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Speaker: The Honourable Gilbert Parent

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HOUSE OF COMMONS

Monday, November 6, 1995

The House met at 11 a.m.

Prayers

PRIVATE MEMBERS' BUSINESS

[*Translation*]

RAILWAY COMPANIES

Mr. Michel Guimond (Beauport—Montmorency—Orléans, BQ) moved:

That, in the opinion of this House, the government should oblige all railway companies that receive National Transportation Agency authorisation to abandon branch lines or sections under the National Transportation Act, 1987, to offer such branch lines or sections for public sale before abandoning them.

He said: Mr. Speaker, first of all I would like to thank my colleague in the New Democratic Party, the hon. member for Winnipeg Transcona, for letting me take his place this morning and for taking my turn last Monday. As you know, last Monday, this House, at the behest of the Leader of the Government, went so far as to sit on the day a referendum important to the future of Quebec and Canada was held in Quebec. Another demonstration of love and affection from our colleagues in the Liberal Party.

I just want to say that in Quebec, we have a useful motto: *Je me souviens*. I can tell you Quebecers felt this decision was highly improper, as was the demonstration of love and affection in Montreal by 60,000 people on the Friday preceding the referendum and financed by Canadian Airlines, Air Canada and VIA Rail.

I repeat, we have a useful motto in Quebec: *Je me souviens*. I can tell you that as the transport critic, as soon as I get a chance I will certainly return the favour to these three companies.

Motion M-494 reads as follows:

That, in the opinion of this House, the government should oblige all railway companies that receive National Transportation Agency authorisation to abandon branch lines or sections under the National Transportation Act, 1987, to offer such branch lines or sections for public sale before abandoning them.

Perhaps I may explain that the purpose of this motion is, in a way, to apply retroactively a provision that appears in Bill C-101. I imagine this will not be news to anyone who is familiar with the railway sector and especially with the decisions of the National Transportation Agency. As you know, when a company, either CN or CP, used to go before the National Transportation Agency, permission to abandon lines was practically automatic.

Bill C-101 now before the Standing Committee on Transport provides that before a line is abandoned, it will first be offered for public sale. I should explain that if Bill C-101 is adopted in its present form, railway companies will have to submit a three-year plan, starting in 1996. The fact remains, however, that some branch lines are already in the process of being abandoned, although interested groups or provincial governments may have shown an interest in continuing operations.

The purpose of this measure is therefore to deal with part of what has happened recently. However, if Bill C-101 is adopted as tabled, which means offering for sale prior to proceeding with abandonment, our party will not object to the substance of the bill. However, we will try to obtain extensions of the time limits because some are really too short to allow for a proper evaluation of the operations offered for sale. But we will have a chance to discuss that later on.

As I was saying, the purpose of this motion is to save segments of railway lines for which a decision of abandonment has been issued by the National Transportation Agency. Bill C-101 provides that the railway companies must offer for sale the segments they wish to abandon. Even considering all the deficiencies of the abandonment procedure in Bill C-101, this measure should make it easier for these segments to be taken over by short line railway operations, because it would oblige railway companies to sell segments that are to be abandoned.

There are segments in Quebec that would probably be viable as short line railways: the decision of abandonment has already been issued, but the tracks are still intact. Today we have no guarantee that railway companies will first try to sell to short line railways, in order to maintain segments. In fact, we could hardly expect railway companies to sell to short line railways if it is more attractive to sell a segment for uses other than railway transportation. It is common knowledge that railway companies in Canada own large amounts of real estate. They may prefer to

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speculate in real estate as opposed to continuing a railway operation. That is the point I wanted to make.

Public interest is not a consideration in commercial decisions by railway companies. That is unfortunate because, as you know, in some cases these companies obtained the land around a right of way when this country was first settled. Furthermore, Canada expanded from east to west thanks to the railways. Western Canada was developed thanks to the railways. These companies were given crown land for their railway rights of way and now are acting more like speculators.

• (1110)

In Quebec there are at least three major branch lines in this situation: Chapais, Lachute and Québec Central, totalling some 550 kilometres. Negotiations are currently under way concerning some of these lines.

The effect of our motion would be to ensure that railway companies negotiate in good faith with those interested in creating SLRs to run these branch lines. You will note that my trust in the national railways is rather limited. Had we had been able to have faith in them, this motion would have been totally unnecessary; the necessity for it arises out of our less than total confidence in them.

The Government of Quebec has already done its part with respect to the Lachute branch line by forbidding any change in its land use. If CP lets the situation get any worse, however, the tracks that are in place will deteriorate and no longer be useable.

It is therefore important for the CP to put this branch line up for sale promptly. It is also interesting to see, since Quebec does not of course possess the fullness of its powers that would have come with sovereignty, the concrete action taken by Minister of Municipal Affairs and Regional Development Guy Chevrette in announcing this past October 16 that the rail corridor linking Mirabel and Thurso would be declared a special intervention zone. Publication on October 11 in the Quebec official gazette of a draft decree to that effect had the immediate result of reserving the land covered by the decree for railway purposes and of forbidding any operations contrary to that use.

I would like to take this opportunity to praise Mr. Chevrette, the minister responsible for regional development, for he—unlike certain of our friends across the way, the Minister of Transport for Canada in particular—is well placed to appreciate the importance of a rail line, an airport or a seaport as a tool of regional development. I mentioned before in this House and it bears repeating that several businesses are interested in locating in outlying areas of Quebec or elsewhere and insist as a prerequisite—it is sometimes their principle condition—on there being a deep water port, an adequate highway and super-highway system, and a rail line if the material to be shipped is

very heavy and cannot be trucked. Merely looking at the state of our highways and superhighways is enough to again convince us how lax the federal government is, compared to the U.S., when it comes to truck load limits.

As an illustration of the railway's worth as a tool of economic development, let me give the example of a cement plant project at Port Daniel in the Gaspé, in the riding where my spouse was born. This is a village of some 3,500 people, with a very high rate of unemployment—we are all aware of the state of the fishing industry in Gaspé—and the developers interested in the cement plant have set two conditions. First, there must be a deep water seaport, which the Port Daniel bay provides, and second the cement dust, or powder, or whatever it is called, must be shippable by boat or by railcar, thus making the presence of a rail line a condition for the deal. CN is considering abandoning the Gaspé rail line. Obviously, if there is no rail line, the 450 jobs that would be created by the cement plant will never see the light of day, because of the two conditions set by the developers.

• (1115)

I am pleased to inform the member for Bonaventure—Îles-de-la-Madeleine, who once again reveals that he is totally disconnected from his riding. He should, perhaps, go there a bit more often and be a bit more active. He should be aware that this was another of the requirements set by the promoters.

What is a special intervention zone, such as the one the Government of Quebec established for the Mirabel—Thurso railway corridor? Quebec's act respecting land use planning and development permits it to establish special intervention zones in order to resolve land development problems whose urgency or seriousness justifies such an intervention.

This is the first time, since the law came into effect in 1980, that a minister has used such power to declare a special intervention zone by order. This decision stresses the importance the government accords to maintaining the rail link between Thurso and Mirabel to protect the economic development of the region.

I would also like to stress how important and how timely this matter is. We could perhaps come up with a short list to justify just how relevant and current our motion is. We could quickly make a list of abandoned lines. We could name some in each province.

In Ontario, for example, the CN Chatham line is scheduled to be abandoned on July 14, 1996. There is also the Newmarket line. In Quebec, there is the CN Chapais line, from Franquet to Chapais, 97.34 miles long; the CN Taschereau line, from La Sarre to Cochrane, 82.42 miles; the CN Montmagny line, from Harlaka to Saint-Romuald; the CN Chandler line, from Sainte-Adélaïde to Gaspé—you can see with what I was saying about the cement plant project earlier, how relevant this motion

becomes—; the CN Sorel line, from Sorel to Tracy; and the list goes on.

