for Lacombe.

MR. MOORE: Yes, Mr. Chairman. To the minister and officials. There has been a great amount of publicity recently around your foundation. One individual, if I understand it, has been saying that it was basically a waste of money, what has gone into it, and it should be done away with. I want to know if those statements out there are justified. Or are they just a publicity stunt? What are they?

MR. BRASSARD: Well, I'm sorry, Mr. Chairman, but I can just simply state quite emphatically that I don't see this as a waste of time or money in any way, shape, or form, or I'd not be sitting here before

you today. The individual who made those comments, if I'm not mistaken, was the individual that put this foundation in place. I do sincerely believe that there were the best of intentions, and I think it's going to turn out to be a very effective tool.

The one thing that has come through loud and clear in my conversations with Albertans as I've traveled the country is that we must do things differently in the future if we're going to survive as a society, as a nation. Things such as the foundation, where we're taking a good, sincere, honest look at what we're doing and evaluating better ways to do it, I think are good investments. I believe we're on the right track. I think it's going to prove to be money very well spent in this area, and I can honestly say that I don't subscribe to the comments at all.

MR. MOORE: A supplementary, Mr. Chairman. Another criticism is that AADAC could do the work just as well. I've listened to you about your co-ordination. I'd like to know if it's a long-term plan or policy of the foundation to build on that co-ordination area between all other areas that are out there in that particular substance abuse section of society so that it is a concerted drive with one goal and all the resources aimed at that goal are not overlapped in waste and duplication. Is that a long-term policy that you're debating?

MR. BRASSARD: Yes, it is. I don't know of one issue that impacts on so many different people in different walks of life as substance abuse. It affects the family. It affects the workplace. It affects almost every aspect of our life. What we have to do is co-ordinate the direction we're going and how we're going to get there. Yes, it is a long-term goal, this co-ordination of efforts all across this province. I don't know exactly how many agencies we have in this province, but I think that if we could just make absolutely sure that we're all doing things in harmony and doing them most efficiently, then the results would be overwhelming. So, yes, it is a long-term goal, and I subscribe to the philosophy that you're developing.

MR. CHAIRMAN: Thank you.
The Member for Stony Plain.

MR. WOLOSHYN: I would request the minister to send through the Chair a list of the projects that are being funded with a very brief description of each, if you wouldn't mind, just for our use.

MR. BRASSARD: I'd be happy to do that, Mr. Chairman. It was in the newspapers, but certainly I think we have a copy of it here. I would ask if your secretary could make copies for the members. I don't mind sharing it with them at all.

MR. WOLOSHYN: Thank you very much.

MR. CHAIRMAN: Thank you.
The Member for Westlock-Sturgeon.

MR. TAYLOR: Thank you, Mr. Chairman, and a happy, snowy good morning to the minister and his assistants. Obviously, he didn't take a walk in the snow this morning.

I would like to pursue a little bit what the Member for Calgary-Fish Creek had. In view of the fact that there have been announcements by some leaders in the election campaign plus the general overall strategy, you might say, of governments today co-ordinating and tightening things up, could the minister let us know, in case this foundation is rolled into something else, whether he has made any long-term commitments that would hurt the taxpayers if they tried to do that in the future?

MR. BRASSARD: I'm not sure if I understand the question exactly. Certainly we've made long-term commitments, and we are putting the mandate in place. I think we've covered this already, Mr. Chairman. For one thing, in that we're just discussing the initial \$424,000 expenditure at this time, I'm not sure that the question isn't premature.

MR. TAYLOR: Well, actually, that sort of leads into the next one. I'm sure that you have a budget idea for next year. Could you give us a peek at the total, not in detail at all?

9:56

MR. BRASSARD: The budget for next year is \$5 million.

MR. TAYLOR: Did you say \$5 million or \$500,000?

MR. BRASSARD: Five million dollars for next year. We have just approved expenditures of \$2.14 million in research projects, and other than for some administrative charges I think the budget is fairly well in place and on track.

MR. TAYLOR: In the commitment to the research projects: are those sort of yearly commitments, or are we committed five years ahead or anything like that?

MR. BRASSARD: Well, as with most research projects they're of varying lengths. I think we have some research projects in the vicinity of three years; some are two. It could very well be a six-month evaluation.

MR. TAYLOR: Any longer than three years?

MR. BRASSARD: Not at this point. I don't believe we have.

MR. CHAIRMAN: Thank you.
The Member for Edmonton-Meadowlark.

MR. MITCHELL: Thank you, Mr. Chairman. I wonder whether the minister could indicate to us what researchers are doing these research projects. Are they Alberta researchers? Are they researchers from outside the province, outside the country?

