

Medical Care Act

It is little wonder that many of the top medical researchers in the United States are Canadians, trained in Canada but working in the United States because they have ready access to research funds. Every year more of our best researchers find positions south of the border and I am getting sick and tired of the government policy, or lack of policy, that is causing us to lose the fruits of their research.

More than one of my colleagues in this House have called on the government to withdraw this bill and enter into meaningful and open discussions with the provinces on the state of medicine in this country and to work out the direction it should take from here. That is what we should be doing, working with the provinces rather than trying to welsch on the commitments made to them. I join with them in saying to the government that we cannot accept such an attitude on the part of the government on such a vital issue. For any minister of the government even to suggest that this matter is not open to discussion and negotiation is despicable. This is not Cuba. I know what the Prime Minister's attitude is toward our parliament and I know full well what his attitude is toward federal-provincial relations. But I suggest that the Prime Minister and his Minister of National Health and Welfare (Mr. Lalonde) should adopt a different attitude.

We need more, not less, federal participation in medicare. We need more, not less, federal participation in medical research. Medicare and medical research must work hand in hand to meet the standards of treatment and to find cures for the diseases that immobilize our citizens, fill our hospitals, and occupy the time and efforts of our doctors and nurses. Every discovery by medical researchers frees more of our citizens for productive activity. Every discovery reduces the demands on our medical people and facilities.

I call on the government to convene a conference of health ministers and abandon its current excuses. They should get together to discuss a policy that will be honest and fair to the provinces and the people of Canada.

Mr. Kaplan: Mr. Speaker, would the hon. member permit a question?

Mr. Alkenbrack: Yes, Mr. Speaker.

Mr. Kaplan: The hon. member said the government should spend more, not less, on medicare. I wonder if he is aware that this bill proposes a very substantial increase in the cost of medicare, not a reduction. It proposes 14.5 per cent for next year, which is more than the anticipated inflation and more than the increase in the gross national product. Does he realize this when he criticizes the government's approach to such expenditure?

Mr. Alkenbrack: Mr. Speaker, I am glad the hon. member asked that question. The rate of federal input is still reduced by the ceilings. Moreover, the ceilings that the hon. member mentioned are not even pro rata with the total rate of inflation under this government, nor do they keep in pace with our increase in population.

Mr. Edward Broadbent (Oshawa-Whitby): Mr. Speaker, in speaking at this stage I want to try to put Bill C-68 in a somewhat broader context in terms of the Liberal party's philosophical approach to governing in this country.

[Mr. Alkenbrack.]

The Liberal party never does anything unless it is kicked into it, either because of a marked shift in public opinion or because of some electoral happening that results in a minority government situation. It then suddenly becomes very progressive. When it has a majority it goes right back to its true tradition which is to maintain things as they have always been, particularly the distribution of wealth, or it tries to move marginally to the right so that the rich can get somewhat richer. That, precisely, is the effect of this bill.

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A society can solve maldistribution of income two ways. The first method is by dealing with the problem head on, dealing directly with the hourly wages or salaries paid to people. The tax system can be used to redistribute income. In the alternative, the government can implement programs, or services, paid for by the general community. These free the people in the community from the obligation of paying directly for goods or services provided by the programs. Medicare is a good example of the latter situation.

The government, by providing a tax supported medical service for all people of this country, has been redistributing part of our wealth. We have enabled the poor and people of average income to obtain services which, if left for the open market to provide, they never could have afforded. That precisely is why Canada and other societies provide that kind of universal service.

Bill C-68 would limit the federal contribution in years ahead to medicare. What is wrong with the measure? First, it reneges on the government's obligation to virtually every province in this country, of whatever political stripe. Each province feels that the government has reneged on a profound commitment to share on a 50-50 basis, without ceiling, the cost of medicare. Therefore this bill represents a betrayal of a principle, the renegeing of an agreement entered into some years ago.

Second, it will increase the degree of inequality in Canada. If the provinces, particularly poor provinces, are forced to pay higher cost they must obtain revenue which the federal government would have provided from other sources. It is difficult for provinces, particularly poor provinces, to do that. They will need to introduce regressive measures such as deterrent fees or sales taxes to pay for programs their people require. Therefore in terms of Canadian federalism this bill is a step backward, a step which, on balance, favours richer provinces more than poorer provinces. That is the first major implication of this bill.

But even richer provinces will have less money to pay for medical services. When richer provinces like Ontario feel the pressure and are forced to cut back their share of spending on medical programs, the poor people and average income earners even in those rich provinces will experience a relative decline in their position in society. That is the implication of the Liberal party's approach to medicare at present. The immediate result of this bill will be an increase of inequality in our society. The rich will never suffer; only the poor and average income earners will get the boot in the pants from this action.