In British Columbia, there is the CP Slocan line; in Manitoba, the CN line at Erwood; there are other lines in Ontario; the CN line from Foothills to Spur Turo; the CN Graham line; the CN Manitouwadge line; the CN Midland line, and the list goes on. All of this adds up to a total number—and I will try to find my figures here—of abandoned lines for the year representing, by region, 48 per cent in Ontario, 19 per cent in Quebec, 23 per cent in the Maritimes and 10 per cent in the Prairies.

This motion clearly illustrates the urgency of ensuring the availability of lines already approved for abandon, until new provisions in Bill C-101 apply, if they are passed as a whole, and thus of ensuring that the recent past is covered, rather than have the companies ruthlessly abandoning lines with the support of the National Transportation Agency, because, I repeat, it was almost automatic. I had an opportunity to experience the trauma of arguing before the National Transportation Agency, when I argued in favour of the CP Lachute line, and we saw which way the Agency invariably leans. It is unfortunate, but, I think the number of decisions the Agency has made in favour of the railways clearly illustrates what I am saying.

In conclusion, what we are seeking with this motion, is to force the government to implement the provisions of Bill C-101 immediately in order to preserve railway branch lines that are important for Quebec, until Quebec achieves political sovereignty, of course, which we expect to be very soon. Then, it will be able to exercise its powers to the fullest and will not have to go and beg before the National Transportation Agency of Canada for decisions to be made. As Jean Lesage said in 1960, we will be “Maîtres chez nous”, and that is what Quebecers want.

• (1120)

[English]

Mr. Joe Fontana (Parliamentary Secretary to Minister of Transport, Lib.): Mr. Speaker, I welcome the opportunity to speak to the motion put forward by the hon. member for Beauport—Montmorency—Orléans.

His concerns reflect an appreciation for the approach advocated by the government toward rail line rationalization. The wording of his motion implies support for the line rationalization process set out in Bill C-101, the National Transportation Act.

The government has noted the widespread concerns expressed by several interested parties regarding the existing rail line rationalization process. Deficiencies have been recognized and we believe a remedy has been proposed through Bill C-101.

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On October 2, 1995, Bill C-101 was referred to the Standing Committee on Transport. Committee hearings are currently under way.

Canada's rail network is overbuilt. Eighty-four per cent of CN and CP traffic is moved over one-third of the network. Traffic density is only 60 per cent of the average of the top seven major railroads in the United States. It has been estimated that some 50 per cent of current CN and CP tracks are surplus to their needs. However, many of these lines could be successfully operated by short lines or regional railways.

Rationalization is under way but it is occurring slowly due to the complicated abandonment process contained in the National Transportation Act, 1987. There is widespread recognition that future rail financial viability will depend greatly on the railway's ability to accelerate plant rationalization and restructuring its networks.

Bill C-101, the National Transportation Act, is intended to streamline and modernize transportation regulations. In particular it will lift the regulatory burden on rail to increase its competitiveness in an increasingly continental market.

The bill contains provisions to streamline and shorten the current process for rail rationalization, making it commercially oriented, less adversarial and more conducive to the sale or lease of surplus rail lines to new operators. In conjunction with those provisions, the process for entry of smaller low cost rail carriers to operate in co-operation with CN and CP has been eased.

As demonstrated by the U.S. experience following deregulation of its railway industry in 1980 with the passage of the Staggers Act, railway rationalization need not result in the abandonment of track. In the United States since 1980, although 34 per cent of the total rail route miles were trimmed from the rail line railroad networks, less than half that track was abandoned. Almost 30,000 miles of track were sold to successful short line railways and saved from abandonment.

Today there are over 500 short line railway companies in the United States, of which 263 were created since 1980. In Canada only 10 new independent short lines were created since 1988.

Let me emphasize that the line rationalization process set out in Bill C-101 is not as radical as that in the United States. However one of its main features is that it will provide opportunities for any interested party to acquire lines surplus to the needs of CN or CP for continued use as rail lines.

In the event that there is a lack of interest in purchasing a particular line for rail purposes or a sale agreement is not reached, each level of government will have an opportunity to decide whether or not to acquire a line at net salvage value for public purposes.

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Only after a railway company has gone through the process I have described and it has been unsuccessful in transferring the line to a new owner, whether it be a private company or a government, will it be able to abandon operations over the line and dispose of the land corridor and track assets. This will be a major improvement over the current process.

The current process has caused some parties significant concern. For example, some provincial governments have expressed their wish to preserve an economic rail line, even though they have not had any traffic on them for many years, in the event that some day there may be a need for them. However, it has been normal practice when lines are put forward for abandonment that the provinces do not take positive action to find a new operator or acquire the lines themselves.

• (1125)

Under the National Transportation Act, if a rail line is not purchased by new operators for continued rail purposes the onus is placed on governments at all levels to come forward and express their interest in the rail corridors by financing the cost of their acquisition at net salvage value.

Even if the government possessed the powers to comply with the action requested in the member's motion there would be no beneficial outcomes. Currently only five rail lines have been ordered abandoned by the agency. Three of them are scheduled for abandonment in 1995 and the remainder in 1996. Negotiations are under way for the purchase of one of the lines to be abandoned in 1996 and no interest has been expressed by anyone in the purchase of the others.

There is really nothing more to add except that on the strength of the motion I look forward to the hon. member's support of Bill C-101, the National Transportation Act. We should not delay the bill, as the hon. member has suggested, but should get on with, hopefully in the next two to three weeks, getting it through the House so that the process is improved and interested parties, be they short lines, governments or other interests, can take advantage of the opportunities presented by the new rationalization policy of the government.

Mr. Jim Gouk (Kootenay West—Revelstoke, Ref.): Mr. Speaker, as I prepared to speak on the motion it seemed the hon. member from the Bloc must not have realized what was in Bill C-101, because it is exactly what he is asking for.

However I listened to the content and the direction of his speech and obviously he was aware of it. It seems as though he went around in a circle and fell out the middle. I am not really sure what his purpose was unless it was simply to take another 20-minute opportunity to bash Canada and promote Quebec's separation.

The member is looking for a particular provision that is contained in Bill C-101, specifically in clauses 143 and 145. On the one hand he says this is an urgent matter and that he wants to get it done very quickly. At one point he used the word retroactively. There are a couple of things with the Bloc Quebecois that I would like to do retroactively.

There is a bit of a paradox here. While the hon. member stood to say this was an urgent matter that needed to be taken care of quickly, Bill C-101 is scheduled to go for clause by clause consideration and to come back to the House for final passage the week following next week's break. He also said that Bill C-101 needed to be extended, that there has not been enough time and that he wants to stretch it out.

I do not know why he needs more time. We have heard dozens and dozens of witnesses, intervenors in committee. The hon. member, as the transport critic for the official opposition, is a member of the committee. Perhaps he needs more time because he has not been at many of the committee meetings. He showed up once or twice.

I am the national transport critic for the national opposition party and I have been at those meetings. Any time I have not been able to attend my colleagues have been there in my support and in support of people across Canada. People can approach the government and make application to the government. They can also approach a creditable, viable opposition party when they do not happen to agree with what the government is doing or they want to ensure there is more pressure and support.

The hon. member has shown up at committee meetings on occasion. I cite one of those occasions to show how his interest has nothing to do with national transportation or with the act. It only has to do with his own sovereignty, separatist agenda. Last week one or two witnesses had already spoken and then we heard from a group of representatives of the Federation of Canadian Municipalities representing municipalities across the country, including in Quebec.

• (1130)

Toward the end of the intervenors' presentation the hon. member joined the committee for a brief period of time. As questions to the delegation opened he immediately tore into them, in a very vicious and embarrassing manner, because the brief was not presented in French as well as in English. Had he been there at the beginning he would have heard the explanation and apology for the fact that it was not available in French, that it would be available the following day, that the delegates had only completed the brief that morning, that they would have normally done this, that they always do but on this occasion they did not have the time to do it. It was quite an embarrassing outburst from someone who claims to be a member of the national official opposition. It may be official by name, but it is certainly not national.

