

# THE VOICE MAGAZINE

*Volume 15 Issue 40*

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## THE VOICE MAGAZINE

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## Access Denied

In Canada, we have an interesting (and often confusing) blend of funding and service in our health care system. Is it public? Is it private? Who pays for it? Who delivers the services?

Those questions, and the prickly debates they can lead to, are characterized by a couple of recent rows over health services. Specifically, private morality versus public funding.

In 2006, a woman went to St. Elizabeth's Hospital in Humboldt, Saskatchewan, for a tubal ligation. This is a common, legal operation in Canada. The woman was denied. Why? Because even though the majority of the hospital's funding comes from the public purse, St. Elizabeth's is a Catholic institution, one whose mandate doesn't include procedures for birth control. (After lodging a complaint with the Saskatchewan Human Rights Commission, the woman recently won a \$7,875 settlement.)

The same issue has reared its head on Midland, Ontario, where two hospitals are considering a merger. If it happens, the secular Huronia District Hospital and the Roman Catholic Penetanguishene General Hospital will become a single Catholic organization. And that means an end to procedures that conflict with the religion—including counselling for AIDS patients, vasectomies, tubal ligations, and other birth control options.

My initial reaction was that this is a clear-cut matter: if it's a publicly funded community service, keep religion out of it.

After all, the Canada Health Act makes it plain; the primary objective of Canadian health care policy is "to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to health services without financial or other barriers." This publicly funded service must be universal, with "all insured residents of a province or territory . . . entitled to the insured health services," and it must be accessible, with citizens having "reasonable access to insured hospital, medical and surgical-dental services on uniform terms and conditions, unprecluded or unimpeded," either by extra charges or by discrimination.

But then the waters got a little muddy. Because while hospital *services* are publicly funded, the institutions themselves are, for the most part, private. In fact, the majority of Canadian hospitals are private, not-for-profit institutions, owned and operated by religious organizations, regional health authorities, or communities.

Which raised an interesting parallel. Primary health care physicians are also publicly funded. You go to your doctor; she bills the provincial body for the visit; she gets paid out of the public purse. (Assuming, of course, that it's for a treatment covered by your provincial health insurance plan.) But a doctor can decide whether or not to accept a patient into his practice. A doctor can decide, based on her own moral and religious beliefs, what procedures she's willing to perform under the umbrella of that practice.

So should the expectations for these publicly funded health care providers be different? Should being a private, for-profit practitioner provide greater moral autonomy than being a private, not-for-profit provider?

The answers aren't as clear as they might initially seem. But as citizens of a country with a proud public health care tradition, it's a matter we should question before we find our access denied.



## AU TUTOR BIO



### Shawn Fraser

As an assistant professor in the Centre for Nursing and Health Studies since 2006, Dr. Shawn Fraser has already seen some exciting developments within the Centre.

One of these is the new thesis-based Master's program beginning this fall.

"In terms of our program," explained Dr. Fraser, "we have a thesis-based Master's course that's . . . coming online right now. Before, we were course/project-based."

Other initiatives he's been involved with include developing courses in research methods.

"I've just developed a course with another professor, Dr. Sharon Moore," he said, "called Advanced Research Methods. And I'm also developing a course that goes online in January called Advanced Quantitative Research Methods."

When asked what other areas he'd like to develop courses in, Shawn explained that his background in kinesiology and health psychology would be an influence.

"I'd like to see or develop in the future some health psychology type courses; for example, Health Behaviour Change. Helping people increase physical activity behaviour or improve their diet through health psychology type practices."

In his role as a tutor within the Centre, Shawn has seen how AU's distance education model can make a big difference in helping students achieve their goals.

"In our program," he said, "we have primarily health professionals, especially in the graduate program. I'm quite certain it would not be possible for [them] to pursue graduate studies if they were in a traditional university."

Full-time health professionals often encounter scheduling difficulties in attending campus-based classes. As well, there may not even be a campus available.

"A lot of these people are practising nurses or pharmacists in maybe a small town or even in a city like Edmonton and working full-time and trying to fit in the classes. It's pretty difficult."

Along with the increased access to courses, Shawn sees another major benefit to the online graduate classes.

