

*Medical Care Act*

The message from the voters of Canada is certainly clear to all governments in this country. Every expenditure has to be carefully monitored. No matter how worthy a service may be, everyone is becoming quite cost-conscious and efficiency-conscious about those services. It should not be difficult to get an agreement on restraint regarding the expansion of medical services to the extent that some of these things are being abused.

I want to make this quite clear. All of us have experience with various government programs. If there is one government program that is not being greatly abused, it is medical services. On the whole, it is probably one of the finest programs in which the federal and provincial governments have ever engaged. As members of parliament, we encounter abuses of public services. In my experience, people do not rush off for medical services if they do not need them. We have a good program. In my view, it is one of the best in the world. If you look around, you will see that our medical service program stacks up with any country with which Canada traditionally compares itself.

With the possible exception of Great Britain—and there are some flaws and approaches in their system that are not quite as good as ours—our program is as good or better than any. In Japan, the coverage is not universal. Of the 105 million people living in Japan, while they are covered by some kind of health insurance they are covered under systems with important differences. You do not get the universality or the good standard of service that you get throughout this country. Germany was the first country in Europe to bring in a national health scheme. However, in that country there are still eight types of health insurance funds and some 1,800 administrators of those funds. While it may be a very workable system—and I am sure all these systems are workable—it still does not compare with the simplicity of our system. Great Britain does not have a fee-for-service system. While there are some benefits to their system, our fee-for-service system, even with its faults, has proven to give satisfactory service to the people who use it.

Australia is as rich a country as Canada. They can certainly afford a public health insurance program of the same extent as ours. However, you still do not get the universal coverage in the Australian system that is available in this country. In Belgium, not all the population is covered. There is a distinct system for the self-employed and at least 2,000 societies administering medical health services in that country.

● (1640)

As for Sweden, which we often point to as an example for some programs, our own medical system is in many ways superior to the Swedish system, at least from the Canadian point of view. Ours is more appropriate, perhaps, to the Canadian system than to the Swedish system. Switzerland, where there are 23 per cent compulsorily covered, includes in its health insurance about 66 per cent voluntarily, and the scheme is administered by 750 sickness insurance funds. The question of catastrophic coverage is still a debatable and political issue in Switzerland. In Denmark you have counties and communes which are administering the health insurance program. New Zealand has a fine system. I had an opportunity of seeing it years

[Mr. Saltzman.]

ago, but it still does not provide the same kind of universal coverage as the Canadian system does.

The point of my saying these things is to strengthen the argument I am making. Of all the things we have done in this country, one of the finest has been to bring in the medical insurance program. Why we should take that which is really excellent, which is working remarkably well, despite its problems—there are always going to be problems in any kind of scheme—why we should take this thing which should be our pride and joy and seek to destroy it is beyond me. It will not be destroyed in the sense that it will come unstuck, but certainly the confidence in the system, the great rapport which has existed between the provinces and the federal government, is shaken now. The provinces are angry, and they are angry with justification. They have put forward alternative programs but these have been rejected by the federal government. They argue that they are trying to be reasonable, that they are trying to go along with the general purpose of what the government wants, only to be told in a very heavy-handed manner, "No, we are going to impose these things on you and you can sort of take it or leave it." I think that is wrong and it will not do the medical services in this country any good.

All of us are concerned about nationalism in this country. We are concerned about Canadian identity, and some of us think that Canadian identity is a flag, a national anthem or perhaps, different foods, pea soup or maple syrup, whatever it may be.

**Mr. Paproski:** Holopchi!

**Mr. Saltzman:** But that is not what national identity is really all about. Holopchi—a very, very good national identity. The hon. member from the Ukraine has mentioned it. If I digress for a moment, Madam Speaker, the *Hansard* reporter may wonder how you spell "holopchi." I would sit down if the hon. member would rise and clarify the question of spelling of "holopchi." They are very delicious cabbage rolls—the Anglo-Saxons over there call them cabbage rolls, but we know better. They have imposed an enormous burden on the medical services of this country, Madam Speaker.

**Some hon. Members:** Oh, oh!

**Mr. Saltzman:** It would probably make greater sense to restrain the consumption of holopchi than to do what the government is doing at the moment, if they are interested in cutting costs. However, Madam Speaker, if I might proceed in a somewhat more frivolous way than the serious discussion that has just taken place, let me say that nationalism to all of us is important and the Canadian identity is important. While we have been joking about holopchi, it is certainly a very great part of our heritage.

When you consider the phenomenal contribution which has been made to this country by people who have come from other parts of the world, from eastern Europe, from India and from many, many parts of the world, it is evident that they have enriched our country. When we talk about identity we are not talking about setting ourselves apart from the Germans or setting ourselves apart from the French on the continent, or setting ourselves apart