communities and other Canadians who are in need of financial help and special initiatives, some of which can be resources of the Government of Canada redirected from other government programs?

Are we so ineffectual as a Parliament? I would hope not. I would hope that government members would seize this particular opportunity and support the substance of the motion and thereafter have the ministers responsible, namely the Minister of Finance and the Minister of National Health and Welfare, be accountable for their dismal effort to date in responding to the social problems which are rampant in native communities across this country.

• (1710)

I speak of child care as one example. There are many other examples in terms of our aboriginal peoples to which I am sure every member will want to allude and, indeed, discuss in a fuller context. But let it be said that they were the first people and they, too, have rights. More important, we have an obligation as a Parliament to respond to those rights and those needs and thus far we as a Parliament, and I include members on this side, have been ineffectual in responding.

I realize that my time is somewhat limited and you are giving me the traditional wave to curtail my remarks. In conclusion, let me say that I support both the mover of the motion and the substance of the motion. I call upon my colleagues opposite, who are few in number today, but many of whom are aware of what is contained in this particular motion, to realize the intent with which it was moved, that being a sincere, honest, genuine belief that special initiatives are needed for our aboriginal youth, and to respond in kind. That is the kind of intention which is expected of members of Parliament who take the oath and take their seat in this great Chamber.

I call upon them to support this motion, as do I and all of my other colleagues, to make sure that it passes but, more important, to ensure that both legislative and administrative decisions be made to obtain the very laudable objectives contained in the motion of my hon. colleague.

Private Members' Business

Mr. Stan Wilbee (Delta): Mr. Speaker, it is a privilege to be able to speak on this very timely topic today. The motion before us calls upon the government to "consider developing special initiatives, in consultation with aboriginal peoples, to respond to the serious employment, education, and health needs of Aboriginal youth".

Like my hon. colleague, the member for Nunatsiaq, I believe these issues to be serious and pressing, and none more so than the health needs of our Canadian aboriginal peoples, the old as well as the young.

I will not begin my remarks by suggesting that the government is content with the health conditions of many aboriginal people. The fact is that it is not. There are simply too many indications that aboriginal people have not yet attained the same level of health and well-being shared by most Canadians.

The facts certainly suggest that there is cause for concern, but they also suggest that there are significant opportunities for bringing about positive and lasting change.

If we look at the registered Indian population in Canada we see that there has been a dramatic decline in infant mortality rates in recent years. This change has come about through better neo-natal and post-natal care and hospital deliveries. Yet this improvement has not been enough to alter the fact that the infant mortality rate of our native population is still twice that of the over all Canadian population. If we consider aboriginal youth, some 54 per cent of status Indians are under the age of 24. This compares with a figure of 38 per cent for non-native Canadians.

What then of the living and health conditions of our aboriginal youth? While aboriginal youth can now expect to live longer compared to 15 or 20 years ago, the life expectancy of an Indian male is still only 63 years compared with 72 years for the average Canadian male. For aboriginal women the figure is slightly better at 72 years compared to 81 years for the average Canadian woman.

The more telling statistics have to do with the incidence and causes of Indian and Inuit youth deaths and suicides. It is a deplorable fact that the highest rate of accidental and violent deaths occur in the 15 to 29 year old age bracket. Similarly, the highest number of Indian suicides are among the 20 to 24 year olds, which is five times the Canadian rate for this age group. In the case of