"One of the things that I really like about it, aside from the convenience, is the students get a chance to sit and think before they have to have a discussion. So in a traditional graduate course you'd sit around and you'd have a seminar in very much the same way. I find the comments to be a little more thoughtful because they can sit and think for a day and then post something rather than having to say something in just a few minutes."

If you'd like to contact Dr. Fraser, or find out more about AU's courses and programs in nursing and health services, visit the Centre for Nursing and Health Studies [website](#).



## Glaucoma

Glaucoma is the second leading cause of blindness in the world and is the leading cause of blindness among African-Americans between the ages of 45 and 65. Estimates indicate that throughout the world approximately 100 million people are suffering from glaucoma. Even with treatment, 10 per cent of those diagnosed with glaucoma will lose vision.

Factors that increase a person's risk for glaucoma include being diabetic, having a family member diagnosed with glaucoma, being over 60 years of age, and being severely nearsighted. Steroid use, as required by severe asthmatics, also increases a person's risk of developing glaucoma.

Glaucoma affects the optic nerve, which transmits visual information from the eye to the brain. There are no symptoms until vision loss has already begun, and unfortunately, this loss cannot be regained even after starting treatment.

Vision loss begins with side-peripheral vision, and without treatment this condition eventually steals all vision. Glaucoma usually progresses slowly, but in some cases it may progress quickly. Because vision loss is irreversible, the only way to prevent it is to get tested and, if glaucoma is detected, begin treatment immediately.

Following a diagnosis of glaucoma you will have to be closely monitored by your doctor. Medication, and in some cases surgery, can help to manage the condition.

It is important that your intraocular pressure be maintained at an acceptable level. Fifty per cent of people with glaucoma have high intraocular pressure, which can damage the optic nerve and lead to vision loss. Your ophthalmologist can detect glaucoma damage by examining your optic nerve. A healthy nerve will have a small cone-shaped hole in the centre. Glaucoma causes this hole to enlarge and results in loss of healthy tissue.

An additional test may be performed to detect the loss of peripheral vision. A visual fields test involves placing your head into a specially designed headrest and staring straight ahead at a light, while a machine flashes lights in your side vision. You are required to press a button when you see a light. The machine prints out the result of the test, indicating whether you have any peripheral vision loss. Further testing may be available if a person is at increased risk for developing glaucoma but not yet showing symptoms.

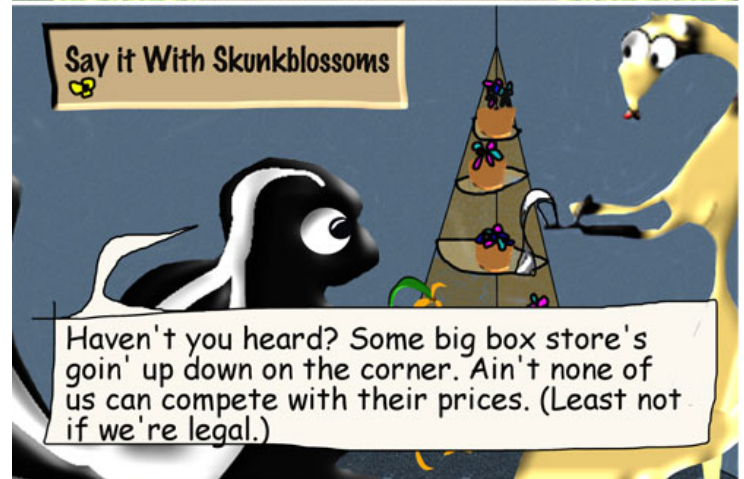
The Glaucoma Research Foundation suggests the following guidelines for visiting your eye doctor:

- have your eyes tested at ages 35 and 40
- between the ages of 40 and 60, get tested every two to four years
- after age 60, have your eyes tested every one to two years
- after age 35, anyone with high risk factors should be tested every year or two

To find out more about glaucoma and what you can do to prevent vision loss, visit [The Glaucoma Research Foundation](#), the [University of Ottawa Eye Institute](#), or [The Glaucoma Foundation](#).

