

Medical Care Act

speak on behalf of my profession, however, I would say first of all that the federal government does not contribute to the cost of chiropractic care, the cost of dental care, the cost of optometric care, physiotherapy care, or podiatric care. The government would lead you to believe that this is a 50-50 operation but it is not. It does not cover the cost of administration either.

When the cost of medicare is increased to the provinces as a result of this bill, in all likelihood what will happen to the paramedical professions is that the provinces which provide those services through their own premiums will have to reduce the services in order to maintain a lower level of cost to the public. In the paramedical field, my own included, we will see a reduction in the services offered for the health of Canadians. It happened in 1968, and it could happen again if the bill passes in its present form.

● (2150)

Mr. Alex Patterson (Fraser Valley East): Mr. Speaker, may I participate briefly in the debate on the motion of the Minister of National Health and Welfare (Mr. Lalonde) that Bill C-68, an act to amend the Medical Care Act, be now read the second time and referred to the Standing Committee on Health, Welfare and Social Affairs, and on the amendment proposed by the hon. member for Broadview (Mr. Gilbert).

We have listened with interest to the debate on this measure. I was somewhat alarmed and amused by the intervention this afternoon of the parliamentary secretary who made an extensive speech and suggested that this debate should be concluded speedily because the measure had been discussed for a number of days. I assure him that we would continue debating this measure for a considerable time if there were hope of changing the government's mind. But the government does not usually change its mind.

An hon. Member: What mind?

Mr. Patterson: The present situation is remarkable. No matter what is done, the government maintains its bull-headed attitude and says, "Let the opposition talk as long as it wants; we will go ahead and do what we want." Government members look on themselves as experts in all fields and cast aside opposition contributions as irrelevant or useless.

The following words appear on page 5 of the pamphlet "A New Perspective of the Health of Canadians", published in 1975:

Good health is the bedrock on which social progress is built. A nation of healthy people can do those things that make life worth while; as the level of health increases, so does the potential for happiness.

In presenting this bill, which will have consequential effects on the health of Canadians, the government is not moving in the direction of better health for Canadians; it is moving in the direction of poorer health. I do not expect that the government intends this to be so, but that will be the end result if this bill is passed.

I should like to emphasize for a few moments the importance of health and physical fitness to our nation. I think the government in some ways has taken an admirable stand in its attempt to encourage Canadians to become

[Mr. Brisco.]

physically fit. Canadian television is regularly broadcasting commercial messages concerning the importance of physical fitness. As well, I feel the government ought to be commended for its program of education, including television messages, to encourage people to stop smoking. This is necessary and effective, and I hope it continues.

There is no doubt, Mr. Speaker, that there is a growing awareness among Canadians that participation in activities such as smoking, drinking, over eating and wrong eating habits exact a terrible toll on the individual's health and well-being, as the minister has emphasized in his pronouncements.

An hon. Member: Oh!

Mr. Patterson: I hear a colleague interjecting. Perhaps he thinks my remarks relate to him.

An hon. Member: The hon. member's remarks are pretty close to home.

Mr. Patterson: Many people may even be able to see the relationship between these activities and the increase in the cost of hospital care and medical care. There are, however, not enough people in this class, and our efforts should be directed toward further education of our people in the importance of preventive medicine. Canadians must become more responsible for their own health. I agree with the old adage that "an ounce of prevention is worth a pound of cure."

In some cases the responsibility for these preventive measures will be assumed by individuals who want to change their eating habits and their drinking and exercise habits. However, as parliamentarians we must be aware of the fact that if enough people do not voluntarily assume the responsibility for corrective measures in their own behaviour, governments may be forced to legislate further in the behavioural field. For instance, I wonder just how long the non-drinking segment of society is going to put up with the added cost of health and medical care that can very readily be traced to the drinking segment of society. How long, for example again, will society let the drinking driver who is involved in a car crash exploit the non-drinking drivers by receiving benefits under medicare? There is a growing number in society who feel that a drinking driver should not receive free medical and hospital care if he is involved in a car crash.

There are millions of others in our society who may not drive cars while drinking alcohol but who increase the cost of medical and hospital care considerably because they abuse alcohol. I suggest that some thought should be given to imposing an additional tax on the liquor industry in order to pay the bills of those whose illnesses or injuries are attributable to the consumption of alcohol.

The same may be said of those who smoke. There is a great list of diseases afflicting the human body, and requiring treatment, which are attributable to the inhalation of cigarette, cigar, and pipe smoke. I suggest that smoking imposes an incredible, added cost to medical and health care services. Would it not be fair, for example, to charge a non-smoker a lower medicare premium than we charge a smoker? That would be fair. The same could be said about those with a disposition to over eat and those