

properly distributed by the Alberta government among ordinary Albertans. Many have gone to Alberta and come back because of the high cost of housing and everything else. Many ordinary Canadians are not able to afford the cost of such wealth. But that is somewhat beside the point of our debate this evening.

I want to make another point in response to what the hon. member for Calgary Centre said about a remark made by the hon. member for Broadview-Greenwood (Mr. Rae) concerning geological roulette. It cannot be denied that much of the good circumstances in which certain provinces and people find themselves has only to do with the fact that they happen, through no virtue of their own, to be in places under which very valuable resources are found. When speaking about the undeserved nature of the wealth which accrues to certain people in certain places at certain times, we must realize that none of those resources belong to any of us. They belong to the whole world. Many Canadians are guilty of acting as though the only debate that is important is whether the resources belong to the provinces or to the federal government. We forget we have another responsibility.

In the final sense, none of us are owners of the resources. We are the stewards or trustees. We ought not to act as if the only game in town is the game we play with each other to determine who will get the most benefit from these resources. We must begin to act in a way which reflects the wider knowledge and larger picture. These resources may be put to better use in the future by other people in other places. We should have the wisdom to use the resources wisely so that more alternatives might be open for the future. That is what we must keep in mind during the interminable debates in this House which more often than not leave out that kind of global perspective.

This morning I attended a meeting of the Canadian Health Coalition, a national coalition of various groups which came together because of their mutual concern about the state of Canada's medicare system in 1979. It became obvious to people across this country that federal-provincial fiscal arrangements, as they pertain to health care and had been determined in 1977, were not working in a way that was beneficial to the maintenance and improvement of the kind of health care system which Canadians regard as normal and have come to expect.

In 1977, the Established Programs Financing Act came into being. This recognized that there were certain programs such as medicare, post-secondary education and hospitalization which were regarded as established. The logic behind it was that these programs were written into the social and political fabric of Canada and did not have to be worried about any more. The provinces were to be given a certain amount of money through block funding and tax point transfers, and because these programs were thought to be beyond the pale of political debate, it was believed the money would be used appropriately.

However, it should come as no surprise that programs such as medicare, considering how young they are, turned out to be

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not all that established. Indeed, many of the social programs which have come into being since the war have never really become established. They might be better described as "never safe programs". As soon as economic times become tough, the inherent philosophical compromises which existed at the time in which these programs came into being re-emerge.

● (2130)

**Mr. de Jong:** That is why they should be in the constitution.

**Mr. Blaikie:** The hon. member for Regina East (Mr. de Jong) suggests that that is why they should be in the constitution. Indeed, witnesses before the constitution committee have suggested that one of the basic conceptual inadequacies of the constitutional proposal now before us is that it elaborates no such thing as social rights; it merely delineates the limitations of the state and goes no way at all toward delineating the responsibility of the state to its people for quality of life, for health care and for any other thing that we might regard as a social right.

Nevertheless, since 1977 we have had this problem with medicare. At the time when the provinces were, in fact, given a great deal of autonomy over how they spent their health care moneys, an ideological phenomenon occurred whereby at least seven out of the ten provincial governments, Conservative governments, came to see government spending as the greatest demon with which they had to deal, and they chose health care as one of the programs where they could fight the demon of public spending. So we found that coincidentally with bloc funding, we had this neo-Conservative trend, and health care was one of the first programs to suffer.

What has happened in the course of this debate about health care, the first rumbles of which began in the early part of 1979, is that the federal government got off scot-free. I think it is time for this to end, not just for the sake of accuracy but because the federal government itself in its most recent budget has indicated its real commitment, or lack thereof, when it comes to some of the social programs, health care in particular, about which it has been so virtuous in lecturing the provinces. Let us remember that the original intention of the federal government in setting up the established programs' financing was restraint of its own. It wanted to put the lid on the amount of money which it was spending in this area, and it wanted to enable the provinces to restrain themselves in this area. The federal government did not want the provinces to feel penalized every time they saved a dollar, as they did under the former program, because every time they did not spend a dollar, that was another dollar they did not get from the federal government. So, in effect, restraint was, both federally and provincially, one of the motivations for the Established Programs' Financing.

It was a situation of which the provinces took full advantage. In effect, they took too much advantage of it and they spoiled what could have been a good system, although we in our party are not convinced it could yet be a good system. We would prefer to return to some kind of cost-sharing system, so