# The Chronicles of Cruiscin Lan

by  
Wanda  
Waterman  
St. Louis







## Taking Action

Hardly a day goes by without news of a new threat to our health or well-being. It may be the results of a study saying positive thinking doesn't help cancer patients. Or caffeine is good for you after all. Or not. Protect your identity. Don't open spam emails. Eat broccoli and blueberries. Avoid cookies, ice cream, potato chips.

Hardly a day goes by when we don't feel cynicism around these conflicting messages and moving targets. Hardly a day goes by when we don't think the likelihood of risk to us is exaggerated. After all, the threat of home invasion, cancer, identity theft, homelessness, wife battery, sudden death, or rape is something that happens to other people.

Perhaps people who live in big cities or are poor or uneducated or are young or screw up. Surely not me or my family.

Last week my comfort zone was rattled. I work for a company that helps clients seeking employment counselling services. With the exception of about three men, we're all female, ranging in age from mid-20s to 60-something. Most work in an office setting. Some of us work off-site. Sometimes our clients are troubled or distraught.

For three hours last week we heard about the very real danger we face both in the workplace and in our regular lives. It's easy to rationalize away the statistics: one in four Canadian women will be sexually assaulted. The one is probably some skimpily dressed young thing hitchhiking home from a city bar late at night. Or so we tell ourselves—buying into the stereotype from TV, movies, and crime fiction.

The reality is quite different. At risk are all women of every racial and ethnic background, rich or poor, any age, all physical types, including the elderly and disabled.

Not only did the presenter offer us some practical, tangible information, we also spent the morning practicing some specific actions.

Begin by being aware of your surroundings; notice exits and possible weapons. Be cautious but act confident and strong. Make eye contact to let potential attackers know you are aware of them. Speak strongly and decisively. Trust your gut. Understand that different situations will require different responses. Defusing a situation by firmly and honestly asserting your rights may be the correct response.

On the other hand, an attacker with a knife trying to force you into his car calls for a far more aggressive response. You must have intent to injure. You need to fight and scream and attack to save your own life.

Seizing opportunity, surprising the attacker, looking to escape, and attacking may make the difference between surviving or not. Taking a self-defence course and practicing techniques ensures you won't be paralyzed with fear if your safety is threatened. Studies with professional athletes have proven that mentally rehearsing behaviour is just as effective as the actual moves.

The take-away message is this: we are all vulnerable but we can take action. We can educate ourselves, practice defensive behaviours, and be aware of danger (but not crippled by fear). Sharing this message is also vital, from where I sit.



## Black Lips - Good Bad Not Evil



Release date: September 11, 2007

Label: Vice Records

Tracks: 13 plus 1 bonus

Rating: 7

This band first came to my attention about two weeks ago when I was up late watching MuchMusic's *Punk Show*. Some days the program is great and others it's nothing more than a waste of time, but on this particular day the lineup was stellar.

Following videos by Rancid and Operation Ivy came a black-and-white number entitled "Black Lips presents Cold Hands," and the song was such a throwback to the Sex Pistols, the Clash, and the Dead Kennedys that I was stunned to see the release date listed as 2007.

The video was a little like the Offspring's "Gone Away," but with grittier instrumentals and vocals that came off a little like Paul Simonon when he took on "The Guns of Brixton" (The Clash, *London Calling*). I immediately imagined the band performing in a dark little punk club in California and added *Good Bad Not Evil* to the long list of CDs I needed to buy.

My surprise on listening to the record was that "Cold Hands" is a slight anomaly when compared to the other 12 tracks. Admittedly, the band describes itself as "psychedelic/comedy" on their MySpace page, but I was unaware of this until after listening to the remainder of *Good Bad Not Evil*. And at any rate, they say their music sounds like "punks" so what is a person to expect?

This is not to say I've been disappointed. The four-piece Atlanta band has actually mixed up a bit of grunge, blues, and a little horror-punk (think The Misfits) into their music to come off like punks on some wonderful blend of beer and small hits of ecstasy.

"Lock and Key" sounds a bit like The Doors, "O Katrina!" a bit like The Strokes, and "Transcendental Light" even brings in a little bit of Bruce Springsteen. The bonus track at the end is nothing short of spooky, confirming the self-applied label of "psychedelic."