The hon. member stayed for the next presentation, which happened to be by a delegation from the province of Quebec, and then left before any further presentations were made.

I do not know what his real bottom line is. If his real bottom line is to have the amendments made that have been outlined in his motion, they are contained in Bill C-101. He can come to the committee and aid us in completing that bill. I am sure amendments will be offered. I shudder to think what will come from his party, but I am sure amendments will be proposed. I can guarantee that there will be amendments proposed by the Reform Party. Amendments have been proposed by the Liberal Party. The bill is there to be examined. The committee will hear presentations and will react to the needs of the Canadian people.

If the hon. member comes to the committee for the purpose of aiding it and seeing the bill completed, then he will get the very things he asked for this morning. However, if he comes to the committee to delay and extend the proceedings, after having not been to any of them, then he is fighting not against Bill C-101, not against the Liberal government, but against his own motion. That will be a very interesting aspect for him to take up.

I close by pointing out one item for clarification. From time to time, prior to and since the referendum, the Reform Party has raised the question of who rightly should be the official opposition in the House. By past precedent it falls to the Bloc Québécois because it has a superior number of one. Some people, both those sitting opposite and some misinformed people in the media, have claimed that the Reform Party has done this by way of opportunism. It was not opportunism; it was our duty to the Canadian people and our obligation as members of the House to represent all of Canada on all bills, including national transportation bills, rather than the narrow views of one separatist group within one province.

If the hon. member co-operates he will get his wish.

Mr. Robert D. Nault (Parliamentary Secretary to the Minister of Labour, Lib.): Mr. Speaker, it is a pleasure to have the opportunity to speak to Motion No. 494 this morning. The motion is somewhat redundant, but at the same time it is important to speak to an issue that is fundamentally important to all Canadians; that is, the national transportation system and in particular what takes place when rail rationalization occurs in a country that continues to change, as it normally would in a federation. The needs of the public and the regions of the country are changing as well, so it is important to understand that transportation needs change.

Private Members' Business

Under Bill C-101 there are a number of clauses that deal with rail abandonment. In particular, the bill deals with the ability to transfer rail. This is a unique change in direction by the Government of Canada. It is a welcome change.

For those of us who have followed the transportation system and the abandonment of lines, under the NTA of 1987 the process that had to be followed for certain lines to be abandoned was that they first had to go to the NTA to prove that the particular line did not have commercial viability. Imagine how easy that would be to do if first of all the line was demarketed, which is what was done to start with.

• (1135)

Most railway companies would not admit this, but when I had the opportunity to chair a special committee that went across the country to look at CN privatization we ran into some documentation that proved that in certain cases high ranking officials in CN sent out memos to their regional management, dictating and explaining to them how to demarket a particular branch line so they could go to the NTA and have them signify that it was not commercially viable and allow them to abandon it.

Bill C-101 and the motion presented by the member this morning suggest a different way of doing business. That is, to acknowledge that transportation companies are no different from any other business in Canada and that they cannot be forced to deal with what governments are dealing with every day, and that is the public interest, when in fact transportation companies are more interested in the bottom line. If we force them to try to maintain a particular line without compensating them in a manner that would help the company to be successful, they will go about it in one fashion or another to make sure those lines do get abandoned.

Public policy and public interest are a very important portion of this bill. The critics who look at it are continuing to say that the government is getting out of the public interest business in transportation, but we are putting it where it belongs. Public interest is being taken out of the hands of every day companies in the transportation sector and put back in the hands of the politicians, to make decisions whether they want to subsidize certain lines in this country and whether for regional purposes they want to maintain certain branch lines. Those particular public interest initiatives and policies will have to be put back in the hands of cabinet and parliamentarians if we are going to have a private sector transportation system that works.

In the member's presentation to the House this morning he talked about time frames. It is important to talk about time frames because there is a perception left by the member that the government is not serious about short line railways becoming a new phenomenon in Canada, that it is just lip service and more than likely most of these lines will be abandoned because of the time frame.

Private Members' Business

I totally disagree with the member, as is unfortunately usually the case. The time frame for sale of a line starts with the unique process in the bill of forcing the railways, through clause 141, to put forward a three-year plan that is available to anyone, including ourselves as members of Parliament. Can you believe that? They are going to let us see something for a change. In that three-year plan they will signify whether they want to continue a particular line or whether they are interested in selling it or if they cannot sell it whether they will eventually abandon it.

That three-year plan, which the governments have asked the railways to table on a regular basis and to revamp whenever necessary, will give members of Parliament and the public an opportunity to review just what lines are not in the best interest of a private corporation's business plan.

The next process is the intent of any individual municipality, any regional government, whoever is interested in owning a particular line that the other railways do not want to own. They will have 60 days to signify interest in that particular line. Within 60 days all they have to do is write a letter to CP or CN or any other corporation that owns a railway and say they would like to look at purchasing that particular piece of track. Then the 60 days will be allowed to elapse. When that elapses, they have five months after the 60 days to sit down and negotiate the sale of that line to that individual, that municipality, that provincial government.

• (1140)

As can be seen, 60 days is two months and after that is the five-month negotiation process, which gives seven months minimum. Of course if the negotiation is a serious one and both parties are moving along in their negotiations, I am quite sure the railways would be interested in an extension, because it is not in a railways' interest to abandon a line if they do not have to. If they can get an agreement with an individual to run a line to bring a particular shipment of goods from a particular corporation at the end of the line, which is the reason the railway is there and get it down to the other end, certainly they would do so.

I want to emphasize this. In clauses 141 and then 143 to 145 it lays out very specifically how these rail lines would be transferred from one corporation to the next. In the final analysis, if nobody is interested, be it the Quebec government, a municipality in Quebec, or a private sector individual, why would anyone want to force a corporation like CP or CN to run a line that absolutely nobody else would like to run? Quite frankly, I think it would have a right to abandon that line.

I want to emphasize that the real issue is not whether a piece of track is torn up, it is what is done with the right of way. That is

the real issue in the long term. One of the problems the U.S. is having with the Staggers Act and the changes in policy it made for line abandonment is that when it abandons a line it does not look after the right of way but sells it to the private sector. Depending on where the land is, it is chopped up for residential lots and things like that. That land cannot be re-acquired 20 years from now without expropriation.

One of the main issues that is going to face us as we rationalize our railway system is what to do with that right of way when we tear the track up and pull it out there. That is all salvage value, which is fine, but if we keep that particular right of way we can always put the track back at some future date. Most people do not see the significance of that right of way.

In southern Ontario, for example, that is a major issue because most of that land is privately owned outside of that right of way. Once the private sector gets hold of it we are never going to get it back. Governments, in particular provincial and municipal, have a very important role to play on that issue. It is not a federal government jurisdiction. It is a provincial jurisdiction. That is where the member should be focusing his attention. That is the mistake that was made in the Staggers Act. Some companies in the U.S. wish they had not sold the right of way but kept it for future use and land banked it.

Powers in this place rest in a number of ways and in a number of fashions. The Minister of Transport in this bill still has the power to subsidize branch lines. He still has the power to subsidize certain rail lines. I will use just one rail line as an example, which is close to my home.

There is a line that runs all the way up to Churchill. It is a very important line to northern Manitoba for regional development. The line could be abandoned tomorrow if it were dealt with in dollars and cents, because it does not make a profit. However, the line is important in the long term to the viability of northern Manitoba. I would suggest that if the people of northern Manitoba, the municipalities that exist there and the shippers on that line were really interested in regional development and if the federal government would enter into a co-operative arrangement with them, someone else who is interested in it could run that line. Maybe they can make it closer to being profitable than it is now. At the same time, it is very transparent that we are subsidizing a line that does not make money because of regional development needs.

