

Adjournment Debate

why I am behind the dairy producers all the way when they petition the federal government to stop dismantling their industry.

Not only is the government jeopardizing the future of our dairy producers, but it also seems that its incompetence is robbing the dairy industry of its means to grow in an increasingly competitive world market.

[English]

Mr. Lyle Vanclief (Parliamentary Secretary to Minister of Agriculture and Agri-food, Lib.): Madam Speaker, it is a pleasure to respond to the comments of the opposition this evening. However, I must remind the member that his comments in no way, shape or form are related to the question he asked in the House. That is what I will be responding to because I believe that is what his constituents want an answer to.

The United States has requested a NAFTA chapter 20 consultation concerning the application of Canada's World Trade Organization tariff equivalents to U.S. dairy and poultry products. The initial round of consultations took place on March 1 in Ottawa.

We in Canada have consistently maintained that both the FTA and the NAFTA make clear that Canada has preserved all its GATT rights with respect to supply-managed agriculture goods, including the right to apply the World Trade Organization tariffication provisions to U.S.-origin agricultural goods. In our view, Canada's approach to tariffication of dairy and poultry products is fully consistent with our international trade obligations under both NAFTA and the WTO.

With respect to ice cream and yoghurt, in response to the 1989 GATT ice cream and yoghurt panel report, we indicated that Canada would implement the panel findings in the context of the Uruguay Round. In the Uruguay Round, Canada and all other WTO parties agreed to tariffify their import restrictions. In our view, Canada's tariffication of quotas on ice cream and yoghurt addresses the GATT panel report of 1989.

• (1835)

I can assure this House, all the dairy farmers and the opposition that we will continue to strongly defend Canada's tariffication approach on all supply-managed commodities.

HEALTH

Mrs. Dianne Brushett (Cumberland—Colchester, Lib.): Madam Speaker, my question is for the Parliamentary Secretary to the Minister of Health.

On March 27 of this year, Statistics Canada released its study on 39 medical procedures performed in hospitals across Canada. One of the procedures studied was hysterectomies. The hysterectomies that are performed on the women in my riding of Cumberland—Colchester are at a very high rate, as a matter of fact an alarming rate, the highest in the country. We have almost

1,137 hysterectomies performed per 100,000 women, when the national average is approximately 437.

In the county next to mine, Annapolis Valley, the rate is 137 per 100,000 women. That is a significant spread. Ten times more hysterectomies are performed in Cumberland County than in Annapolis County and they are in the same province of Canada.

This is a health issue. We know there are major causes of female problems that warrant hysterectomies. The number one cause is cancer of the ovaries, the cervix or the uterus; trophoblastic disease is another cause; fibroids; endometriosis; birth control in women where pregnancy would have meant certain death; and a few other reasons, such as Down's Syndrome, resulting in mentally handicapped children.

Hysterectomies are a very normal procedure, but they are an invasion of women's health. That concerns me very definitely and very sincerely.

We have tracked down the sincerity and the integrity of these numbers. They originated in the Department of Health in Halifax, Nova Scotia, and they have been tracked to the hospitals. The numbers have great significance, they have integrity and they are valid.

My question for the parliamentary secretary is, will we investigate this phenomenal anomaly, which is very significant to the invasion of women's health? Whether it is due to overzealous doctors looking for cash crops on surgical procedures or whether it is due to fundamental underlying health problems for the women of Cumberland County, I would ask the parliamentary secretary to pursue this great anomaly.

Ms. Hedy Fry (Parliamentary Secretary to Minister of Health, Lib.): Madam Speaker, the hon. member asks a very interesting and a very pertinent question. It is one in which we are very interested at Health Canada, mainly because it has to do with the issue of the health of Canadians and of Canadian women.

Before I speak any further on the issue, I want to tell the hon. member that the issue of the number of services delivered has to do mostly with provincial governments and the medical profession. Therefore, that is not something I can comment on. At the same time, I can tell the hon. member that variations by region and by area may sometimes have some very valid reasons in specific interventions in health.

Be that as it may, the federal government is very interested in overall health care servicing: the type of services we get and the quality of services given across the country. We are working with provincial governments and with health care providers to find out how it is we can improve the quality of care and the appropriateness of service.

For example, the Minister of Health has just given money to the Canadian Medical Association to provide Canadian clinical practice guidelines. We need to look at the appropriateness of care to set clear guidelines and priorities for care so that we are