Together, all the songs on the record do work together in creating a unique sound and even a unique sub-genre of many types of music. However, if you try to judge what the album will sound like based on any one song, you'll be wrong.

The star tracks on the record are "Cold Hands" and "Veni Vidi Vici" but that being said I wouldn't carelessly dispose of the other 11 songs. My recommendation of this record is fairly wide in range, but I think that fans of The Strokes and The Clash will have a particular affinity for the Black Lips. Make some room in your CD case.



## *Books, Music, and Film to Wake Up Your Muse and Help You Change the World*

### *The Jonathan Coulton Interview*

*Describe the development of the Thing a Week experiment.*

I had just left my day job to pursue music full-time, and this seemed as good a way as any to pretend that writing songs was my job. I also wanted to challenge myself a little, push the envelope of what I thought I was able to do. And of course

there was the stunt element as well—I thought this might be a good way to attract some attention.

*How and with what equipment do you record your songs?*

I record using a Mac Mini and a Digi 002 with Pro Tools LE. I also spend some time using Ableton Live, Apple Soundtrack, and GarageBand when necessary. In addition I've got a bunch of boxes that do things: a dbx pre-amp strip, a Line6 Pod Pro for guitar sounds, a Behringer bass amp simulator, and an Ensoniq MR-Rack that I still own from the days when I used to beta-test equipment for Ensoniq. And piled in the corner of the room are a bunch of guitars: a Martin acoustic, an American Strat, a Deering Goodtime banjo, a couple of cheap acoustic and electric basses (I play bass badly), a uke, a mandolin, a lap slide guitar, a dobro, etc. And then all sorts of ancillary stuff: an accordion, a few harmonicas, shakers, flutes, toy instruments.

*What music do you listen to besides your own?*

Some of my favourites these days include Jon Brion, Radiohead, Super Furry Animals, OK Go, Brendan Benson, Jason Faulkner, Jim Boggia. But I grew up with a steady diet of Beatles and Billy Joel, which later expanded a bit to include Steely Dan and XTC, so those guys are all in there too. Not to mention a parade of gentle 70's/80's music: Simon and Garfunkel, Dan Fogelberg, Gordon Lightfoot and so on.

*Do you ever need to unwind, and if so what do you do?*

Almost always. I'm a pretty social person, and my work days are solitary (sometimes I don't even leave the house), so one of my favourite ways to relax is just to hang out with friends. Having a 2-year-old changes your life in lots of ways, not least of which is the incredible amount of time I no longer have just to hang out somewhere, drinking coffee and chatting for no reason at all. I was walking around the East Village the other day and couldn't believe how many people were just sitting around and talking. Crazy! These days any chance I have to go out for dinner or have a drink at a bar is a huge luxury. But I play poker too. And I like video games.

*I hear you're getting busy. What would it take for a huge corporation to buy a piece of you?*

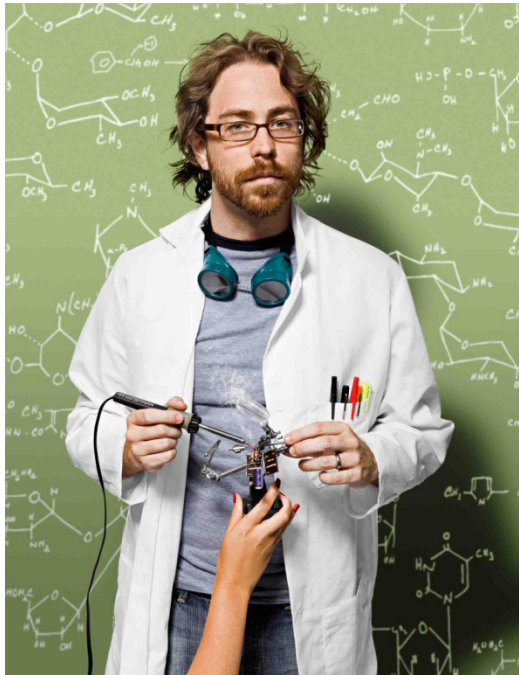
I'm not opposed to selling out for the right price and the right project. The song I wrote for Portal, a new game that was just released by Valve, was really fun to do. I've always been a fan of their games and I could tell they had some really creative stuff going on with the game when we first talked about doing something. So I was thrilled to have the chance to work on something that would contribute to the game. For me that's



the whole point of being a creative person—make enough money so that you can stay alive and feed your family, while still having the luxury to work on projects you actually care about.

