

*Routine Proceedings**[English]*

It is also about international co-operation. I announced earlier today that my department has issued a notice of compliance for DDI. This follows the first joint review of a new drug by the United States FDA and our health protection branch. This means that people with AIDS who are unable to use AZT will now have ready access to DDI. This is good news in our battle against AIDS.

*[Translation]*

HIV and AIDS have been part of Canadian society for ten years, during which the response from all levels of our society has increased substantially, Mr. Speaker. However, with a disease like AIDS, we cannot afford to become complacent, especially among those who do not see HIV and AIDS as pertinent to them. I believe it is precisely these people who need to be reached this week. The compassion and concern which characterizes Canadians can only be demonstrated when every one of us realizes that AIDS affects us all.

AIDS Awareness Week provides a chance to increase our understanding of this disease. For once we understand something, we lose the blind panic that comes from a fear of the unknown, and fashion tools to fight and eventually conquer. AIDS Awareness Week is also about learning how to provide support and compassion for those who are living with AIDS and HIV, their caregivers, friends, families and loved ones. We need to make this country a more comfortable place for people living with this disease.

*[English]*

Confronting our prejudices is not an easy task, but once these barriers are taken down, we see that illness takes precedence over discrimination. This is a message that can be shared by all walks of life to all Canadians. Awareness and knowledge will empower all of us to better understand and empathize with anyone who is affected by this illness.

Let us hope that awareness of and action against AIDS will continue long after this week is over and increase until such time as a lasting cure is found.

Mr. Speaker, I urge my fellow colleagues on all sides of this House and beyond these walls to do what you can to help in the promotion and success of AIDS Awareness Week.

**Mr. David Dingwall (Cape Breton—East Richmond):** Mr. Speaker, for you and I this week is like any other week. It is seven days long or 98 hours of work, sleep, time with friends and family. But for a person with AIDS a week can be a lifetime of wishing there was a cure for this terminal disease.

This week marks AIDS Awareness Week. It is the time when Canadians should be made aware of the seriousness of the disease, the pain and suffering this disease causes so many young men and women and children here in Canada.

I have to wonder, is it Canadians who lack the awareness, or is it the government of Canada?

The National AIDS Strategy that was announced was a tremendous disappointment. The strategy had no new moneys allocated, only a reshuffling of old money. During the previous health minister's address at the Fifth International AIDS Conference in Montreal on June 9, 1989 the minister said: "The second thing that I realized was that we can succeed in this struggle. It lies within our power. I believe that here in Canada the federal government has a crucial role to play. We can provide leadership to help mobilize everyone to work together to defeat this terrible disease".

On June 19, 1991 the Standing Committee on Health and Welfare returned its final report to the House of Commons. It contained recommendations that took months and months of consultations with expert witnesses to prepare. Among those witnesses were people who were trying to deal with AIDS, both personally and professionally. They said high risk groups were weary of HIV testing and needed guaranteed anonymity.

With guidance from these people, the standing committee recommended that there be anonymous surveys in AIDS research and that HIV testing be accompanied by appropriate guarantees of confidentiality.

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Also the committee pushed the federal government to encourage the provinces and territories to develop more flexible forms of remuneration for physicians that will more accurately reflect the needs of patients in their practice. Last, the federal government must adequately fund community-based support groups for AIDS patients and for continuing education programs on AIDS treatment and support for physicians, nurses and other health care professionals.