

Government Orders

second year in a row, the unemployed and the working poor will be the budget cuts' main victims, while large corporations and financial institutions will be spared for all practical purposes.

The Minister of Finance announces further cuts to the Unemployment Insurance Program but only a temporary tax on the capital of large banking institutions. The minister will beg for a mere \$100 million from banking institutions, when the Royal Bank alone made over \$1.2 billion in profits last year.

In addition, this government turned a deaf ear to requests from all sides, from the Bloc and the Conseil du patronat alike, to eliminate all business subsidies. Instead, the Minister of Finance chose to make cuts of more than \$300 million in social housing rather than going for the remaining \$1.5 billion in business subsidies. That is the federal approach.

Large corporations and banks can sleep in peace. The Minister of Finance clearly indicated in his budget that, once again, the unemployed and the disadvantaged will bear the brunt of the financial problems of this inefficient federal system, while at the same time ensuring that wealthy Canadians may continue, until the end of the century, to benefit from the advantages that flow from the establishment of family trusts.

So, this is one way Bill C-76 attacks the health of Canadians. In time, sparing the rich by squeezing more and more money out of the disadvantaged, the government is, in fact, taxing the health of the latter.

• (1540)

In this land of renewed and flexible federalism, the idea is to be rich and healthy not poor and in ill health. The second attack of Bill C-76 on the health area is a direct attack on the provinces' capacity to meet national standards in health care at a time when the federal government is substantially reducing its transfer payments. There is a certain irony in this way of proceeding. The federal government is cutting its transfer payments to Quebec by 27 per cent while at the same time developing national standards like those arising from the Canada Health Act and imposing them upon Quebec.

Quebec is expected to absorb a large portion of Canada's deficit, while the federal government continues to interfere in Quebec's jurisdiction. Quebecers will continue to pay for the duplication imposed by the federal system. There will still be two health departments, two human resources departments, two environment departments, and so on.

As for the health sector, if the federal government can no longer afford to meddle in this field of provincial jurisdiction, it should get out completely and leave it to the provinces, with the appropriate means of financing. This way, the federal government would at least save all the administrative costs related to its programs, which duplicate those of the provinces. One example is the pre-natal program established last year by the health minister, which is identical to the Quebec OLO program. Both the federal government and the provinces would gain and, in the end, the public would get more for the same money.

In Quebec, as in the rest of the country, people now realize that they can no longer get deeper into debt if they do not have the means to pay. Canadians and Quebecers balance their budget by reducing waste and frivolous spending. In every household, people consult each other to avoid buying the same item twice. By taking on two major financial commitments in the health sector, the federal government clearly shows that it still does not realize the seriousness of its financial situation. The only appropriate remedy would be to stop spending, in fields which do not fall under its jurisdiction, just for the sake of satisfying its compulsive need to centralize.

Canadian finances suffer from an acute case of federalism. In order to centralize everything, federal initiatives duplicate and overlap with provincial ones, regardless of the costs, or net results in terms of services to taxpayers. I draw the attention of this House to the eloquent silence of the health minister regarding the negative but foreseeable effects which this bill will have on health care services in Quebec and in Canada. If the minister is at all receptive to what goes on in her department, she must be aware of the serious impact of this bill on our health system.

She must see the flaws of a system which is obviously and quickly leading us to a two-level program. Since the hon. member assumed her functions as Minister of Health, she keeps on repeating that Canada's system is the best in the world and that she cares so much about Canadians' health that she will never sacrifice the five major principles underlying the Canada Health Act.

But the facts do not bear this out. If the minister will not sacrifice, as she claims, these major principles, her colleague, the Minister of Finance, has no scruples about doing it, although not directly, since that would require a good dose of straightforwardness, but indirectly. Principles or not, the Minister of Finance slashes the established programs financing, thus making deep cuts into the health care system.

The minister may claim over and over her attachment to the principles underlying the legislation, but what happens if the necessary financial support is not provided? The principles gradually but surely fall into oblivion. Those are the facts of the matter, and they are becoming more and more obvious to Quebecers. Canadians all over the country would not rush to private clinics the way they are doing if the attachment of the health minister to the principles of the Canada Health Act was