The public interest should lie in a transparent fashion. Whether we want to subsidize a losing operation is a different story. However, forcing railways to carry losing lines is not the way to go about the business of running a corporation, whether it be private or public. I differ with many people on that argument.

I hope the member who brought this motion forward, as has been mentioned by the Reform Party, spends less time trying to break up Canada and more time in the committee. He will realize there are some very good parts to this bill. At the same time if he supports it he will find there are some good entrepreneurs in Quebec who would love to run a railway and who could run it a lot better than CN or CP ever did.

• (1145)

[*Translation*]

Mr. Paul Mercier (Blainville—Deux—Montagnes, BQ): Mr. Speaker, I listened carefully to my hon. colleague from Kootenay West—Revelstoke when he expressed his views on the official opposition. He believes it would be much more interesting if the Reform Party formed the official opposition in this debate about railways. I can assure that I, for one, will stick to the matter under consideration.

The matter at issue is that the National Transport Agency has authorized CP and CN to abandon a number of sections on some important rail lines, in particular the Lachute, Chapais and central Quebec lines.

These abandonments will certainly have a major, serious impact on regional development. For example, I will only talk about the Lachute line because my colleague from Argenteuil and myself tabled a brief asking that this line not be abandoned. The matter at issue is the abandonment of part of this line—that is, the central part and not the start or the end. Talk about a rational decision: they leave the start and end of the line but remove the middle.

To show you just how lightly the agency gave this authorization, I will mention the fact that, in concluding that the line was not profitable, the commissioners simply relied on the argument that the railway had not made enough money over the past three years, when everyone knows that we were in a recession and that these three years therefore did not reflect the railway's real earning potential.

During these hearings, it was conclusively proven that CP had made no effort to develop or even keep its clients. On the contrary, it seemed to try to drive them away.

It got to the point that the Quebec Ministry of Transportation, using its urbanization powers, had to issue an order to at least prevent the dismantling of the Lachute line. The ministry cannot oppose the end of operations, but it can prevent the line from being dismantled.

This brings me to the topic of Bill C-101, on which we will vote very soon and to which my colleague from Beauport—Montmorency—Orléans and myself will propose amendments.

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True, Bill C-101 will require CP and CN to sell the branch lines they abandon. However, it is clear that the government has a new rail policy in that, first, there will no longer be any public hearings and, second, the National Transportation Agency, whose name and role will change, will no longer have any authorization to give.

In other words, the government has just about set aside the notion of public service in favour of a strictly for-profit mentality. I think that this is another example of the government's general tendency to disregard the public interest and think like an accountant rather than an entrepreneur. One would have expected a responsible government to encourage railway companies to contribute to regional development, thus spurring their own development and bringing in tax revenues for the government, instead of helping them sell off the branch lines they are not interested in.

• (1150)

In conclusion, as my colleague pointed out, I think that only Quebec sovereignty will result in making the public interest a priority in government decisions.

[*English*]

Mr. Peter Adams (Peterborough, Lib.): Mr. Speaker, the hon. member for Beauport—Montmorency—Orléans wants the government to require the railway companies to put lines that have been ordered abandoned up for sale.

I contend the lines have already been advertised as available for sale. The fact they have been subjected to the long abandonment process which is now in place should be seen as a clear indication the railways do not want them.

Currently there are only five line segments that fall into the category defined by the member's motion. The CP Cornwall subdivision from Soulanges, Quebec to Cornwall, Ontario was approved by the National Transportation Agency for abandonment on December 27 of this year.

The CP Chalk River subdivision from Smiths Falls to Pembroke is scheduled for abandonment on November 19 next, as are the CP Chalk River and North Bay subdivisions from Petawawa to Mattawa, Ontario. A segment of the CN Chatham subdivision between Bloomfield and Tucumseh, Ontario is to be abandoned on July 14, 1996. Finally, the agency has ordered CN to abandon the segment of the Newmarket subdivision between Barry and Longford, Ontario on September 21 next year.

It should be noted that VIA has already expressed interest in acquiring the Chatham subdivision from CN, and the Ontario government has held and is holding discussions with CN regarding the Newmarket subdivision.

Private Members' Business

As is clear even from the wording of the motion, Parliament has delegated the responsibility for regulating rail line abandonments and conveyance to the National Transportation Agency in accordance with the provisions of the National Transportation Act, 1987. Briefly, the agency's powers under the act extend to the receiving and processing of abandonment applications. The criteria for reaching an abandonment decision are set out in the act. Any line abandonment application results in an abandonment order if there is no opposition to that abandonment.

However, if there is opposition expressed by anyone, the agency must publish the actual losses incurred from the operation of the line. Based on traffic and financial information provided by the railways and evidence submitted by intervenors in writing or at public hearings, it must make a determination as to whether operation of the line is economic or uneconomic.

If the agency finds the line is economic, the application is dismissed. Where the agency finds the line is uneconomic it is then required to make a further determination as to whether there is any reasonable probability that it could become economic in the foreseeable future. If not, the agency must order abandonment. If yes, the agency must order continuation of operations over the line if it is in the public interest.

For lines ordered continued in the public interest, the agency is required to reconsider the abandonment application at least once every three years. The agency is given some discretion in fixing abandonment dates to not less than 30 days or not more than one year after the date of an abandonment order. If VIA operates over the line the abandonment date is fixed at one year after the date of the order.

The governor in council has powers under the abandonment provisions to postpone the date of abandonment if certain criteria can be satisfied. This is in addition to powers accorded under section 64, whereby the governor in council can rescind or vary any agency order, decision, rule or regulation.

• (1155)

As members may have noticed neither the agency, the minister nor the governor in council has power to issue orders to the railways with respect to what properties they should put up for sale and when they should do so. It has always been possible for other governments, as my colleague from Rainy River said, to take an active role in promoting the sale of a line, or even to purchase the line itself.

No other business sector or mode of transportation is subject to such strict regulation of exit as has been imposed on the railway industry. With the enactment of the Canada Transportation Act, the government hopes to place the responsibility for

rail rationalization where it belongs, with the railway companies.

The decision to withdraw from a certain segment of business is a commercial decision and does not justify government intervention. For example, if a trucking firm decides it no longer wants to serve a particular city because it is losing money, it simply stops going there. Why should a railway company not have the same freedom? If a grocery chain decides it wants to close a store at a particular location and possibly open one at a more profitable location, the government does not interfere. Why should that same government prevent a railway company from doing the same thing? This government does not exist to tell competing businesses such as transportation companies how to conduct their business.

It is clear there is no overriding reason why the government cannot comply with the member's Motion 494. The member will find that the advanced publicity regarding railway rationalization plans required under the Canada Transportation Act fulfils the general intent of his motion.

I appreciate the member's interest in this important topic. We are at a stage where we are moving from one railway regime to another. There are difficulties inevitably involved with that transition.

The decisions made are very important indeed. To that extent I greatly appreciate the member's interest. However, I argue that his concerns are well met under the existing legislation.

[Translation]

The Speaker: Dear colleagues, as no other hon. member wishes to speak, I recognize the hon. member for Beauport—Montmorency—Orléans on debate. There are two or three minutes remaining.

Mr. Michel Guimond (Beauport—Montmorency—Orléans, BQ): Mr. Speaker, I welcome this opportunity to use the time remaining in the debate on this motion, pursuant to our Standing Orders.

I would like to correct something my hon. colleague from Kootenay West—Revelstoke, who sits with me on the Standing Committee on Transport, said in his remarks.

He indicated earlier, in summarizing the motion to some extent, that the usefulness of such a motion is unclear, since Bill C-101 will do what the hon. member is asking for. I think he should have read the motion and listened to what was being said. He would have realized that the motion in question is to ensure—not in a distant future; Bill C-101 has not yet been passed—that railways lines recently slated for abandonment will be covered by the provisions contained in Bill C-101, once passed. Again, my colleague from Kootenay misconstrued my meaning.

