

*Medical Care Act*

rather die first than lose a nickel. You have to be pretty far gone to have that kind of philosophy. That is the only effective argument that can be used, but a great deal of work has to be done in doing the arithmetic. I think that all parties would support the government in that type of positive approach because these schemes, which the great majority of Canadian people want and accept as fundamental rights, will be destroyed if you let escalating costs climb and climb. You cannot nibble off 2 per cent savings here and 2 per cent there and save them.

When you re-read the speech of the hon. member for Villeneuve (Mr. Caouette) speaking for his 12,000 people in the bush in Quebec, you will realize that he is speaking for 22 million people across this country. This is how they will judge us if we allow this type of shortsighted, negative restrictions to be put through under this bill.

As I said earlier, I have a personal interest in this because of my own political defeats, and I warn hon. members that no matter how popular they may think they are in their ridings, if they touch the fundamental needs of their people they will not last very long.

**Mr. Lalonde:** You are worried about the province of Ontario.

**Mr. Hamilton (Qu'Appelle-Moose Mountain):** I am worried about every provincial government which was forced into this scheme and which is criticized the same as is this government here. They have the same pyramidal civil servants who want to continue these programs in their own way. They are aware of other alternatives, and yet they do not support the ministers who do not speak for the people any more. Until we can impose our will on mandarins in the civil service who have these ideas, the end result will be that not only these programs are endangered but the very individual existence of members of parliament and cabinet ministers will be endangered.

No man is in greater danger in the cabinet than the Minister of National Health and Welfare (Mr. Lalonde) is today. He is bound to his civil service on matters of family allowances which he brought into the House, and he is bound to his civil servants with regard to this type of negative deterrent. But he thinks he will ride along forever. However, people have a way of catching up with these great men, and putting them on their knees to be humble again. All I can suggest is that when the term of the government is over, some of its members will remember that they were warned.

I should like to conclude by saying that no Canadian knowing the social history of this country, knowing the needs of the people, and knowing that inflation is not being fought with this type of measure—inflation is fought by attacking the basic causes of inflation, and the anti-inflation Bill C-73 which we put through does not fight it—will respond in a positive way.

You have to get at the fundamental costs and there must be a control mechanism in the universal plan. The control mechanism must be an individual one under which the individual citizen and the whole country benefit from controlling the plan, and then the great majority of the people will respond. If we are to save these plans, this is what I think the course will be. I hope that the government

will take a look at this type of thinking, and then it will receive the support of all members of the House.

**Mr. Robert McCleave (Halifax-East Hants):** Mr. Speaker, I appreciate the opportunity of filling in the time until the dinner break, and perhaps beyond it. The reason I wish to take part in this debate is that I have been a member of the House for some time, and when the minister presented the bill it raised some revulsion within me for the simple reason that I thought we were being asked to second-guess ourselves. I imagine that will be my principal point in this debate.

Over the years one is asked to judge on many particular points of legislation, to make an assessment of what the government does. In this case I can remember being asked to give my approval or my opinion as to whether we should have medicare legislation, which is now being implemented in this country. Before that I can remember fighting on the hustings for what I believe is the right of every Canadian, the right to the best health care possible.

When forced to look back at those days I cannot even recall what the arguments against were, because I think we had all made our points so well about ten years ago in the House that there should be proper medical care for Canadians and no persons should be ever allowed to suffer or forced to have every last thing they saved in their lives taken away because of illness. I believe that. I stand up here tonight almost in a state of bewilderment as to why there should be any restriction on that sort of thing because I really believe no one in this Chamber should ever have to go through the humiliation of having to sell everything, or try to sell everything he has in life to maintain his health.

● (1750)

There may be very few things we start with which will give us some kind of break in life, but I should like to think that we all started out from the gate with at least the right to health. I think that has to be important to the Canadian way of life. I know that each and every hon. member of the House who is listening to me will agree that there are things we can fall by the wayside on, but on health, no. We should be given a reasonably decent environment and a reasonably decent assurance that we do not have to fall by the wayside on health.

I am bothered because I thought we had decided, and decided well, that irrespective of party and the like, we had fought that battle, and it was over with. I really think this is a mistake which will haunt us for a long time. Suddenly we start to preach restraint, and this and that. If this is virtue, it should have been drilled into this House ten or 20 years ago, not now. This should not be happening at the last moment in some strange shape and form.

I object to this bill for that reason alone, but I also object to it for other reasons. I will present them as best I can, and then sit down at six o'clock. My first objection is that we made a statement in principle years ago, and now something has happened so that we are supposed somehow to negate, obliterate or water down the principle we adopted.

I suppose because doctors form a very successful part of the community they must somehow be singled out for what