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| ***Province*** | ***Législature*** | ***Session*** | ***Type de discours*** | ***Date du discours*** | ***Locuteur*** | ***Fonction du locuteur*** | ***Parti politique*** |
| Saskatchewan | 17e | 4e | Discours sur la santé (en assemblée) | 14 mars 1974 | Walter Smishek | Minister of Health | Saskatchewan New Democratic Party |

Mr. Speaker, this afternoon, I want to announce to the people of Saskatchewan some new and extending health programs. But before doing this I want to briefly point out a few of the things that this Budget means to the people of Regina it. Speaker, there is $160 for practically every Regina homeowner in Property Improvement Grants to help pay the property taxes. More money for education, again to keep property taxes down and to add new programs especially physical education and extended driver training programs. The $10 unconditional per capita grant will give Regina almost $1.5 million a year designed to keep our property mill rate down. The five-year $75 per capita grant for municipal capital works will give Regina about $11 million. I hope that this money is used to rejuvenate the old portions of our city and provide services to new areas. An equalization grant will replace the $1.50 per capita police grant. This will mean much more money for Regina. Library grants will be doubled. Improved recreation and tourism facilities for Regina. A museum park complex centered on the Territorial Government Building and Saskatchewan House will preserve our history. It will provide pleasant new public gathering spots. The Government will allocate $1.7 million towards making Western Canada Games in Regina a success. There will be money for use in student employment programs.

Mr. Speaker, the proposals also contains a family income program to supplement the income of working families in the lower income brackets. A family and neighborhood day-care program for our children. More money to support our universities. There are funds for upgrading our hospitals. Free medical and hospital service, a saving of $72 per family and $36 for the individual. A denticare program for our children. New and more money for housing. Assistance for our public transportation system and more, Mr. Speaker.

What this all means is that the Provincial Government will give Regina as well as all the Saskatchewan communities millions of dollars of financial assistance, provide money to keep mill rates on property taxes down and initiate new public programs designed to improve social services and the quality of life.

Mr. Speaker, let me correct the Press story of last Friday's local newspaper alleging a 20 per cent increase in the health budget. Mr. Speaker, I invite the Press to look at the bottom of page 72 of the 1975 or the new Estimates. The Department of Public Health budget for the coming year is $224 million. Last year it was close to $203 million. I make the increase a little over 10 per cent. Mr. Speaker, I realize that our Department is a big spender but to suggest a 20 per cent budget increase is stretching things a bit far. Mr. Speaker, since the Liberals apparently read this story they became so imbued with that figure their faces turned red and they started to holler inflation'. I am quite concerned that some of them might end up with heart attacks, thus increase the cost of medical care, all because of a wrong newspaper story.

Mr. Speaker, I now want to turn to new, improved and extended health programs. Most of us have little appreciation of the cost, the worry, the inconvenience and confusion which must be faced by handicapped individuals in attempting to obtain those aids for daily living which make it possible simply to function. The typic3.1 j!17ice of a wheelchair is $350. Prices can range much higher depending on the added attachments which an individual might require. I have been told that wheelchairs and similar devices are frequently in need of repair and are often costly to service. We realize that the average price of a simple commode is $100 and a patient's lift device is $300 on the average. And these are but a few of the expenses which must be incurred by individuals who have had the misfortune to be handicapped.

I recognize that there are many existing government and volunteer agencies which provide equipment to the handicapped. These agencies are to be commended. The problem, we have discovered, is that each of these government and volunteer agencies have different qualifying criteria before they can service clients. There are so many agencies involved that it is thoroughly confusing, frustrating and inefficient for both the patients and the health workers alike to help individuals who need aids for daily living.

Moreover, we have evidence that some individuals need services which they have not been able to obtain and yet others are unable to afford the devices which are prescribed for them. To meet these needs, we propose to introduce a program called Saskatchewan Aids to Independent Living, abbreviated 'SAIL'. This program will provide an integrated and co-ordinated program for people's needs, such things as artificial limbs, leg braces, wheelchairs, walking aids and other aids to daily living.

