

# TUNS honors Indonesian minister

BY GINA STACK

## Degree presented at private ceremony

In an unpublicized ceremony, the Technical University of Nova Scotia gave on honorary degree to Indonesia's minister of industry and trade this week.

The ceremony, held at the World Trade and Convention Centre on Tuesday, was attended by federal and provincial dignitaries including Nova Scotia Premier John Savage.

The Halifax Daily News reported that officials were not

pleased when the media became aware of the honorary degree ceremony.

It is not hard to postulate why giving an honorary degree to Tunky Ariwibowo was controversial. Indonesia's human rights record, and involvement with Canadian universities, are extremely controversial issues.

Indonesia has become well known across Canadian university campuses for its controver-

sial annexation of East Timor in 1975. Since the annexation, human rights groups estimate that more than 200,000 people have been killed. The United Nations has yet to recognize Indonesia's takeover of East Timor.

Indonesia's involvement with Canadian universities has proved no less controversial. Several Canadian universities, including Dalhousie, have come under fire for accepting

money from Indonesia's Suharto regime.

In 1994, the University of Guelph lost a \$30 million contract in Indonesia after an independent report commissioned by the university condemned the country's human rights record. More recently, the University of Toronto adopted a policy of not dealing with the Suharto regime.

Experiences at other Cana-

dian universities have yet to affect Dal and the soon to be amalgamated TUNS. Dalhousie currently has five international development projects in Indonesia. TUNS also has projects in the country.

This was not Ariwibowo's first trip to Nova Scotia. He graduated from the Nova Scotia Technical College (TUNS) with a degree in metallurgical engineering in 1960.

# Canada still without regulations for genetic and reproductive technologies

BY RACHEL FUREY

OTTAWA (CUP) — If Canadian scientists wanted to, they could legally clone animals, alter the genetic makeup of humans or even implant an animal embryo into a woman's womb.

Genetic engineering is no longer confined to the pages of science fiction novels and Hollywood movies. It is being practised in laboratories across the country with few federal restrictions or monitoring procedures in place.

Even the cloning of human beings could be a reality in one or two years, predict the researchers who recently created Dolly the sheep, the world's first adult animal clone.

As genetic and reproductive technologies rapidly advance, governments around the world are left scrambling to design policies for procedures that few people, including medical professionals, understand.

The Canadian government's solution was to create a royal commission to look into the ethical, social and political implications embedded in the reproductive technology debate. It recommended the banning of several controversial aspects of new reproductive technologies, and the establishment of a national regulatory and licensing body to oversee the development of genetic technologies in Canada.

That was in 1993.

Four years and \$28 million later, the government still hasn't passed legislation to ban procedures like cloning and sex-selection, let alone set up the regulatory body.

Even the legislation the government has prepared is in serious jeopardy of failing to become law.

Bill C-47, known as the Human Reproductive and Genetic Technologies Act, which would ban 13 controversial practices, has been introduced in the House of Commons but is unlikely to pass during the current session of parliament.

Disagreement over which practices should be outlawed, compounded with the imminent federal election — which will automatically put an end to any proposed legislation that hasn't been passed by the Commons — means the law could be put on hold indefinitely.

Fed up with the amount of

time it's taking the government to enact legislation, Abby Lippman, a McGill University science professor and researcher, is trying to mobilize Canada's feminist network and force the government to implement emergency legislation.

"There's no visible movement by the government," says Lippman. "The government is happy in having nothing happen."

Lippman wants the government to pull out the most alarming elements from the act — including the prohibition of cloning and sex-selection — and incorporate them into the emergency legislation.

She admits her plan has only a slim chance of working.

"Sometimes I dream in technicolour," she says.

Even if Lippman's plan succeeds, the emergency legislation would only scratch the surface in dealing with the host of issues the government has lumped into the genetic and reproductive technologies act.

Besides prohibiting what many see as gross experimentation, the bill also tackles the clinical aspect of reproductive technologies by banning the sale of human embryos, eggs and sperm and disallowing surrogate mothers to accept money for their service.

Violators could face fines of up to \$500,000 and prison terms of up to 10 years.

This prohibition concerns members of Canada's medical community, who want financial compensation for sperm and egg donors and surrogate mothers.

Currently, Canadians can make anywhere from \$40 for donating sperm, to \$20,000 for carrying the embryo of another person.

"We feel it's ridiculous [to ban compensation]," says Clifford Librach, head of the infertility division at the Toronto Women's College Hospital. "This law is so constraining that it's going to hurt a lot of people's ability to have children."

Librach says separate attention needs to be given to the research and clinical elements of the bill.

