

Normally speaking, I am very much against prolonged debates. I would like to see the time limit on all debates cut down except in very exceptional circumstances. Except where ministerial statements are being made, I would like to see them cut to 20 minutes. When that happens, I will be glad to abide by the rules. Indeed, I am practising already for the day, which I hope is coming soon, when we will have shorter speeches in the House.

**Some hon. Members:** Hear, hear!

**Mr. Brewin:** I spoke on this bill on second reading, but I only spoke for about 15 minutes at that time. Adding my two speeches together, I am well within the rule I put forward. Normally I would not speak a second time, but I do not think this is a normal bill and I do not think these are normal circumstances. Members of my party are deeply concerned about what they regard as an important breach of principle involved in this bill. Therefore we are using the rules of the House as they exist at present to make sure that the Canadian people become aware of what this legislation is doing. It is a bill which affects many people across Canada; it affects them today and it will do so in the future.

● (1530)

For me and for members of my party, this bill signals the abandonment of a vision of which parliament and the people have reason to be proud. I refer to the vision of adequate health services as an unalienable right of all the people of Canada. To make this vision into reality is was necessary for the federal parliament to assume a substantial and stable share of the cost of such a scheme as medicare, especially so that provinces with smaller revenues might be able to embark upon such programs knowing where they stood. The objection we have to this bill is that it renders the federal contribution unstable. It is true that it does not provide for an over-all reduction at the present, but it does provide for the gradual lessening of the percentage of the contribution.

Assuming there is a continuation of inflation in medical costs as in other fields, which seems to be a reasonable premise, we gradually find the percentage contributed by the federal government to medicare becoming smaller and smaller. There is also the threat to other federal contributions to similar services; for example, hospital and diagnostic services. I know the parliamentary secretary explained earlier in the debate that the bill before us does not specifically refer in any way to hospital and diagnostic services, but is all part of a pattern which became evident when the former minister of finance announced the termination of the agreement to provide 50 per cent of these costs. So a burden is placed on the provinces and it is all really part of the same field though these services come under different acts, that is to say, the field of provisions of medical services to the people.

We believe this program should be advancing instead of being cut back, and we regret the failure of the government to press forward with discussions with the provinces over the \$2 billion worth of services the provinces have provided by way of pharmacare, homecare and other things. The provinces are providing 100 per cent of the costs of these extra services and they look to the federal

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government to assist. But as far as I can ascertain, discussions are stalled. This is utterly false economy.

People sometimes ask, "If you say this is false economy, where would you make cuts?" I do not intend to discuss that aspect in detail but I do suggest that there are other places which it would be far better to examine, with economy in mind, than the medical services provided to our people. Take defence expenditures, for example. We are proposing to spend \$1 billion on the purchase of patrol aircraft from Lockheed. I am informed that these are unnecessarily sophisticated aircraft bearing in mind the patrolling task for which they are needed. I may be wrong, but when you talk about \$1 billion of expenditure, and when you are dealing with a company which has sufficient surplus funds to throw around in bribery—

**The Acting Speaker (Mrs. Morin):** Order. I would remind the hon. member that we are considering Bill C-68, which relates to the Medical Care Act, and I would ask that he limit his comments to that bill.

**Mr. Brewin:** Perhaps you did not follow the direction of my remarks, Madam Speaker. It is the purpose of this bill to cut down medical expenses, and it has frequently been stated in this debate that if expenditures are not cut in this field they will have to be cut somewhere else. I am suggesting to the government that it consider cutting expenditure in other fields so that it might not be necessary to make the economies proposed in the bill before us.

I have always been amazed by the interpretation of "relevance" in relation to debates that go on in this chamber. I frankly admit that I have heard many things said in this House whose relevance to the subject under discussion I could not, by any stretch of the imagination, grasp. In this particular case, I believe the points I am making affect the passage of this legislation because the purpose of the bill before us is to curtail medical services in order to effect economy. It is surely relevant to point out—I shall not do so in detail—that there are other fields in which economies might be made. On the shelf now—again, this is an example from the defence field—are proposals to spend large sums of money on a fleet of interceptors far beyond what is needed for defence purposes, at least that is my opinion, and I suggest that this is where we should be looking for savings.

The next point I wish to make has been made before but I emphasize it because of its importance. The bill before us is a blow at Canadian unity. Canadian unity does not just mean symbols of unity, though no doubt symbols are important. A flag is important, an anthem is important, other things are important as symbols of unity. But working together through a program such as medicare to secure equal services, for all the people of Canada, irrespective of the province in which they live, is more than just a symbol of unity; it is the very building of unity in this country. I find that when it comes to cutbacks, to axes applied for reasons for economy, that they fall not on unnecessary luxuries but on things which are basic necessities for ordinary people. I cannot imagine any more important thing for making life livable for Canadians than the provision of adequate health services.

As I mentioned before, I am not one who favours prolonged debate, but I want to make clear to the House how