

Business of the House

debated for a few days the measure then has inevitably to come to a vote, is that we have to reach beyond the press gallery—I see two of them here this afternoon, which is double the advantage we usually enjoy at this hour—and go to the people of Canada to whip up public opinion on whether the measure is a good thing or a poor thing.

In this respect I suggest to the press, to the President of the Privy Council (Mr. Sharp), and to the parliamentary secretary that the government has failed. There has been no compelling rush of public opinion on this matter saying that the measure should pass because it has been thought up by a wise and omnipotent government. As far as I can see the government does not have a friend across the land on this issue and until it can show me some—I do not speak about friends on the other side of the House because obviously it is full of friends—then I think we can argue this case until the end of this year or any year. I think it is that important. Ministers have not made a case. They have taken an arbitrary position and decided to impose it on provincial governments and territorial governments, scream as they will. I think that is wrong, Mr. Speaker.

I would immediately remove that side of the argument from any abstract of the will of the majority prevailing. If the will of the majority were to make itself known to the people of Canada, the people would say, "Let us call a general election and get rid of these people who obstruct the will of the majority."

I say this as a corollary to what I have said so far: must opposition always be considered to reflect the minority view? Is there not a point that my colleagues, myself and some people on the other side, should stand up to show that we somehow do happen to reflect the will of the majority of Canadians? I think we did it with regard to *Reader's Digest* in some ways. Somehow an accommodation on that particular issue was found within the government. Why can it not find it on this particular issue?

I spent most of my early life in politics fighting over the issue that I thought nobody should ever be sold down the drain because of illness within the family. I always thought that medicare and hospital plans were two of the brightest adornments of this particular parliament. If it will please anybody, one of them was the work of a Conservative prime minister and the other the work of a Liberal prime minister.

Mr. Benjamin: After Tommy Douglas.

Mr. McCleave: Yes, indeed. May I pay my respects to the hon. member for Nanaimo-Cowichan-The Islands (Mr. Douglas)? I thank the hon. member for Regina-Lake Centre (Mr. Benjamin) for his intervention; he is quite right. It was the work of a good number of well meaning people, some of whom did not have a role in government but at least had a role in the public conscience. I am saying the public conscience is very much at stake in the argument we are getting into now.

I promised I would try to divide my time with other people, Mr. Speaker. I should like to answer the hon. member for Trinity (Miss Nicholson) about cures being made in committee. But let us face it, that is not always practicable or possible under the scheme of things. With our very aggressive whips such as the hon. member for St. Boniface (Mr. Guay) I am sure a cure in committee would

[Mr. McCleave.]

be as likely as reduced taxes before the end of the current parliament.

I have other thoughts but the time runs short, Mr. Speaker, so I will sum up what I have attempted to say. There is a public conscience on this thing that is not reflected in the very arbitrary action that is proposed here this afternoon.

Mr. Deputy Speaker: Order, please. Although it is not written into our Standing Orders, I am looking at the clock and see there are 13 minutes left before the taking of the vote on this matter. I would be ready to recognize the hon. member for Regina-Lake Centre (Mr. Benjamin). I saw two hon. members interested in speaking, and now I see three. I hope they might consider allowing other members a little time so that they can share whatever time is available.

Mr. Les Benjamin (Regina-Lake Centre): Thank you, Mr. Speaker. I shall try to take only half the time remaining so that hon. members to my right may have an opportunity to speak.

I want to say that even with a majority government there still is and there has been in the past the odd occasion, the rare occasion, when a government should decide not to proceed with a measure it has been attempting to get through parliament, not just because opposition parties are united in opposition to the measure but because it is so apparent that not only every province but the great majority of Canadians are opposed to the legislation.

This is one of those rare occasions of unanimity among all provinces and unanimity among all opposition parties—which by the way represent a majority of the voters in Canada. Given that unanimity, given what has been said by medical authorities, members of hospital associations and those associated with health care, surely this is one of those rare occasions when the government should not proceed with a measure which it originally thought was worth while. Surely it is now obvious to the government that this should not be proceeded with.

In a democratic system majority also means responsible government. I submit that the attempt by the government to bring in rule 75C, the attempt to proceed with this legislation, is the height of irresponsibility. The government keeps claiming it is second to none in fighting for national unity, in standing for Confederation, in consulting for co-operative federalism with the provinces, etc. But here we see a betrayal of the principles of Confederation and co-operative federalism. What do the Liberals say now about national unity and Confederation?

● (1720)

Surely in these times when the government says it must practise so-called restraint to fight inflation we should not attack the health services of this country. They are basic to the well-being of our citizens. They should be the last to feel the effects of restraint. We should spend more on them, not less. Not only should the government spend more on the program; it should embark with the provinces on other shared-cost programs for pharmacare, dental care, preventive medicine, home nursing care, and so on. A host of measures is yet to be enacted, measures which countries much poorer than ours have already adopted.