Also, the hon. member of the Reform Party complained again about his party not having become the official opposition yet. I would like to inform the Reformers, through you, that if the Bloc Quebecois is the official opposition, it is neither to please the Liberal Party, nor to annoy the Reform Party. British parliamentary tradition has it that the largest minority group in the House of Commons forms the official opposition. We never asked to be the official opposition. It is just the way it is and shall continue to be, since we have decided to continue sitting in this Parliament to unmask the Liberals.

• (1200)

A common thread goes through the whole federal transportation reform: the government intends to shift infrastructure costs onto municipalities, RCMs or the Quebec government, while at the same time maintaining control and keeping corresponding revenues. In fact, these so-called improved management objectives hide a sucker's deal.

The defence of Quebec's interests is no longer tied exclusively to fruitless objections or demonstration too often ignored. It is now predicated on Quebecers taking the transportation issue into their own hands to ensure their future and the future of Quebec businesses and regions whose development depends on transportation.

Only by becoming sovereign will we be able to put in place an integrated transportation policy, in which our local and public sector partners will be the first to gain from a unified transportation role within Quebec, combined with a partnership with our Canadian neighbours and NAFTA allies.

We, members of the Bloc Quebecois, the official opposition, will keep on repeating this as long as it takes in this House.

The Deputy Speaker: The time provided for the consideration of Private Members' Business has now expired. Pursuant to Standing Order 96(1), this item is dropped from the Order Paper.

GOVERNMENT ORDERS

[English]

DEPARTMENT OF HEALTH ACT

The House resumed from November 2 consideration of the motion that Bill C-95, an act to establish the Department of Health and to amend and repeal certain acts, be read the second time and referred to a committee; and of the amendment.

Mrs. Brenda Chamberlain (Guelph—Wellington, Lib.): Mr. Speaker, I am pleased to speak in support of Bill C-95, legislation which will establish the Department of Health.

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Two weeks ago I spoke on another piece of legislation. I reminded the House and particularly our friends from Quebec of the desire of my constituents for a united and strong Canada. With the end of the referendum that desire still continues. The people of Guelph—Wellington, all crusaders for Canada will always support Canada first. We have a strong attachment to this great country. We celebrate the privilege of being Canadian and we thank the people of Quebec for saying no to separation.

Over the past several weeks Canadians have heard much of the word change. We have before us a bill which changes the name of the Department of Health. That, as was said by the hon. Minister of Health, is the simplest part of this legislation. Within the bill there is a new focus. Bill C-95 contains a new vision of the future that promises to make improvements in what is already the best national health system in the world.

The people of Guelph—Wellington want to give a clear message to Parliament. We want our health system preserved. We reject those who want to dismantle what we have built in favour of a system that judges patients on how much money they have rather than how sick they are.

We recognize the need to respond to areas of concern, but we will not compromise the protection that is given to each of us by the Canada Health Act. This act declares that the health aspects of social well-being are the responsibility of the Department of Health.

We all know that we were elected to assist the well-being of our constituents and also of every single Canadian. It is the obligation of the government in every department and of every single member of the House to ensure the well-being of the people who have entrusted us with all of their confidence. The people of Guelph—Wellington have elected me to be a member of a government that is tempered with compassion, motivated by care and strengthened through its ability to make Canada a better place to live.

Our health care system is one of the values which makes Canada the best place in the world in which to live. Whether Canadians reside in Guelph, Ontario, Drummondville, Quebec, or St. John's, Newfoundland, they know they can depend on a federal government that is determined to protect the fabric of their health care system.

• (1205)

This legislation clearly acknowledges the responsibility of the Department of Health to care for the social well-being of my constituents and the people of every single region throughout Canada. Through this legislation we are acknowledging that there is more to health than health care. Health means the complete state of physical, mental and social well-being.

The people of Guelph—Wellington are fortunate to have quality health care providers who work for the benefit of our community. Organizations like the Victorian Order of Nurses, Homewood Health Centre, St. John Ambulance Association and the Wellington—Dufferin—Guelph Health Unit work together to

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provide assistance, plan health services, give information and support the people of my community.

While Guelph—Wellington welcomes change, our people do not want an end to the government's commitment to the long tradition of ensuring health protection for every single Canadian. Ten years ago the Canada Health Act was debated and passed without any member voting against it in this House. Those were the days when the opposition parties joined the government in support of every Canadian regardless of their income.

The Canada Health Act contains five principles: public administration, comprehensiveness, universality, portability, and accessibility. This act was the result of the efforts of strong ministers of health including Hon. Allan MacEachen; the father of the current Minister of Finance, Hon. Paul Martin Sr.; Hon. Marc Lalonde; and Hon. Monique Bégin. They were supported by Canadians in their quest for a health care system that offers care and protection. They were supported by opposition members who defended the rights of all Canadians, Canadians who deserve members of Parliament who wish to preserve our health care system rather than to destroy it.

I mentioned organizations that work in my community to preserve quality health care. These are joined by hundreds of individuals working alone or through various agencies in building a growing awareness of the importance of nutrition, stress management, physical fitness, safety in the workplace, and the environment.

We are fortunate in Guelph—Wellington because in addition to quality care institutions like the Guelph General Hospital and St. Joseph's Hospital and Home, there are people who care. These people deal not only with cures but with prevention. They realize that health prevention is the real health care revolution in this country.

My own family has been blessed with family doctors like Allan Simpson who was there when my children were born and has cared for them ever since. Anne Simpson, his wife, has also been a nurse and caregiver in our community. Without people such as them our health care system would not be the best in the world.

Our government is determined to save, sustain and improve Canada's health care system. We will continue to fight against those who fail to recognize that health care weaves the fabric of our very nation.

As part of the promises that we have kept since our election, the Prime Minister has initiated the National Forum on Health and has taken a real leadership role in finding solutions to the difficult questions facing all of us. The Prime Minister and Minister of Health are to be congratulated for this effort.

The National Forum on Health is asking: Are we getting the best results from our expenditures? Should we be spending more in some areas and less in other areas? Are we taking full advantage of new opportunities in the health field? How can we learn from experiences within Canada and from other countries?

These are important questions which deserve our time and our consideration. Canadians must dialogue about what our health system should look like over the longer term. We must develop a vision of the future. When I discussed priorities for federal spending with my constituents prior to the last federal budget, they told me that health care must remain a priority in Canada. In fact most of the people in Guelph—Wellington who responded to a questionnaire that I sent out clearly stated that health care should not be cut in any way. They are concerned about abuses. They are anxious to find solutions to what is wrong with our health care system but they absolutely reject the Reform Party's vision for health care in our community.

• (1210)

As in everything else we do, we want to work on a solution that will make our country better. We cannot accept the doom and gloom that is so often embraced by the third party in this House. We know there are challenges to making these improvements, but the people of Guelph—Wellington welcome these challenges because we want to make our health care system work for our children and our grandchildren.

I am pleased that one of the tasks of the national forum is to document case histories of health care approaches that have succeeded in improving the health of the population. I look forward to the policy recommendations that will be made in this area. The forum has taken the Guelph—Wellington approach to problems: build on successes, learn from mistakes and identify priorities.

Health is more than health care. There are many aspects of life and lifestyle that go toward making people healthy. As a government we must continue to rebuild our society to make it healthier. How can we do this? We can provide employment to those unemployed, give hope to Canadians who feel a sense of abandonment. We can provide a strong social support network for our Canadian family. We can build a better education system, find more agreeable working conditions for our workers, free the environment from pollutants and rid ourselves from unsafe products that contribute to an unhealthy environment. Health care means all facets of our society.

Each Canadian is also responsible for his or her own well-being. Personal health practices which include a positive outlook help reduce the risk of heart disease, diabetes and cancer. I have encouraged my constituents to work with the many organizations in Guelph and Wellington county that promote, educate, assist and support my constituents who suffer from epilepsy, cancer, the effects of a stroke, and cystic fibrosis to name but a

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few. In Guelph—Wellington we believe that by supporting each other we can build a better community and a better Canada.