"Most people don't think it's good legislation but there's not as much controversy on the research part," he says. "[The two elements] deserve separate attention instead of being lumped into a big hodgepodge."

But even within the professional community there is disagreement.

Tim Caulfield, research director of the Health Law Institute at the University of Alberta, is concerned some of the banned research practices could be useful in the future.

"My fear is that this [legislation] creates a chill over useful genetic and reproductive research," says Caulfield. He points to the ban on using embryos for research as hindering researchers' ability to make advances in the area of in vitro fertilization, a process whereby women are surgically implanted with fertilized eggs.

Although they agree the bill is headed in the right direction, women's groups across the country say federal legislation is not the best way to address issues of reproductive rights.

"The courts is the last place [the government] should look. Only when everything else fails do you look here," says Bonnie Patterson, executive director of Planned Parenthood, a national organization that provides education and counselling on reproductive issues.

"Putting laws on the books doesn't imply that things are being controlled," adds Fiona Miller of the Feminist Alliance on Genetic and Reproductive Technologies. "It's a cheap way of doing nothing."

Patterson says the government needs to start concentrating on preventing the causes of infertility at their source.

Among the most common causes of female infertility is sexually transmitted diseases, the most common of which is chlamydia, which can damage the female reproductive system.

"If we start reducing STDs, we'd stop some of the infertility," says Patterson.

Patterson also advocates the implementation of a national policy on reproduction and health. "Other health issues have guidelines and policies, but what about reproduction?" she asks. "[The government] has spent \$28 million on studying the issues, but refused to deal with a national policy."

Besides the absence of a national policy, Canada is also guilty of failing to implement the regulatory body to monitor new genetic and reproductive technologies which was recom-

mended by the royal commission.

Doris Cook, a policy analyst for Health Canada, says the government is committed to passing a second set of legislation which would create the regulatory body, even though they have yet to introduce any such legislation in parliament.

According to Patricia Baird, chair of the royal commission, the government must move quickly to implement the regulatory body. A November article by Baird printed in newspapers across the country called on the government to put the regulatory body in place immediately.

"The bill is only half of what is needed," wrote Baird. "A licensing and regulatory body is the other part of what is needed."

Although there is consensus among women's groups and the medical profession about the need for a regulatory body, the vision each has for it differs dramatically.

The government's plan is to create a body that would issue licenses for acceptable new reproductive and genetic technology practices. The regulatory body would pay for itself by charging a fee to those receiving the licenses.

Caulfield likes the idea. "The regulatory body can respond to social changes. Criminal law is not good at responding to change," he says.

The government's model may please the medical community, but it has sparked concern among women's groups.

"There is a great danger in taking the licensing approach the doctors want," says Miller. "A model that pays for itself serves the people who pay for it." Miller adds that besides issuing licenses, a regulatory body has to restrict practices as well.

Lippman agrees and is adamant that the body be made up primarily of citizens, rather than "experts." Lippman sees the issue of genetic and reproductive technologies as one that affects the entire population and says it must be treated as such.

Although the government may be stalling on its commitment to implement legislation and a regulatory body for new reproductive technologies, it is clear the issue won't go away. As new discoveries and rapid changes in the field of biology continue to widen the range of genetic and reproductive possibilities, many are asking

whose issue this is and who should control the debate.

The government says it wants to protect the public, researchers say they want to make advances for science, doctors say they want to help their patients and women say they want control of their own bodies.

Miller says the issue is one for all women. "It's about women's equality on a fundamental level," she says. "Women's reproduction has been a battleground for how we're seen in society."

Without a clear commitment from the government or a clear consensus among stakeholders, however, it seems the battle will continue, and the question of whose issue it is will have to remain unanswered.

## Parizeau

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with a man named Philip Rosignon, whom Parizeau has known for twenty years, he conspired to pass confidential information about Canada to France.

Parizeau was taken by surprise, and said that he had never heard of the book or the allegations, and of the accusation he said, "All I can do is laugh about it. It is ridiculous."

At the reception after the lecture, Parizeau was asked how the Québec government would proceed if it ever did get a "Yes" vote to sovereignty from the people of Québec.

"We think we can get away with a unilateral statement of sovereignty without dire economic consequences," said Parizeau. "Jacques Chirac [the President of France] has already agreed to recognize a sovereign Québec, and [a formal recognition] is really the most important thing. You have to remember we have been thinking about this for 25 years."

"You cannot weigh the gains and the costs without taking into consideration the economic policy of the whole. The future and prosperity of Québec will depend on the intelligence of the plans created to guide it."