

HOUSE OF COMMONS

Monday, April 9, 1984

The House met at 11 a.m.

● (1105)

[English]

BUSINESS OF THE HOUSE

Mr. Pinard: Mr. Speaker, I would like to indicate a few changes in House business for this week. Since we did not complete debate on the third reading stage of Bill C-12 last week, rather than having an opposition day tomorrow we will be dealing with the third reading stage of Bill C-12. The allotted opposition day will be on Wednesday. Therefore, I designate Wednesday of this week as an opposition day and on Thursday we will most likely debate Bill C-24. The back-up legislation for today is the Divorce Act.

GOVERNMENT ORDERS

[English]

CANADA HEALTH ACT

MEASURE TO AMEND

The House resumed from Monday, April 2, consideration of the motion of Miss Bégin that Bill C-3, an Act relating to cash contributions by Canada in respect of insured health services provided under provincial health care insurance plans and amounts payable by Canada in respect of extended health care services and to amend and repeal certain Acts in consequence thereof, be read the third time and do pass.

Mr. Les Benjamin (Regina West): Mr. Speaker, I am pleased to take part in the debate on third reading of Bill C-3, the Canada Health Act. I would like to begin by saying how proud I am of the history of my province in the area of health care. The history goes back many years. In the 1920s we had free treatment for tuberculosis. In the worst of the hungry thirties we had municipal doctor plans, many of which started out at the request of the doctors because the people had no money. In the mid-1940s we had provisions for the complete care of the mentally ill. In the area I am from in Saskatchewan we started the Swift Current health region No. 1 which covered the entire southwest corner of the province. Through this program doctor and hospital services were provided starting in 1948. This served as a model for the entire medicare program in Saskatchewan which followed in 1962. We started our province-wide hospitalization plan on January 1, 1947.

Those were turbulent times, Mr. Speaker. Bringing those programs in caused great political battles and debate among

the entire population of the province from the 1940s up to and including 1962. However, we proceeded to implement programs that led the entire country for many years. Anyone who would tamper with those programs now would do so at their political and economic peril.

We have a right to be proud of that pioneering history because we were one of the poorest provinces in the country when we started those programs. In the 1940s the province was bankrupt as a result of a terrible debt going back over many years, especially during the Depression years. Yet the people of that province decided that the health of the people and the care of the ill took priority over money that was owing to banks or bondholders and other things that were not as urgent. The great majority made that decision willingly. Over a period of 20 years, people like Tommy Douglas, Woodrow Lloyd, Tom Bentley, Allan Blakeney, Bill Davies and others like them brought about a growth of health services that was unprecedented in any province in the country. I should also have mentioned that Saskatchewan established the first air ambulance service on this continent.

● (1110)

With that kind of background, those of us from Saskatchewan naturally support legislation concerning the health care of the ill and preventive medicine in all of Canada. It is the right of every citizen to have access to health care, whether it be curative or preventive. People will have beds available to them when they are sick. That access to health care must not be restricted. People must not have their access inhibited or prevented due to financial barriers.

For almost 40 years I have listened to the Liberals talk a good fight about health care. Long before I was born, beginning in 1919, they were promising a national health plan. They spoke much about it and again talked a good fight. Throughout the 1920s, 1930s, 1940s and 1950s, we have known mostly Liberal federal governments and Liberal provincial governments. Besides talking a good fight they set a record for foot dragging. While we feel that this legislation can be supported, it is still insufficient. It is a further example of half-hearted Liberal Government efforts. The Government is still talking a good fight.

I am pleased that the Conservatives in the House are prepared to support the legislation, as I believe they are. However, we see that Party working on both sides of the street. While the federal Conservatives support the Bill in the House of Commons, they are against it in the provinces. Provinces like British Columbia, Alberta, Ontario, New Brunswick, Nova Scotia and Newfoundland, which all have Tory governments—although it is a different name in British Columbia