The object is to cut through the red tape- substantially reduce or eliminate the costs to the client and provide a follow up rehabilitation program which will assist the handicapped to make the best use of the devices which have been prescribed for them. The 'SAIL' program will provide the needed devices for them, either free or on a loan basis.

Prosthetic and orthopedic devices like artificial limbs and leg braces are individually fitted. They should be retained outright by the individual but will be provided free of charge through the Wascana Hospital and the Saskatchewan Council of Crippled Children and adults workshops in Saskatchewan.

Wheelchairs, walkers, commodes and other aids to daily living are re-usable aids and will be available to clients on a loan basis for as long as a patient requires these medically. The equipment will be distributed through the regional health offices of the Department of Public Health.

Public Health Nurses will visit'SAIL'program beneficiaries on a regular visitation basis to assist them to adjust to these devices, to assess the home environment for making use of the equipment and to follow up the rehabilitation program of the individual. The SAIL program will also provide a comprehensive equipment repair and maintenance service. .

While it will take a little time to organize and make this program operational, $250,000 has been set aside in this Budget, cost of which will be used to ensure prosthetic and orthopaedic devices and to acquire the initial inventory of wheelchairs and other aids to daily living which will be made on a loan basis to clients. By bulk purchasing of equipment, we are expecting to obtain savings of about 40 per cent. The 'SAIL' program, Mr. Speaker, will in fact go far beyond the commitment we made during the last election campaign. Mr. Speaker, braces and wheelchairs will not be provided at greatly reduced cost, they will be provided at no cost at all to beneficiaries under this program.

The need for this program is genuine and great. We cannot deny this program to the handicapped of our province. Mr. Speaker, as a corollary to this program, the March 1973 report of the Task Force on Workmen's Compensation in Saskatchewan drew attention to the need for a more comprehensive occupational rehabilitation program for those who are handicapped but employable. A significant number of individuals who have been handicapped in one way or another can be helped to regain productive employment. However, this requires careful assessment of the individual's physical and psychological limitations and some assessment of the kinds of work that the individual can successfully undertake.

We are providing for the establishment of this special assessment unit which we are calling a work assessment and work conditioning program. It will be located in the Wascana Hospital in Regina and will become operational as soon as certain physical facilities are renovated to house the unit.

This Budget provides $169,000 for the physical facilities of the work assessment unit and an initial start-up operating budget of $30,000 in the current fiscal year. Mr. Speaker, across all of Canada, alcoholism and problems associated with alcoholism are recognized to be one of the greatest health problems to be faced by our nation.

Saskatchewan's Special Committee on the Review of Liquor Regulations has summarized the problem this way, and let me quote: with over 30,000 problem drinkers directly affecting the lives of at least another 100,000 people; with the direct cost of over $17 million; with over half the traffic fatalities involving alcohol; with a high proportion of assaults and murders involving drunkenness; with countless homes being broken up and children's lives scarred by sorrow, let there be no doubt about it, alcohol abuse is one of Saskatchewan's major public

As you know, Mr. Speaker, our NDP Government has committed many resources in an attempt to develop acceptable educational and treatment programs for our Saskatchewan people. Last fiscal year we increased our budget to the Alcoholism Commission to over $1 million. We opened a new rehabilitation clinic in Saskatoon. We increased our grants to the native societies to assist them to deal with the problem disease among the native people of our province.

Recognizing the size and difficulty of this problem, I recently asked the Federal Minister of Health and Welfare what help the people of Saskatchewan might find in workingco-operatively with the Federal Government, particularly for our native people. Mr. Lalondes response was that the Federal Government was likely to spend an additional $1 million per year for all of Canada in an improved alcoholism education program, yet their income from liquor tax last year was over $414 million. Quite frankly, Mr. Speaker, this pitifully small amount of financial support from the Feds astonishes me.

Mr. Speaker, our Government is committed in this fiscal year to spend $2,342,000 in Saskatchewan alone to develop alcohol education programs and to strengthen existing rehabilitation, treatment, counselling and research programs.