*Can you describe what it is about a project that makes you care about it and motivates you to complete it?*

Usually for me it's about seeing the big picture and trying to figure out how to get there through the details—if I can turn a song into a puzzle, it's more interesting. So I might decide that I'm writing a happy little pop tune, but that gradually the character becomes less and less likeable until we just hate him by the third verse. So what does he say in verses 1 and 2 that make us start to dislike him, and what does he



finally get to that pushes us over the edge? And of course all that action has to fit the rhyme and rhythm I started with—all that stuff can really drive the process for me.

*Do you enjoy watching the reactions of surprise from live audiences when your sweet music and lyric openings morph into scandalous lyrics?*

Yes, although I'm still waiting for the time when someone gets really mad and walks out. Hasn't happened yet though—I usually have a pretty good idea what the audience can take, and if it's a kid-heavy crowd I'll think twice about what I'm doing.

*Have you received any criticism regarding these lyrics?*

Yes, every now and then I'll get an email from someone who wishes there weren't any curse words in my songs. I always explain to them that the only reason they're there is that I think that's what the characters would say, how they would speak. There's no gratuitous cursing in my opinion (except for "First of May" which is of course all about gratuitous cursing). I respect those people's desire to not hear cursing, but I hope they recognize they're fighting a losing battle—lots of people swear after all.

*For you, what are the ideal conditions for creativity?*

Lots and lots of free time—large stretches of nothing to do. Driving is great for that. And of course I can always use idea fuel—news stories, pop culture stuff, other people's music, really anything that can get chopped up in the blender and reassembled.

*Is there any question I could ask that would shock or offend you?*

I'm sure there is, but you haven't asked it, so I guess we're still friends.

*The Bard could use some help scouting out new material. If you discover any books, compact disks, or movies which came out in the last twelve months and which you think fit the Bard's criteria, please drop a line to [bard@voicemagazine.org](mailto:bard@voicemagazine.org). If I agree with your recommendation, I'll thank you online.*

## AUSU THIS MONTH



### An open letter to Joy Romero, Chair of AU Governing Council.

Dear Ms. Romero;

On behalf of the students of Athabasca University, we are excited and encouraged by what Dr. Frits Pannekoek has called the “second greatest milestone” in the history of Athabasca University. The approval of \$30 million toward AU’s new administrative and research center, as announced today by Minister of Advanced Education and Technology Doug Horner, is a tremendous step toward ensuring that

AU will remain one of Canada’s finest educational institutions.

This funding demonstrates Alberta’s strong commitment to Alberta’s students, and the students of Athabasca University. Athabasca University also demonstrates this commitment through its focus on increasing affordability, accessibility, and quality of education for our members. Recent limits imposed on annual tuition increases are an important first step toward ensuring affordability. Today’s funding announcement will further address accessibility issues for AU students.

In early 2007, AUSU presented the government and AUGC with a document detailing our *Vision for a Skilled Alberta*. It is clear that our concerns have been heard and that steps are being taken to ensure that students’ views are incorporated into revisions to our education system and university services. We are encouraged that we have reached this milestone to improve the main campus of our university and ensure that AU has sufficient staff to address growing student needs.

We now look forward to learning how AUGC and Athabasca University will use these funds to enhance the quality of AU’s offerings and we request a communication from AUGC to our members explaining how this new funding will enhance student services.

We continue to look forward to reaching future milestones that will ensure that AU can address the urgent need for enhanced learning and virtual communication technologies, more courses and programs, and research opportunities for students.

AUSU





## At Home: Two deaths result from RCMP Taser use

In the space of one week, two people have died in Canada from injuries sustained from RCMP use of Taser guns.

The first victim was a Polish man who was Tasered by police officers after they attempted to subdue him at the Vancouver International Airport. Witnesses say that the man, who was in his 40s, began throwing computer equipment and chairs and pounding on windows before the police arrived and tried to calm him down.