MR. BRASSARD: Well, I could ask Dr. Hewitt to address that since he was very involved in evaluating the projects, but I think they're all within Alberta.

DR. HEWITT: The foundation intends only to fund projects that are in Alberta, that are being done by people who are in Alberta. Sometime in the future we would look seriously at funding co-operative projects that might be national in scope but that would have an Alberta component to them, and we would be interested in funding the Alberta component. We're very focused on applied research that will help the situation in Alberta.

MR. MITCHELL: Thank you.

What is the research strategy? That is to say: is the foundation emphasizing sort of a biological approach? That is to say: are some people more prone to drug abuse due to physical makeup than others? Or are they looking at sociological factors? What factors are they looking at? Is there a philosophy? Is there a specific perspective that the foundation is pursuing in its research?

MR. BRASSARD: Well, I think we've been over this partially, Mr. Chairman. We're taking a look at basically how these programs affect families and all aspects of families: from the very young children to the husband or wife in the workplace. Dr. Hewitt, could you give just a general overview of the direction of the grants?

DR. HEWITT: The foundation doesn't want to duplicate the kinds of research that are going on elsewhere. For instance, the addiction research foundation in Ontario does a lot of biomedical kinds of research, long-term, very basic research. We're far more interested in applied research that will be useful now, not in the long term. So the focus now is on improving programs that exist, improving services that exist, improving the range of services that are available by trying new things, looking for gaps that exist, and encouraging people to experiment with ways of filling those gaps and evaluate very thoroughly that kind of experimentation.

MR. MITCHELL: Thank you.

Given that a good deal of the duress that families find themselves under in this province relates to family violence in some families, would one of the gaps that this foundation is looking at be the gap in counseling for those who perpetrate family violence, frequently men in the home who, I understand, do not have access to adequate counseling in this province for that problem?

MR. BRASSARD: No. We certainly do recognize the correlation between substance abuse and family violence. There's no question about that. Whether we have a project being considered right now in that specific regard, I don't know. Do we, doctor?

DR. HEWITT: No one has submitted a proposal to date that looks at that kind of area. Right now all the foundation's able to do is accept proposals that are submitted. As I said before, we're not in a position now to initiate research but to look at proposals that have come in.

Along the same line that I think you're talking about, we have funded in the current fiscal year an experimental program with the Jellinek Society in Edmonton. That program is for women and their children who have had substance abuse problems, possibly family violence problems, other kinds of things. We're funding an experimental day program to see if that fills a need, whether it has a positive impact, whether it's an effective way of helping women with these kinds of problems.

MR. BRASSARD: As we move along, too, I think it's safe to say that we will hopefully be directing some of the research that is required and soliciting some kinds of proposals from various agencies in the future.

MR. MITCHELL: Just one of the . . .

MR. CHAIRMAN: Hon. member, I believe your three questions are gone. You've had your three questions. Do you want to go back on the list?

MR. MITCHELL: I'll go back on the list. There's nobody else on the list, is there?

MR. CHAIRMAN: Yes, Westlock-Sturgeon's on.

MR. TAYLOR: Just give him a chance to rest.

Have the minister and the doctor made any evaluation of how many jobs were created by that \$400,000 you've spent to date in

Alberta and how many you expect to create with the 2 and a half million dollar oncoming budget?

MR. BRASSARD: That's a difficult question to answer. Doctor, could you come up with people who submit proposals for research? Other than our executive director -- and I'm sure you have a secretary -- I couldn't be more specific than that at this moment.

DR. HEWITT: The only thing I can say is that we do not fund the salaries of people who submit the proposals, but we will fund people to work on the project itself so that whoever gets the proposal can hire people to work on that project. The budgets they submit will have a breakdown of how they're going to carry out the project, whether it would be to hire a person or hire a firm of some kind or to involve volunteers in it, whatever. As to the exact number of people that might be employed as a result of these funds, I couldn't say now.

MR. TAYLOR: My second question is: is there any project in being or immediately considered to be in being as to behavioral problems from children that are using day care versus those not using day care? To turn the question around: behavioral problems in the home that you wouldn't get in day care. In other words, is there a study of family behavioral problems that may arise or not arise from day care?

MR. BRASSARD: No.

DR. HEWITT: No one has submitted a proposal in that area.

MR. TAYLOR: There's no study in that.

The last supplementary is: we've seen in the Legislature in the last while a bit of a rhubarb on the funding of independent counseling services for juvenile sex offenders. Are there any projects under way that would address the issue of financing counseling by nongovernmental agencies for juvenile sex offenders?