When we took office 32 months ago, the alcoholism budget was $635,000. As a start, this year we are increasing the budget of the Alcoholism Commission by $583,000. An additional $167,000 is being provided through the Department of Northern Saskatchewan for the alcoholism rehabilitation centre in northern Saskatchewan.

Mr. Speaker, the Legislative Committee on Liquor Regulations recommended: That the Provincial Government begin an extensive alcohol social-health education program using the mass media and other resources that will foster community involvement.

Our Government has accepted this recommendation of the Committee. We have decided to introduce a unique public education program aimed at making the public aware of the dangers and consequences of drinking unwisely.

Within the Health Education and Information Branch of the Department of Public Health $520,000 has been budgeted in order to initiate this extensive public alcohol social education program. The program will be directed, not towards the five or six per cent of people who are clearly problem drinkers (however, they will not be missed), rather, the program will be directed towards the majority of those people who drink yet who function relatively normally in our society. That is, they function normally until they try to drive with one too many drinks and thereby place the lives of others in danger. Or they become unpleasant at a social gathering. Or they show up drunk for work after a lengthy businessman's luncheon. Or they return home after a night out with the boys and cause marital and family discord.

Mr. Speaker, in other words, this program will be directed at the bulk of the population who use beverage alcohol, but who do not consider themselves as being legitimate targets of the programs of the Alcoholism Commission.

Initially, the objective of this public education program will be:

1. To raise the level of the awareness of the public to drinking patterns which are harmful.

2. To reinforce social attitudes which will have a positive effect in changing such drinking patterns.

The program is intended to make extensive use of the mass media, Mr. Speaker. Since there are no successful examples to follow in this kind of project, the objective of this innovative project will be allowed to grow as experience is gained and as we see results in the program.

This new alcohol education program is a complement to our increased support of the Alcoholism Commission and its treatment program, rehabilitation and counselling programs.

There have been those in the House, Mr. Speaker, who have said that not enough funds are being provided, others may repeat the same argument. May I point out, Mr. Speaker, that almost six per cent of liquor profits are allocated for the alcoholism program. The Legislative Committee recommended 10 per cent.

We have made a long step forward, we have moved a long way towards the optimum objective of the Committee. Mr. Speaker, we are launching a new experiment. We sincerely hope it works. Our biggest problem will be to recruit qualified staff. Mr. Speaker, I ask every Member of this House to join me in supporting this important new effort.

Mr. Speaker, at the last session of the Legislature, I expressed my concern for the deterioration of the state of our provincial cancer service. I proposed amendments to The Cancer Control Act at that time, I appointed a new Cancer Commission and initiated a number of improvements which already have restored the confidence of our citizens in this public service.

I particularly want to commend the new chairman of the Cancer Commission, Dr. Ken Hodgins, for his leadership in reorganizing the Saskatchewan Cancer Control Program and providing the enthusiasm which is allowing this program to progress so quickly. The Commission has undertaken a far-reaching review of the existing cancer programs. A committee has been appointed to examine social and emotional support services to cancer patients. Additional funds are provided also in buying new equipment. We also have accepted the recommendation of the Cancer Review Committee to train radiotherapists, radiation therapy technicians and nuclear medical technicians. Mr.Speaker, I am indeed pleased that we have moved so fast and so well in again restoring the cancer program to what it used to be equipment for the cancer provides for $226,000 of spending $3.7 million on, Mr. Speaker, $150,000 is provided to acquire new clinics. In total the new budget new money and in total we will be the Cancer Control Program.

Mr. Speaker, in concluding I want to give the Hon. Members of the Opposition a little help in understanding this Budget. The Liberals have been attacking our Budget as inflationary.

Our Government's Budget is designed to help Saskatchewan citizens to cope with inflation, inflation which is forced on us by national and international events. Many of the goods which we must purchase in Saskatchewan are imported, either from other parts of Canada or from other countries. Saskatchewan essentially has no control over the inflationary prices of these goods.

Our Saskatchewan Government can help our citizens to cope with this imported inflation. This Budget is full of measures and programs designed to leave more money in the pockets of our people.

Mr. Speaker, I will support the motion, I will not support the amendment.