The government continues to look at positive ways to improve the health care of our country. I wish to take a few seconds to speak about the prenatal nutrition program which was promised in the red book and implemented by Health Canada in July 1994.

We know that prenatal and childhood health experiences will affect us throughout our lives. Low weight at birth is a problem for the growing child and in some cases contributes to ill health in adults and sometimes premature death. There is also increasing evidence that the way children are cared for at an early age influences their coping skills and health for the rest of their lives. We also know that it is possible to reverse some of the ill effects and positively influence later health and well-being by intervening with supplementary and enrichment programs at critical stages in the development of children and youth.

The prenatal nutrition program is providing \$66.4 million over four years to set up or expand prenatal nutrition programs for low income expectant mothers. This is an example of a positive contribution of government for the well-being of our future. As a mother of three, I know how precious children are. I worked with many children through my efforts at the Wellington County Board of Education. Preventive health, positive lifestyle promotion and health education are going to contribute to bettering the health of our children and saving valuable health care dollars in the future.

Our health care system is probably regarded as one of the finest in the world and this is no exaggeration. At a time when Canadians are reflecting on what makes us so great, we need only to look at our health care system as an example of a country that truly works.

True, there are ways that we can improve our health care system. It is not perfect, but it works and it works well. It ensures that the poorest of our citizens receive help when they are most in need. It ensures that our seniors need not sell their homes in the event of a lengthy illness. More important, it ensures that the people of Guelph—Wellington and those in all parts of Canada can concentrate on getting better when they are sick, free from the worry of who will pay for their health care. That is the kind of protection needed and wanted by a vast majority of Canadians.

• (1215)

Many Canadians deserve credit for our health care system. Those who in the past had a vision of caring led the way. Volunteers throughout communities such as Guelph—Wellington ensure that people are cared for and educated about prevention programs. Health care professionals have the responsibility for providing care which has become extremely complex and extremely demanding.

Advancements in health care have meant an explosion of medical knowledge and information involving all kinds of advances in equipment and procedures. The front line workers are there first to care for the sick and their families. They feed us, give us medicine and often are there to care for us when we die.

I am pleased to have the opportunity to pay tribute to the dedicated physicians, surgeons, nurses, attendants, paramedics, researchers and administrators who, along with many associates, have built for Canadians a health care system which is the envy of the world.

I saw them care for my mother and I see them in their dedicated work when I visit hospitals and nursing homes throughout Guelph—Wellington. This past week they cared for my father-in-law who was struck down with a heart attack. They are wonderful people and we are lucky to have them.

We have a good health care system. We are facing new realities and we are confronted by old problems but I am confident that the foundations are sound. I know the people of Guelph—Wellington support legislation which promotes the well-being of every Canadian. I know they do not want a society in which the poor, the elderly and those less fortunate cannot get quality health care.

We in Guelph—Wellington are proud of Canada. We are proud of our health care system. There are those in the House who may wish to erode the principles of medicare, but in Guelph—Wellington we refuse to put a price on our health care system. To do so is to ignore our past and to let down our future. We accept the challenges ahead. We want to build on the principles of the Canada Health Act.

Later this month I will meet with members of the Wellington County Medical Society. I meet with concerned constituents every week who have asked me to protect their health care system. I will tell the members of the society we stand with them and we will not abandon health care in Canada. This is why this legislation needs our support.

[*Translation*]

Mr. Osvaldo Nunez (Bourassa, BQ): Mr. Speaker, the hon. member for Wellington told us about the goodwill gestures made by her constituents towards Quebec. I hope that she and her constituents are sincere. However, the fact is that, according to a recent poll, only 30 per cent of Canadians outside Quebec agree that constitutional changes should be made, while two thirds of Quebecers are in favour of such changes. Today's reality is very different from the show of love witnessed before the referendum.

My question relates to the hon. member's comments to the effect that we must preserve Canada's health care system. How will we preserve that system, given that the federal government has been cutting for years in the transfers to the provinces, and that these cuts will likely be even greater following the next federal budget? How does the hon. member reconcile the preservation of Canada's health care system with the drastic cuts being made by the federal government?

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• (1220)

[English]

Mrs. Chamberlain: Mr. Speaker, I will address the first comment by my colleague. When I spoke we did make eye contact. He asked if I was sincere about Quebec's staying in Canada. I have never been more sincere about anything in my life.

There are many Guelph—Wellington residents who want Quebec to stay in Canada. They joined in the rally. They signed a petition last year stating that fact. They care. They know that united we stand and divided we do fall. We truly do want Quebec as a part of Canada. We will work with Quebec and all provinces to make everything we do stronger and better.

This brings me to the health care issue we were talking about earlier. The question my hon. colleague put to me is about maintenance if transfer payments decrease. As we know, in this time of fiscal restraint all money is tight. We all have deficits, including provinces like Quebec which has a huge deficit. We all know that. We know we have to be protectors of health care. I believe Bloc members are protectors of health care. I also believe they know that in order to protect it, being a part of Canada will give them a much better opportunity. It will be preserved and it will be much stronger.

When we talk about preserving health care, we have to look at new methods. We have to look at other countries. We know, as the Prime Minister has stated many times, our health care is the envy of the world.

Last week I met with Ralph Nader from the United States. He told us horrific stories about what is going on there with the health care system. He warned us to be very careful and ever vigilant not to move to the right, not to move with the Reform and look at a two tiered system. He warned us that would be the end of our health care system.

I call on all members in the House to stand with us and with the health care professionals who have done a wonderful job in our communities to preserve our health care.

Ms. Margaret Bridgman (Surrey North, Ref.): Mr. Speaker, I ask the hon. member to look at the medicare system or the health insurance program and one of the five principles, accessibility.

Accessibility tends to conjure a cost factor, that everyone is equal from a cost point of view. However, I would like to bring up two or three other points. The first is transportation, those in the north getting to the services. If anyone breaks a leg in the city, he or she can call an ambulance and go to the hospital. However, the same kind of accessibility is not readily available in the north. That is one aspect of accessibility.

The second is waiting lists. We are looking at health from a preventive point of view, a stitch in time saves nine kind of thing, but we have horrendous waiting lists. It deters accessibility if one has to wait to have a lump examined or whatever.

The third point is accessibility of services. Should we provide all services to all people in all areas? We can get into debates about whether there should be heart surgery in every hospital, every community hospital, or kidney machines, these kinds of things which are not economically feasible.

Therefore from the accessibility point of view, which everyone tends to zero in on, cost and the availability and the individual's economic position for accessibility, could you address the other three or four points?

The Deputy Speaker: I am sure the member meant to say "would the member address the issues".

Mrs. Chamberlain: Mr. Speaker, I am pleased about the three points my hon. colleague brought up. People in the north not being able to access services as quickly is an important factor. We have to always be vigilant on that in our decision making. We should not look only at the cities or the large centres, which is convenient and easier. We must always be thinking about our constituents in the far north or the far south.

• (1225)

The issue of waiting lists is also an absolutely valid point. Wherever we can we have to be constantly monitoring, constantly rechecking, constantly evaluating. What can we do better? I thank the hon. member for bringing up these things forward because only through evaluating what we do now can we get better.

Regarding services in every hospital, I do not know that every service has to be available in every hospital. There are centres with several hospitals. From an economical point of view we may have to look at certain services in one hospital and others located in a hospital five kilometres away, perhaps heart and kidney machines or whatever.

I am in full concurrence with the three points the member brought up. Again I call on every member in the Chamber to keep looking at the points my colleague brought forward. How do we make it better? How do we improve our health care? How do we save lives? How do we make a better quality of life in Canada?

