

Supply

advisory committees which attempt to explore solutions to problems by working together, and that is as it should be.

In the last two years, for example, several new initiatives central to the better management of health resources have been launched. I would like to mention a couple, if I may.

In 1989, the federal government, the provinces and territories created a new Canadian co-ordinating office for health technology assessment and a new National Health Information Council was established. A project was undertaken on health care quality assurance and a paper was commissioned on medical manpower issues and the strategies available to better manage human resources. There is a role for the federal government to act as a co-ordinating agency.

We have to remember first and foremost that we have our responsibilities as a federal government, but then the provinces have theirs and they must live up to theirs.

In conclusion, what we are here to talk about is our commitment to our health care system. It seems to me there are four bases upon which Canadians can establish and confirm, as it were, their commitment to our health care system. First, we must have a cadre of well trained and committed health care professionals supported by a large number of volunteers committed to the system. That we have.

Second, we must have good health care facilities, the infrastructure for health care facilities. While these things can always be improved, compared to the other countries of the world it seems to me we have pretty excellent facilities.

Third, Canadians themselves must believe in the importance of our health care system and our medicare system. I would submit that every member of this House would recognize the commitment that Canadians have and the high level of value that Canadians place in their health care system.

Fourth, we must have a solid financial base to ensure the long-term security of that health care system. That comes from governments that manage their affairs soundly and that live within their means. It ensures that we have sound financial management of the govern-

ment, which in turn will lead to a sound economy in the country. That is probably the most important reaffirmation and confirmation of the long-term viability and future of our health care system in Canada.

• (1730)

Mr. Chris Axworthy (Saskatoon—Clark's Crossing): Mr. Speaker, I listened with interest to the member's comments and to professions of commitment on the part of the government to the health care system in Canada, while all the while it is ensuring that the provinces have inadequate resources to fund their medical systems.

If the member wants to look close to home, he will see the Newfoundland budget just last week with cuts in beds in the health care system there. In the Manitoba budget it is in the same situation. The budgets of today will no doubt be reacting to last month's federal budget.

We see the implications of the cuts to medicare, the cuts in transfers to the provinces, very quickly by seeing the cuts that have been made at the provincial level. Let us not pretend that this government's budgetary and financial measures are not having immediate detrimental impacts on the health care system across this country.

Let us not pretend that we could not predict that is what was going to happen. After three years in a row of cuts by this government we are seeing major inroads into the quality of our health care system.

It is interesting—and I will come to my question in a moment—that the Liberal Party moved the motion referring to a commitment to medicare. After all, when it was in government, on at least two very clear occasions it also cut funding from the federal government to the provinces for medicare. While in government both the Tories and the Liberals have ensured that resources available to the provinces for health care have been cut. In opposition, both those parties say different things.

If we go back and look at the record, we see that when the Liberals were making cuts the present Minister of Finance was chastising them for undermining the future health and post-secondary education prospects of Canadians. As soon as the role reversal takes place, we have cuts made by the Conservative governments and protestations by former Liberal government members.