I suggest the government is out of control in its restraint program. It feels it must outdo the Conservatives who have been preaching restraint for a few years now. It is now $50 million above the target for cutting back federal-provincial programs it announced in September. Last Friday it wiped out another $20.6 million by eliminating the Ministry of State for Urban Affairs and 185 employees.

It is important to face the fact that the federal government is again going back on a promise made to the provinces. In 1967 the federal government promised it would put up $500 million for health resources fund programs. The minister takes some comfort from her statement that they had either spent or committed more than 80 per cent of that $500 million. I want to remind the minister that there is a hell of a lot of difference between $500 million in 1978 and the $500 million which was promised by the then minister of national health and welfare in 1966 and 1967. To meet the goals conceived in those years when this program was first proposed would require, today, close to a billion dollars.

Miss Bégin: How is it the provinces did not apply then?

Mr. Orlikow: That is an old story. Very often it happens that the provinces, particularly the have-not provinces, possess neither the financial nor the technical ability to meet the timetable set by the federal government. I would have thought the present minister would have known this and given them some extra time, rather than cutting the provinces off without discussion, in a unilateral way.

I do not know whether the hon. lady has read some of the speeches which were made by the then minister of national health and welfare when he brought this legislation forward, but there is a world of difference between what he proposed, the discussions he promised the provinces, and the unilateral decision which has been made by the government and by this minister who—under tremendous pressure from her cabinet colleagues, I am sure—has brought down the measure we are considering.

Consider what the minister of national health and welfare said in June, 1966:

> Such a program will undoubtedly help to create a professional climate to attract increasing numbers of able people to study and practice medicine and related professions and will thereby improve still further the quality of care available to our people.

He went on to say it would require large investment and lengthy planning in co-operation with the provinces, and that government proposals had been prepared on the basis of visits to provincial departments of health. Were visits made to the appropriate provincial departments when the federal government decided to terminate this program with almost $30 million unexpended? No, they were not. It was done on a unilateral basis without the consent or approval of the provinces. The basic purpose at that time, according to the minister, was to meet the need for trained people and catch up where there was a shortage of trained personnel. Have we done these things? Of course we have not.

I am sure the minister has received many more representations than have come to me on the subject, but I have received quite a few with regard to the shortages which still exist. If I have time I will put on the record some of the comments made by those who work in the field. They are the ones who ought to be satisfied, they are the ones who, if they are not satisfied, come to members of the opposition and communicate with the press.

When we object to cutbacks of this kind we are not speaking in a partisan way, though some may think otherwise; we are expressing the views of those who are most concerned with the situation.

The minister went on to say at that time that an ad hoc technical committee met with governments and national associations, estimated provincial needs, and dealt with needs for long-term projections as a basis for allocating funds and the creation of a health resources advisory committee. He was concerned there should be discussion of that kind.

What I want to ask the Minister of National Health and Welfare now is this: were consultations of that kind held with the provincial governments and with the various professional disciplines before the government embarked on its present course of action? And was any agreement forthcoming with regard to those proposals? I do not think there was, but I would be interested in getting the views of those organizations as expressed to the minister if she has them.

The former minister said the federal government had stressed the importance of close consultation and continuing liaison between the federal and provincial governments at all levels and that, although the moneys would not be fully used in the early years, their long-range provision would ensure that adequate opportunities were made available for the provision of health facilities. That was the purpose of the bill. It is obvious to anyone who would want to look at the facts that we still do not have adequate physical facilities or funding of programs to attract into the field of health care the kinds and numbers of people who are required. We still have people who are working for salaries that are a disgrace. There is a case in Winnipeg, and I am sure that it is not an isolated one, of a man with a Ph.D. in chemistry who was working in the field of cancer research for a number of years and was drawing a salary of $13,000 a year.

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The minister had some flattering words for the people who work in medical research, and they deserve them. However, this country does not deserve to have the kind of dedication it gets from these people in these fields because it does not treat them in such a way that they could get a feeling that the country appreciates what they are doing to help meet our health needs.

When the bill was introduced in 1966 many members on this side had reservations about it, which they expressed, but which were ignored by the government. I do not often go back to previous speeches I have made and remind hon. members of what I said, but I could not help, while looking at the speech