After failing to convince the man to put his hands down on a desk, police shocked him with the Taser gun and moments later it appeared he was having a heart attack; he died while still at the airport.

The second incident occurred in Montreal on the same day and involved 38-year-old Quilem Registre. Registre was pulled over by police for a traffic violation when it was discovered that he was intoxicated. Police took him to the station for

questioning and say that after he became "aggressive" they were forced to stun him with a Taser. The incident led to Registre's admission to hospital in critical condition, where he died three days later.

These deaths have human rights groups and independent Canadians calling for further studies on Taser usage and in many cases people want to see police without the stun guns.

Tasers were implemented into the RCMP uniform as a means to curb the numbers of criminals and other citizens whose deaths were caused by police; it was widely accepted that stunning criminals, suspects, and people displaying disorderly conduct would help police officers to subdue such individuals without causing them any real harm.

The CBC says that "according to some counts, as many as 17 people have died in Canada following Taser incidents since 2003."

These deaths simply show that police cannot predict the outcome of their use of Tasers, and because of this many people are calling for the discontinuation of Taser use until more is understood about the risks involved.

## In Foreign News: Stolen Ptolemy map turns up in Sydney's Gowrie Galleries

The Ptolemy World Map was lost to Madrid's National Library along with another precious map, but to the delight of the library's administrators it has turned up in Sydney's Gowrie Galleries.

The map is a piece created in 1482 not by the astronomer Ptolemy himself (who died in the 2<sup>nd</sup> century AD), but was based on his mathematical calculations in the book *Geographia*. Ptolemy revolutionized mapmaking because of his incorporation of mathematics into the plotting of points and the connection of continents; prior to this innovation, mapmakers would distort their documents to enlarge the more influential countries.

The Ptolemy World Map is not only a triumph for its achievements in global geographic understanding but is also treasured as a beautiful piece of work.

It seems that the map made its way into the United States after being stolen from the National Library and got into the hands of someone who Gowrie Galleries owner Simon Dewez claims is a trustworthy professional, although he declined to name the dealer.

Dewez was understandably upset to learn that his prized purchase was stolen. However, he has graciously allowed Sydney police to confiscate the map and no arguments are expected from him as Spanish authorities make arrangements to have it returned to Madrid.

The main suspect in the theft is a man who had previous access to the area of the National Library where the map and other documents were kept; he has since left Spain and his current whereabouts are uncertain. Simon Dewez was refunded his money for the purchase of the map but regrets its loss.

## **CLICK ON THIS - Half-Baked**

**Lonita Fraser**

We are compelled by our very natures to certain terrible habits that we cannot avoid—eating, sleeping, that sort of stuff. Filthy, but what can ya do? This week we have some treats; food, and food for the soul.

### **Hobo Soup**

This reminds me of those classic translation troubles English-speaking companies have when they try to market their products in non-English places. Like that time the baby food company famous for putting baby pictures on their product jars tried to market baby food in parts of Africa where the literacy rate was next to nil. See, in that neck of the woods they package things such that what's in the jar is what's depicted on the label . . .

### **The Sneeze / Steve, Don't Eat It!**

And now, ladies and gentlemen, a man who will go out and try that Hobo Soup so you don't have to! I laughed 'til I stopped. This man has a way with words, and a positive talent for conveying humour. The entire blog "The Sneeze" is well worth a gander, but it is most definitely not safe for children or the easily offended. There's nothing gross, per se, but he uses some colourful turns of phrase.

### **Earth Sandwich**

"Never before have two pieces of bread been simultaneously placed directly opposite each other on the globe, thus making an Earth Sandwich."

### **Jam Sandwiches**

As a matter of fact, no, I did not know that ham and strawberry jam go well together.

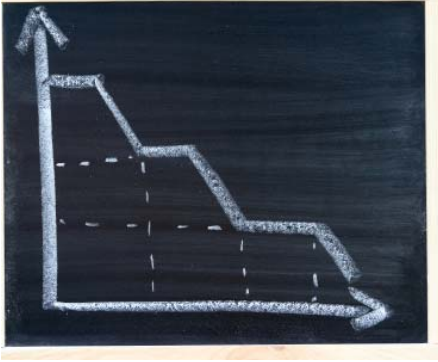
### **A Bite To Eat**

A very cute snack of a tiny burger, fries, and a soft drink.