We will do that not simply by feeding money into the system but by prioritizing and by being very careful to hone our knowledge, to talk to other countries, doctors, nurses and caregivers who can tell us what we should be doing.

We have to make a call to all members that we need universal health care. We cannot start to erode this. I firmly believe in this principle.

[*Translation*]

Mrs. Francine Lalonde (Mercier, BQ): Mr. Speaker, beyond the nice rhetoric on Canada's health care system, the real purpose of this bill is to confirm and expand the self-proclaimed federal mandate in the health sector, a sector which clearly falls under provincial jurisdiction and which is clearly Quebec's responsibility.

I want to draw your attention to the amendments, the additions to that act. Paragraph 4(2)(a) reads:

(2) Without restricting the generality of subsection (1), the Minister's powers, duties and functions relating to health include the following matters:

(a) the promotion and preservation of the physical, mental and social well-being of the people of Canada;

Paragraph 4(2)(b), which was not there before, reads:

(b) the protection of the people of Canada against risks to health and the spreading of diseases;

We are talking about an expanded mandate regarding prevention. Incidentally, the former act included a section on the protection of the social well-being. That provision is no longer there. It has probably become a responsibility of the Minister for Human Resources Development, who will call it something else.

There is a federal will to take over the provinces' responsibilities—I will refer to Quebec throughout my speech; the other provinces can use a different approach if they wish—in fields which not only clearly fall under provincial jurisdiction—we will not discuss jurisdiction for the sake of jurisdiction—but in which only Quebec can work efficiently, because Quebec alone can implement an integrated policy.

• (1230)

As for amendment (b)

b) the protection of the people of Canada against risks and the spreading of diseases;

I find that this is evidence of incredible gall on the part of the government after the disaster—the word is not even strong enough—the horror of the tainted blood problem. There was a hue and a cry in that connection to identify those who were to blame for the tainted blood, and everybody seemed to be responsible except the department. And now this is the responsibility we want to broaden here to include risks to health.

Risks to health are so closely linked to general conditions of poverty, sanitation, access to healthy accommodation, education, life, organization of life that one wonders how, in what

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appears otherwise to be merely a technical bill, the department's mandate could be made that broad.

Either there is a need felt in the federal government, in Canada, to assign itself responsibilities it is not able to meet because they affect people, or there is an inability to admit that the exercise of those responsibilities falling strictly within federal jurisdiction has been a lamentable failure. And I am not referring only to the budget. I could also address transportation policies, communications policies, even, recently, international policies with the disgraceful events surrounding the visit of the Chinese Premier.

It is, nevertheless, dangerous to lead citizens to believe that one is responsible for preventing risks to health when, in reality, one does not and cannot have the means to do so. To really have the means would require taking over the provinces' place. So, far from putting an end to duplication and overlap, the bill is typical of the inefficiency that exists in areas where there is the most crying need at this time, when resources are increasingly scarce.

In reality, it is far more important to ask who is responsible than to ask who is competent, for this reaches people more directly. When talk is of competency, in reality the term that ought to be used is responsibility.

Quebec is the one with responsibility, but not with the means because, as the Minister of Health has pointed out, since 1982–83, eight billion dollars have been cut from health alone, money which represented firm commitments to supposedly allow establishment of the health and social services system in Quebec at a time when—not because money was any more plentiful in Ottawa than in Quebec—there was an extraordinary central concentration of tax dollars. The original reason for this had been financing the Second World War, and that concentration suited to a T all of the senior public servants and politicians who had worked to get decisions on economic and social policies centred in Ottawa, with the provinces only as subcontractors.

• (1235)

This policy was rejected unanimously in Quebec, by all parties. The money that was collected and is still being collected, something which Duplessis, yes Duplessis, tried to get around when he decided Quebec would have its own tax collection system, the federal government used this money so it could determine the direction, development and control of economic and social policies, instead of the Government of Quebec.

This bill confirms clearly and unreservedly the government's policy of overlap and duplication and the irresponsibility we saw in the tainted blood scandal, for instance.

The federal government takes credit for introducing the health care system, as though it would never have happened otherwise. I will not get into the history of this policy which, although its origins go back to Saskatchewan, became a Canadian policy. A respected author on the subject, Thomas Duperré,

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said in 1987 before the commission of inquiry on health and social services in Quebec that establishing federal programs merely shifted to the federal level a debate that had already started at the provincial level and would have led to the same results over the same period of time, give or take a few months or a few years.

Quebec Health Minister Jean Rochon is, as everyone knows, an expert on these issues. He was involved in the work of the Castonguay-Neveu Commission and later chaired the commission that started its sittings in 1985 and developed the policies of both the previous and present government. So this is not a partisan position, anything but. According to Mr. Rochon, "the Canadian health system is a myth. The truth is, we had developed a health and social services system, despite the fact that the federal government centralized its control over resources while ignoring exclusive provincial jurisdiction in this area as conferred under the constitution of the Canadian confederation".

The minister went on to quote the Quebec Minister of Social Affairs and Welfare René Lévesque. At the federal-provincial conference on poverty in 1965, Lévesque, federalist minister in a Liberal government in Quebec, said that it had become imperative to establish a genuine economic and social policy. This policy should be integrated, flexible in its mechanisms and include a social security system centred on the family and based on the right to assistance on the basis of need.

The same sentence, with few changes, could be used to express the same urgency voiced by sovereignists quite recently. Mr. Lévesque went on to say that for the sake of efficiency and on constitutional grounds, the Quebec government alone could and should, within its own territory, design and implement such a policy. Quebec could not let the Government of Canada assume this responsibility. Quebec did not, however, exclude interprovincial co-operation and mutual consultation.

• (1240)

He also said that the social and economic development policy they had formulated would create an integrated social policy, regional development policy, manpower policy, health policy, housing policy and job training policy.

Fourth, the federalist minister said that the general policy, while he did not necessarily condemn it, did not necessarily correspond, in terms of its spirit and terms of application, to one the Government of Canada might opt for. The people of Quebec would enjoy at least as many if not more benefits than other Canadians might.

The central government's repeated interference, expanding into preventive medicine, is an affront to the intelligence of the history of the past 30 years. It is compromising, in a way—and

here I am talking of Canada outside Quebec—and it compromises, it seems to me, a now necessary reorganization. Instead of decentralizing, the federal government is busy reaffirming ever more resoundingly its responsibility for all areas of economic and social development. Through cuts and the transfer of the deficit, it is, moreover, usurping the ability of the poorest provinces, at least, to replace them.

This is a historic moment in the history of Quebec and of Canada. It is not without some emotion that we view these bills—we will be debating Bill C-96 this afternoon or tomorrow and the human resources investment fund and unemployment in the days and weeks to come—that we note that the thinking behind all these bills is one of increasing centralization.

It is an approach, as the Canada social transfer demonstrated in the budget, whereby the only thing transferred to Quebec is the deficit. We are moved by the fact of having to say that the central government wants to take over protecting the public against health risks, when we know the extent to which poverty affects health significantly. We know that centralized and centralizing policies are not going to provide us in Quebec with the tools we need to fight unemployment, poverty and with poor health at the more disadvantaged levels of society.

• (1245)

We will continue to express the thoughts of the large majority of our fellow Quebecers. Even those who voted no, know that, through their municipal governments, their social groups and their Government of Quebec, closest to them, and the most effective integrator, they will not get to heaven, but at least they will have the assurance that every effort was made to provide equality for all in Quebec.

[English]

Mr. Alex Shepherd (Durham, Lib.): Mr. Speaker, I listened intently to the comments of the member for Mercier. I am always very interested in her deep understanding of social issues.

As I listened to her speech, it ran across my mind what she was talking about were communicable diseases. I wondered whether she thought diseases like AIDS or other diseases knew national boundaries. Are specific diseases that could possibly occur in Quebec unique to the borders or indigenous to the borders of Quebec, or are they diseases that can occur throughout the country and indeed throughout the world?

