

### Immigration

sions he reached in a number of instances—he kept referring to reasonable grounds, and of course that is the sum and substance of the attempt which is being made by the minister today in removing that particular section from clause 19.

I think there has been a bit of a snow job here, quite frankly, and I know that the hon. member for Provencher (Mr. Epp) is well aware that it is taking place, because he referred to it last night. There is an attempt to talk about the question of possible expense. There is the so-called compromise of the minister. Instead of having a medical specialist, there will be another medical officer.

**Mr. Epp:** Same department.

**Mr. MacDonald (Egmont):** That is right. Surely, if there is a question of expenses, the expense is going to be incurred similarly with the second medical officer as it would be with a medical specialist, unless it is found that there are two different rates of pay.

With respect to possible litigation, I regard that as a complete distraction from the essence of the argument and the essence of the attempt which is being made here by the minister in this motion. Quite frankly, I am shocked that the minister would have the effrontery, having given the committee the responsibility of reviewing the bill—which is its parliamentary obligation—to call in the expert witnesses who were made available by the Department of Manpower and Immigration. It was not as if we did not have such expert advice offered to the committee.

I well recall the evening the medical officers came and testified in our committee with respect to this specific clause in terms of their own responsibility. I think members were well aware of all the implications of what was being done in the amendments which were moved and accepted in the committee at that time. One of the things which bothered me on that occasion—and, of course, it bothers me again today—is that I think we have developed a new kind of sacred deity, a new area of unquestioned authority. It used to be that people in my profession, the clergy, could make pronouncements which would simply go unquestioned because they spoke with the kind of mantle of authenticity which no one in his right mind would ever seriously question. We are now living in a much more modern period, and that is no longer the case.

**Mr. Stanbury:** Especially since you have been here.

**Mr. MacDonald (Egmont):** Perhaps. But whether one is inside or outside this place, having any clerical mantle does not add any sense of authority or infallibility to one's position. That is likely a pretty good thing; I have no hesitation in saying that. However, in this generation we have established a new system of infallibility. We have moved from the area of theology to medicine, so that now when somebody who comes out of medical school either as a general practitioner or, perhaps more significantly, some kind of medical specialist and makes a pronouncement as to what he can and cannot do as to the absolute accuracy and fairness of each and every pronouncement or decision he renders, no one in his right mind

[Mr. MacDonald (Egmont).]

must question that. Quite frankly, I am not prepared to accept that. I have found that even medical specialists can make mistakes and that two highly trained medical practitioners can, on occasion, be in disagreement. I have found, also, that there is no absolute scientific conclusion in respect of each and every medical examination.

● (1240)

This is the reason that from time to time—all of us have experienced this—when we get a medical diagnosis which does not seem to explain adequately a certain condition, we look for a second and sometimes even a third opinion. Who in the chamber has not heard of cases of individuals who have gone first to one doctor, have not been satisfied with the diagnosis or recommendation of that doctor, and have moved on to a second one and then to a third one, finally, to get satisfaction? Perhaps the Minister of National Health and Welfare has not heard of it yet. Perhaps he is so much in awe of medical practitioners and those who reside in his department who practice the medical arts, that when they make a pronouncement, *ex cathedra*, so to speak, he thinks it must be accepted without question. Certainly he received that message very clearly from the medical specialists who were on hand the night we discussed this whole matter.

I am sure they were not happy, not because we were adding a burden to some extent but simply because we were allowing for the kind of human fallibility that can take place even in medical circles. That is what concerns me in this instance, and that is why I wish the Minister of National Health and Welfare had remained long enough to hear some other comments, particularly from his own colleague, the hon. member for Niagara Falls.

It is not even primarily the question of medical specialists. In my opinion it is the change of wording from “in his opinion” to “on reasonable grounds”, because it becomes very clear, when we think about it for a moment, that with the words “in his opinion” which the minister would like to reintroduce, no mistake is allowed, no error, no need for a further review on the part of one who can adequately judge whether or not the medical diagnosis or medical report was totally accurate and correct.

My colleague has already indicated instances where it has occurred to the detriment of the individual applicant. I am sure the hon. member for Provencher or any other members of the House were not seeking to establish a regime that would produce the kind of litigation suggested by the Minister of National Health and Welfare for the Minister of Manpower and Immigration. If that is the problem, I do not think there was an attempt on the part of the minister, and I say this respectfully, to resolve that problem, then surely we could have a better amendment than the one he has currently proposed, because what he has done merely is again to allow—from my point of view and that of the committee, because of the motion that was approved there—the almost unappealable and unreviewable situation of a medical report jeopardizing or preventing a legitimate application going forward.