### **eCreamery**

For those of us who'd prefer something sweet rather than savoury, here's a place that'll make custom ice-cream, packaging, and all that goes with it. I wonder if they can deliver to Canada . . .

## EDUCATION NEWS



### University enrolment down across Atlantic provinces

Angela Wilson

WOLFVILLE (CUP) -- Fewer and fewer students are choosing to go to university in the Atlantic Provinces.

The Atlantic Association of Universities (AAU) released preliminary data on university enrolment for the 2007-2008 academic on Oct. 15, confirming fears that enrolment is in decline across the region.

The Atlantic provinces reported an overall 2.9 per cent decrease in undergraduate enrolment with 65,680 students attending university in the region.

New Brunswick was hardest hit with a reported a 3.6 per cent decline.

Nova Scotia is close behind at 3.1 per cent, while Newfoundland's Memorial University (MUN) and the University of Prince Edward Island (UPEI), did not report such significant downturns, at only 1.7 per cent and 0.9 per cent respectively.

Acadia University in Wolfville, Nova Scotia is the hardest hit single institution, with a decrease from last year of 10.1%.

In 2003-2004, when Acadia's student population blossomed with the Ontario double cohort class, the university boasted 4,329 students.

For 2007-2008 there are a mere 2,963 students, a decrease of over 30 per cent.

Nova Scotia and New Brunswick also have the highest tuition fees in the country.

Nova Scotians pay an average of \$5,878 for an undergraduate education. New Brunswick students pay \$5,733.

By comparison, the national average tuition fee is \$4,524.

The Nova Scotia government promised to lower tuition to the national average by 2011.

A memorandum of understanding between the province and universities has already put a cap of 3.9 per cent on tuition increases. The province further invested in universities this year to keep tuition fees frozen.

Paris Meilleur, executive director of the Alliance of Nova Scotia Student Associations, expressed some hesitation that tuition will indeed meet the national average.

"We're hoping that the provincial government will follow through on their promise to bring tuition to the national average by 2011," she said. "However, we're not sure that the investment made so far can keep pace with the promises made."

Heather Elliott, executive director of the New Brunswick Student Alliance, comments on the negative effect that high tuitions have had on New Brunswick universities.

She says that, "With such high tuition rates, we are not as attractive to out of province students. It has affected how many people we can draw into the province and who will stay."

Dale Kirby, assistant professor of post-secondary education studies at MUN, emphasized the importance of tuition in a student's decision when choosing a university.

"Making tuition affordable is what needs to be done to fill universities in the Atlantic provinces," he said. "There is a point where tuition deters significant numbers of people, especially in Nova Scotia and New Brunswick."

He noted the significant increase of students from Nova Scotia attending MUN this year. Newfoundland and Labrador boast the second lowest tuition in the country, at \$2,633.

"Although there is no empirical evidence to show that it is high tuition costs that is affecting enrolment in Nova Scotia and New Brunswick, there has to be a relationship between tuition and the significant increase of Nova Scotia students at MUN," Kirby said.

"There are so many students this year [at MUN] that they have formed a Nova Scotia Student Society."

The decrease in enrolment is exacerbated by an aging population in the Atlantic provinces, combined with out-migration for more lucrative employment in the Western provinces.

"Overall, the drop in population in the region has had an important impact because many post-secondary education institutions rely, for a large portion of their enrolment, on the high school 'feeder' population," Kirby said.

The news, however, is not all bad for the Atlantic region.

Peter Halpin, executive director of the AAU, noted that there has been an incremental increase in graduate study enrolment.

He also said that there has been an annual 3 per cent increase in international students over the last few years.

On the domestic side, though Halpin pointed to greater efforts in recruitment and branding aimed at students outside of the region.

Changing demographics, however, will continue to affect enrolment in the four provinces' education institutions.

"This is a wake-up call for policy makers," Kirby said. "We have to do something because if we don't educate them here, they probably won't stay."



# classifieds

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## THE VOICE

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