MR. BRASSARD: I think we're talking about substance abuse.

MR. CHAIRMAN: Mr. Minister, aren't you tabling the projects that are ongoing that would answer those kinds of questions?

MR. BRASSARD: Yes.

MR. CHAIRMAN: Earlier in the meeting the minister agreed to table the projects that are ongoing, and that would be available to you.

MR. TAYLOR: I was asking . . . But anyway, he said no.

MR. CHAIRMAN: Okay.

The Member for Edmonton-Meadowlark.

MR. MITCHELL: You know, when I think of a \$5 million budget for research in Alberta into this problem, that's not an insignificant amount of money in an absolute sense, I guess, but when you consider that there must be hundreds of millions of dollars that have been spent on this issue and research into this issue in a country like the United States, you begin to wonder whether what we could do here would have any kind of marginal impact. I wonder whether the minister could indicate to us how this effort is going to actually advance in a significant way research into this problem, which has huge worldwide implications and interest across the world.

MR. BRASSARD: Well, I disagree with the comparison. I think AADAC is recognized not just on this continent but worldwide for its inroads into dealing with substance abuse, and I think we can only expand on that through this foundation. We have enough differences between the two countries that I feel we're unique in many ways, and I don't see what has happened in the States as necessarily impacting significantly on Canada. So I see our research taking perhaps a different tack, but I believe that we'll also be very aware of what's happening elsewhere and take full advantage of that.

Would you agree with that? Do you want to comment?

10:06

DR. HEWITT: Much of the research that occurs in the substance abuse area is quite fragmented in that it's often done within an academic setting. It's often done with very limited funding and no mechanism for putting the results into practice. What I see as being the advantage of this kind of foundation is that the focus is very much on making things work better and being very focused on using the results to help people in this province to deal with the kinds of problems that occur. So I see it as being much more applied, much more focused, and therefore able to make a bigger impact, I think, than a lot of other research foundations have had.

MR. MITCHELL: I'm impressed by that. I guess in order for that to occur there would need to be follow-up programs. So the foundation decides, derives that there is a problem in this way that can be solved in this way; therefore, we need a program. Is there a commitment to funding the results of these, the conclusions and the recommendations that research from this foundation might come up with? Counseling for juvenile sex offenders?

MR. BRASSARD: Well, I think the question is premature in that we've only just now announced the projects that are being put out for research. Certainly we have established, as I mentioned earlier, a very collaborative role with agencies such as AADAC, and they are looking for better ways of doing things and doing what they're doing more efficiently. So, yes, I don't think that implementation will be a problem, to be very honest.

MR. MITCHELL: I'm wondering whether the minister could give us some insights into how it was that this program originated. Of all the range of issues that face families today, of all the range of social problems that confront Albertans today, where did the proposal for this special Family Life and Substance Abuse Foundation come from? I know the Premier suggested that this should be a priority. Had he consulted AADAC? Had he consulted the social services department? Had he consulted academics? Had he consulted his caucus? Or was a decision to do this, when we already had AADAC in place, simply an ad hoc whim of the Premier's?

MR. BRASSARD: Not at all. Mr. Chairman, let me just say that anything I can say in that regard is going to be speculation because I only took over responsibility for this program a year ago. However, having said that, I mentioned earlier that this is the 41st year of AADAC's existence. It's a very, very effective program and, as I said, world recognized. We still, however, have people starting new programs, doing their own interpretation of what's best, recommending people to go to the States, and so on. Very obviously, we need to take a look, a serious look, at what we're doing and to make absolutely certain that what we're doing today is as effective as when it was initiated; it could be 41 years ago. The recidivism in the programs alone would warrant our close scrutiny of the way we're doing things.

So I think it was basically brought on through a recognized need that the world is changing. I mentioned prescription drugs and their involvement. We're almost into designer drugs, where people use combinations of alcohol and prescription drugs. I could get into that whole area, but there's no question that things are changing out there. Keeping abreast of those changes at the same time that we're looking at what we're doing and making sure that we're doing it the best way possible I think brought the program into being.

MR. CHAIRMAN: The Member for Calgary-Fish Creek.

MR. PAYNE: Mr. Chairman, when the committee visited the Alberta Heritage Foundation for Medical Research, we were told that from time to time research is undertaken that has potential commercial implications. That is, it has the potential for revenue generation, either for that foundation exclusively or for the foundation and perhaps private-sector partners that become involved with the results of that research. My question to the minister today is: does he anticipate any research being conducted by this foundation that has similar potential; that is to say, potential for revenue generation over and above that which flows from the endowment?

