

Canada Shipping Act

not yet in force will be particularly affected by this bill. We hear that New Brunswick, Newfoundland, Prince Edward Island and Quebec will enter the plan, but at present only the province of Nova Scotia in the Atlantic area is in the medicare plan.

Provinces which have medicare plans, because of the discontinuance of Part V of the Canada Shipping Act, are being forced to assume almost half the medical costs of a group of people in respect of whom the federal government formerly paid 100 per cent of the cost of assistance. Now, under this bill, the services are to be provided to fishermen under the medical care plans of the various provinces and the provinces will have to pay 50 per cent of the cost of such services, which traditionally were a federal responsibility. It would seem to me that the provinces probably will have enough difficulty trying to provide hospital facilities under this increased responsibility. This is another example of the federal government simply passing on the responsibility to the provinces.

Some hon. Members: Oh, oh.

Mr. Comeau: This is true. If the minister wishes to argue this point, I shall be glad to hear him. As I pointed out in respect of Canadian fishing vessels, practically all the fishermen have taken advantage of the services provided. Because of the high crew per ton ratio on fishing boats there has probably been an abuse of the services provided in respect of this inexpensive medical care, free drugs and so on. In some instances, fishermen probably place their entire families on the crew list in order that they may qualify for medical care. I agree that something should be done to correct that situation.

The amendments in Bill C-10 provide that service to sick mariners will not include any service to which any fisherman is entitled under a medical care plan. The department's main contention is that this service to sick mariners will be redundant if medicare is also available in the province. Under Bill C-10 there will be one major change. Whereas previously fishermen received free drugs under this program, this no longer is to be the situation other than those drugs administered directly to the sick mariner by a designated medical practitioner. This again is something about which I suppose I cannot do anything at this late date, although I have tried. It seems to me we are decreasing a service which traditionally has been provided to these people. The Canadian crews of coast-

[Mr. Comeau.]

al vessels have received this service in the past although I understand it has constituted only a small part of the program. The result of the amendments in Bill C-10 is to eliminate the service to sick mariners as medicare is implemented by the provinces.

However, there are many provinces which still have not signed an agreement under the medical care act. These include British Columbia as well as the Atlantic provinces to which I referred a moment ago. The result of this bill, therefore, will be that the service to sick mariners will be completely phased out. Departmental officials expect that existing clinics in certain ports will be phased out over the next year or so. But to my mind they are bound by international agreement to maintain a service for sick mariners in cases involving such things as venereal disease. I hope this service will be continued.

In the case of foreign vessels, the department argues that even though this aspect of the service makes money it is no longer required for modern shipping. This probably is a valid argument. However, although most shipping lines take adequate care of their crews and maintain adequate insurance policies, there is no guarantee that all ships will do this. It is still possible that the owner of a small shipping line or of an unaffiliated tramp steamer would prefer to abandon a sick crew member rather than care for him. I realize such occurrences have been few during the past century and that probably there is a valid point in saying that the service is not needed. However, there is no assurance that such situations will not occur again. In such cases the municipal or provincial authorities would be responsible for the sick man's expenses. There would be no way to collect from the ship owner. Therefore, because this possibility exists, and because federal involvement in this area over a century implies an historic obligation, I submit a case can still be made for a residual guarantee of federal responsibility.

One might accept a federal withdrawal from this service so long as the federal treasury would underwrite the cost of an indigent seaman abandoned in illness. However, I do not see such a provision in this bill. The actual medical services might be administered through normal community facilities, but the provincial government could claim the actual costs from the federal government. Perhaps this should be the situation. I have raised my objections to this bill and thank the House for giving me the opportunity to do so.