

Roblin can ask some questions, rather than stopping now, and then having the effect of closing the debate if I spoke later.

**Hon. Orville H. Phillips:** I think that would be perfectly agreeable and would show simple courtesy to Senator Roblin.

Honourable senators, yesterday I asked the honourable senator if the amount included the \$315,000 for the study of Bill C-22. I am afraid I was distracted this morning in committee. I should have asked that question in committee, but I now ask my honourable friend that question.

**Senator Frith:** My understanding is that it does include the study of Bill C-22. In other words, honourable senators, these are the figures right up to date.

On motion of Senator Frith, debate adjourned.

#### CONSIDERATION OF SEVENTEENTH TO TWENTY-EIGHTH REPORTS OF COMMITTEE—DEBATE ADJOURNED

The Senate proceeded to consideration of the seventeenth to twenty-eighth reports of the Standing Committee on Internal Economy, Budgets and Administration, presented in the Senate on June 9, 1987, approving budgets of the following committees:

- 17th Banking, Trade and Commerce;
- 18th Energy and Natural Resources;
- 19th Fisheries;
- 20th Foreign Affairs;
- 21st Legal and Constitutional Affairs;
- 22nd National Finance;
- 23rd Official Languages;
- 24th Regulations and other Statutory Instruments;
- 25th Social Affairs, Science and Technology;
- 26th Social Affairs, Science and Technology;
- 27th Standing Rules and Orders;
- 28th Regulations and other Statutory Instruments.

**Hon. Royce Frith (Deputy Leader of the Opposition)** moved the adoption of the reports.

He said: Honourable senators, in this case also, I think I should move the adjournment of the debate in case Senator Roblin or other senators have some questions on the basis of figures presently before them or available to them.

**The Hon. the Speaker *pro tempore*:** Is it agreed, honourable senators?

**Hon. Senators:** Agreed.

On motion of Senator Frith, debate adjourned.

#### HEALTH CARE

##### MOTION FOR APPOINTMENT OF SPECIAL COMMITTEE—DEBATE ADJOURNED

**Hon. Hazen Argue,** pursuant to notice of March 12, 1987, moved:

That a special committee of the Senate be established to examine Canada's health care system and report upon the role that preventative medicine and other preventative measures, together with the provision of a wider range of health services, can play in providing a more effective health care system, thus contributing to the health, happiness and longevity of Canadians; and further to examine how such an improved health care system might modify or control the ever increasing costs of health care;

That twelve Senators, to be designated at a later date, four of whom shall constitute a quorum, act as members of the special committee;

That the committee have power to send for persons, papers and records, to examine witnesses, to report from time to time and to print such papers and evidence from day to day as may be ordered by the committee; and

That the committee present its final report to the Senate no later than twelve months following its establishment.

He said: Honourable senators, I am pleased at this time to move this motion, standing in my name, that a special committee of the Senate be established to examine Canada's health care system. I think honourable senators will agree that over the years Canada has made great progress in establishing a health care system that has been of tremendous value to Canadians. I put this motion forward in a constructive manner, believing that the health care system which we now have needs improvement and change.

Trends across the country indicate that the system is not only very expensive at the moment but that costs are increasing province by province at a rapid rate. The amount of money committed by the people of Canada to the health care system of this country is very large. Canadians, in 1985, spent \$39 billion on health care. The federal government spends some 8 per cent of its total budget on health care. Approximately 25 per cent of the provincial budgets is spent on health care. Health care in Ontario represents almost 30 per cent of its budget. Projections suggest that costs will rise at an accelerating rate.

● (1530)

One of the main reasons for that is an aging society. As the years pass, a larger and larger proportion of Canadians will be 65 years of age and over. Therefore, the costs of medical care will rise. Individuals 65 years of age and over accounted for 10 per cent of the population in 1985. That figure will rise to 20 per cent by the year 2031. The proportion of those 75 years of age and over will rise at an even more dramatic rate.

The trend has direct implications for health care costs. While the average number of days in hospital for Canadians of all ages was 1.1 in 1981, the figure was 8.85 for those 65 years of age and over and 14.9 for those 75 years of age and over. Similarly, in the long term care sector, individuals 65 and over average seven times as many days in special care or extended care facilities as do Canadians of all ages. Those 75 and over