## Canada Health Act

They have driver training lessons and they also deal with their social programs as best they can with the participation of all levels of government. They even have ministers, priests and rabbis on call.

This dream was mentioned to me for the first time about 15 years ago. We are not anywhere closer to it now than we were then. My daughter is in a health care course at Waterloo. I recall that when I was speaking to her and her friends about a month ago about what they understood about health and medical care, they talked of holistic medicine in words which young people will use. But what they mean is the oldest understanding of medical care and health care. They understand that you have to have physical care, emotional care, social care and environmental and spiritual care. That is the only way to be healthy. Words ought to be the harbingers of action. For the past decade while we have been fooling around with the war over medicare, a new generation has been trying to usher in an understanding of health care. It is one to which we have not paid attention. That is why I have said with the greatest of respect to my colleague, the Minister of National Health and Welfare (Miss Bégin), that what this Parliament expects from her and what this country expects from her Government is health care legislation that allows us to reach that level of wellness that we know is there and is possible, and end the understanding in this country that all medicare is about is fights between the provinces and fights with the doctors. The day that happens, Mr. Speaker, we will have moved from the old achievement to the new opportunity.

## • (1550)

**Mr. Blaikie:** Mr. Speaker, I have a comment and a question for the Hon. Member for Rosedale. I know he seriously believes everything he has just said about the new generation of perception in health care, and I will take the liberty of counting myself among the generation to which he refers. But I would like to refer for just a minute to previous generations. His speech reminded me of a conversation that he and the Minister of Health had just before the Christmas break when they were trying to outdo each other as to which Party could take credit for medicare. I said at that time that both of them qualified for a scholarship with the Soviet academy of sciences for their revisionist attitude toward history.

In spite of what the Hon. Member for Rosedale may believe about medicare, in spite of what individual Progressive Conservatives may believe about medicare, is the Hon. Member prepared to deny that, for instance, in 1962 in Saskatchewan there was an organized campaign by the Conservative in that province, and, with all due respect to those on the other side, by the Liberals in that Province, against the New Democratic Government at that time which was trying to bring in the very program that he now lauds as one of the great social policy achievements of the country? It is a political and historical fact which you can find in every thesis that has ever been written about medicare that the resistance to medicare and insured hospitalization was provided by Progressive Conservatives in this country in particular. To deny that is simply to deny history. If you have a new position now, if you have evolved to a certain point where you are prepared to accept medicare—and I think probably the Hon. Member for Rosedale always was able to accept it—then at least he should have the decency to acknowledge that our country was not always one big happy family when it came to medicare. There were very real ideological and political divisions. To pretend that there are not and were not is dishonest.

Mr. Crombie: Mr. Speaker, I have three comments in answer to the question of the Hon. Member for Winnipeg-Birds Hill. First, I think the Hon. Member is mistaken. I believe the exchange was between the Minister of National Health and Welfare and the Hon. Member for Provencher rather than myself. Second, if there were any better example needed to make my point that there are still some people stuck in the wars of medicare and unwilling to free themselves from it and get on to what this country really wants, and that is programs for health care, I do not think I could have had a better example. Here is a Member, Mr. Speaker, who thinks the most important question he can ask is whatever happened to an event of which I was not even a part in 1962. Third, perhaps the Hon. Member should read Jim Laxer's book one more time. That is at least a good example of why his Party ought to change its thinking and get on to the 1980s and 1990s.

## [Translation]

**Mr. Lachance:** Mr. Speaker, I also want to pay tribute to the Hon. Member for Rosedale whose remarks today, as is often the case, transcend the mere description of events. In so doing, he has laid the foundation of what preventive medicine could and should be in the future, compared with the Medicare safety net of today.

I forgive him, just as other Hon. Members on this side probably do, his few partisan comments. In a way, they are to be expected in a debate such as this, but what really matters is that he reaffirmed, though in passing, the essential nature of this legislation which, as he said, remedies a number of deficiencies which have developed in the administration of Medicare in the past 15 or 20 years.

However, I should like him to explain to us how he would ensure the participation of health workers, men and women when I say women, I think of the nursing staff—in the advent of preventive medicine in which he seems to believe so strongly and which the medical profession seems to delay and resist for reasons which are probably legitimate but should be aired publicly, and which would make possible the involvement of nurses and health workers in a number of medical or paramedical acts, which now are the sole domain of physicians but which could be performed most of the time by the nursing staff.

## [English]

**Mr. Crombie:** Mr. Speaker, I might say to the Hon. Member that I read both the brief in 1980 from the Canadian Nurses Association in response to their program of health care