MR. BRASSARD: We don't at this moment, but I'm going to ask Dr. Hewitt, who has looked at all the proposals so far and has been in discussion with the committee as a whole, whether this has crossed his table. Has it?

DR. HEWITT: Revenue generation hasn't come up yet, but the legislation for the foundation allows the foundation to do that in the same way that the heritage medical foundation can. So should such occasions occur, we would take advantage of them, and the legislation allows us to do that so that the foundation can retain profits.

MR. PAYNE: Mr. Chairman, my final supplemental has to do with that legislative authority to do so. It's hypothetical, but I hope it's appropriate. Let's assume that next year the foundation does undertake some research, let's say in the area of drug addiction, and some devices or some methodologies are developed that have some commercial interest somewhere, a deal is struck, and additional dollars now do flow to the foundation. Would it be the intention of the foundation to roll those additional dollars into their operating dollar needs, or would they be returned to the general revenue fund? I'm not clear what the legislation directs, nor am I clear what the foundation might intend in those circumstances.

MR. BRASSARD: Speaking in very general hypothetical terms, as the question was posed, I would have to state that very likely the revenue generated would be returned to the general revenue fund unless it was associated with a long-term benefit associated with that project. I'm thinking in terms of perhaps some kind of collaboration with a supplier of alcohol, for instance, who would like to participate in some of the research and development of that research and then apply some of the benefits to an ongoing program. It would likely then be transferred over to AADAC or one of the agencies, and they would benefit from that revenue. But as a general statement or response, the revenue generated would go to the general revenue fund.

MR. PAYNE: Thank you.

MR. CHAIRMAN: The Member for Edmonton-Meadowlark.

MR. MITCHELL: Yes, thank you. I was impressed by the point made, I think by Dr. Hewitt, that an effort was going to be made to ensure that there wasn't overlap. I am aware that the Occupational Health and Safety people under heritage trust fund funding have studied the effect of alcohol abuse in the workplace. I'm wondering whether specifically the foundation is going to be addressing that issue or is going to be leaving that issue to Occupational Health and Safety.

MR. BRASSARD: I think that program was funded jointly between Occupational Health and Safety and AADAC, and I think the report was fairly conclusive, was it not?

DR. HEWITT: Actually, AADAC conducted the work, but all the funding came from Occupational Health and Safety. I would see joint projects in the future where both this foundation and the Occupational Health and Safety fund co-operate by jointly funding a project that can fit within both of our mandates and benefit both.

MR. MITCHELL: This is a very specific question. It's been brought to my attention by pharmacists that nicotine patches, which of course address one of the most persistent forms of addiction in our society, cigarettes and tobacco, are not funded under the medicare plan, yet they have been demonstrated to be highly effective in assisting people to break their addiction to tobacco. I'm wondering what the minister's position is on funding nicotine patches under the medicare program.

10:16

MR. BRASSARD: I don't really think that the question's appropriate, Mr. Chairman.

MR. PAYNE: This isn't the Minister of Health today.

MR. MITCHELL: Well, this is an addiction, isn't it?

MR. BRASSARD: As we said, we're taking a look at the cause and effect of nicotine, and we've covered that issue earlier. I'm not sure that you were here at the time. In any event, I would expect that perhaps the patches would come under the review that Dr. Hewitt referred to earlier.

MR. CHAIRMAN: Okay; that concludes the questions from the committee. Thank you, Mr. Minister and the department people you have with you, for the information that you have brought to our committee.

As a point of business prior to calling for adjournment, I'd like to reiterate that we voted earlier to move the meeting on November 6 to November 5, when the Hon. Fred Stewart would appear before the committee at 10 a.m. To make all committee members aware again, the meeting with the Department of the Environment is giving us some difficulty. We're endeavouring to organize that for either November 17 or 18, and it would be at 9 a.m. on whichever of those days is selected, if we're able to organize it for either of those dates. That's the best the Chair can do at this point.

MR. TAYLOR: To the Chair, did you move the Stewart one from November 6 at 9 o'clock to November 5 at 10 or at 9 o'clock?

MR. CHAIRMAN: It's 10 o'clock. You're correct.

If you'll wait just a moment, at the conclusion our legislative clerk will pass out for your use the report of the visits to Prince Rupert and Lloydminster. I'd remind you again of the deadline for recommendations: November 5 for everything up through today.

I will now entertain a motion for adjournment. The Member for Lacombe. All in favour? The meeting stands adjourned.

Thank you.

[The committee adjourned at 10:18 a.m.]