When we are talking about research in diseases and communicable diseases it seems to me that as a country we need to consolidate our work in these areas to try to find solutions rather than be fragmented and have separate research areas throughout the country.

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Next is the whole aspect of governments being closer to the people. We have talked a lot in the House about the issue. I have often wondered if it is psychological talk. We look at a map and we see Ottawa and we see Quebec City. However, what does it mean to someone in Chicoutimi, Arvida or other places in Quebec to get government services closer to the people?

I know in my province, for instance in the area of education, we say that it should be close to the people. The reality is our education system is operated from Toronto. It is not any closer to the people than if it were in Ottawa. I suspect this is true in Quebec as well. The government getting into the lives of people on the streets of those communities is not any more well developed from Quebec City than it is from Ottawa.

An issue that really concerns me about Quebec and its economy is the over-preponderance of provincial debt in that province. Also there is the preponderance of the province of Quebec to borrow, incidentally outside its borders. Some 54 per cent of Quebec's debt is funded outside Canada with foreigners. The referendum actually required the Government of Quebec to borrow \$35 million from foreigners to ask its people if they wanted to be an independent country. It seems a little absurd, quite frankly.

Could the member address some of these issues but mainly the whole issue about how we are to get government closer to the people? The federal government, for instance, pays old age pension cheques and the Canada pension plan. It deals directly with people. The Canadian employment services are in our communities. It is the federal government but it is not in Ottawa. It is in our communities and are dealing with community problems. I ask her whether some of this stuff is psychological.

[Translation]

The Deputy Speaker: The hon. member for Mercier will have as much time to answer as her colleague had to put his question.

Mrs. Lalonde: I have more time, Mr. Speaker? I will be brief, because the hon. member took a lot of time asking his question.

The Deputy Speaker: I said that the hon. member would have as much time as the member who asked the question.

• (1250)

Mrs. Lalonde: Mr. Speaker, I mentioned health risks, and AIDS is not the only one. But for the sake of example, let us take the tainted blood issue. Do you think that it was any comfort to Quebecers to know that the so-called responsibility was being assumed nationally? It is important to know.

Second, our hon. colleague seems to be telling us that, in Canada in general, people may feel it is quite normal for the central government to try to be the one that is the closest to the people. But in Quebec, it is not so. René Lévesque himself said: "We have nothing to prove". We are a people and a nation, and we know that without one being necessarily better than the other, social, economic, cultural and political organization

varies from one nation to another. That is what we are asking for with regard to health as well, and if I say so, it is because I know that I am speaking on behalf of the vast majority of Quebecers.

As for the debt, we think that when the debt is high, it is essential that we be the ones to make the choices, as hard as they may be, and also that we concentrate our resources in areas where a structuring effect can be expected, which is not the case at present in the federal system. Employment centers are indeed a case in point. We have been fighting unanimously for years with ineffective weapons in Quebec to get back control over manpower training, because we know that manpower training is an essential economic development tool.

[English]

Mr. Shepherd: Mr. Speaker, I should like to ask the hon. member a question about education in the province of Quebec, an area that has always interested me.

Education, as the hon. member knows, is exclusively a provincial jurisdiction. Over the years Quebec has had complete control of it. If it was so important and useful in such a supreme system to have exclusive jurisdiction in this area and if it was better for the people, why is the dropout rate in Quebec one of the highest in Canada?

[Translation]

Mrs. Lalonde: Mr. Speaker, this is an excellent question, and I am convinced that the drop out rate is a reflection of our whole social organization. The drop out rate has something to do with poverty. It has something to do with the lack of hope within Quebec and, if you must know, many people are sovereignists like me and will continue to pursue sovereignty because they are convinced that this is the only way to give people hope and make them drop back in.

While there are technical means to bring young people back to school, we know that those who drop out do not do so because their teachers are boring. We know what makes them drop out. We know that an underprivileged youngster is much more likely to drop out.

[English]

Ms. Judy Bethel (Edmonton East, Lib.): Mr. Speaker, as I rise to speak in support of Bill C-95, an act to fix the name of the Department of Health, I am inclined to ask how many hon. members know that above all it is a department that puts its money where the greatest need is no matter where in the country.

Counting all Canadians from coast to coast to coast the greatest health needs are found among the First Nations. For native peoples life expectancy is seven years lower than the Canadian average. Newborns die four times as often. Substance abuse is prevalent. Sickness is more pervasive. Children are most at risk for malnutrition. For these reasons two out of every three dollars spent by the Department of Health excluding transfers to provinces go to enhance native health. More than 2,000 employees of the department are in the direct care

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business, mostly dedicated to helping Indians on lands reserved for Indians.

At a time when most government programs are being cut back, the Minister of Health prevailed to secure additional funds for native health in the recent budget. The government remains committed to mending the inequities that have persisted far too long.

• (1255)

The growth in expenditure will gradually taper down but lead time has been provided for native leaders in consultation with the department to explore alternate approaches to achieving the same levels of quality care that other Canadians have come to expect as their right. It is an essential part of Health Canada's mandate to help First Nations achieve the highest possible standards of health care. The department is expanding some programs and introducing others.

Health Canada's building healthy communities strategy is funded by \$243 million over five years to strengthen and expand existing health programs for native people in areas of critical need, including solvent abuse, mental health and home care nursing. The strategy is designed in consultation with First Nations and Inuit leaders.

Last May the minister announced supplementary funding under the solvent abuse program for six new permanent treatment centres to deal with solvent abuse among First Nations and Inuit people. The centres are located in northern B.C., Saskatchewan, Manitoba, Ontario, southern Ontario and Quebec.

Last May the minister also announced the aboriginal head start aimed at helping disadvantaged children overcome some of poverty's life-drag effects. As it evolves it will provide more and more children with a positive self-image, a desire for learning, and an opportunity to develop social, emotional, physical and learning skills.

Aboriginal people have told us there is a need for programs for young children and families that reflect the culture and experience of their communities. Together with Canada's aboriginal community we have embarked on a mission that will support the need. All Canadians can be proud of the program because its design was developed with input from aboriginal people in both urban and northern communities across the country.

Aboriginal head start represents a made in Canada approach that can begin to address the unique needs of First Nations, Metis and Inuit preschool children and their families. There is ample evidence of the health and educational differences that exist between the Indian, Inuit and Metis people when compared

with other Canadians. We know that by working together we can better deal with these problems.

Over half of Canada's aboriginal population does not live on reserves and this population is very young. While 7 per cent of Canada's total population is under four years of age, 13 per cent of the aboriginal population is under four, nearly twice as high. Studies of head start programs have proven that investing in young children is one of the best investments society can make. Head start programs for young children can have a profound and positive effect on their lives.

The elders tell us that every child has his or her own gift and that it is the responsibility of the community to identify that gift, nurture it and ensure that each child is aware of how special she or he is and that she or he is a gift from the creator. This traditional belief is a natural starting point for a healthy beginning in life. Aboriginal head start is similar to a community based early intervention program developed in the United States more than 30 years ago. Those who are familiar with the head start program will be pleased to know that while we will build on their many successes we hope to improve on what they have done.

An important recommendation from our talks with aboriginal people was to make the program flexible. Doing so allows the uniqueness of the First Nations, Metis and Inuit communities to be respected. Aboriginal head start is not complicated and it will have little red tape. It focuses on local non-profit organizations controlled and administered by aboriginal people who see the parent as the natural advocate of the child. Grandparents and elders play a significant role in aboriginal head start projects. Young aboriginal children will benefit from their wisdom and knowledge of tradition. All aboriginal head start projects will have strong parental involvement.

Aboriginal head start will be guided in each region by a committee comprised of aboriginal people who have been nominated by their peers and bring with them an appreciation and understanding of aboriginal cultures, values, traditions, experience and educational expertise. They will assist in identifying priority sites and selecting projects.

As well, a national aboriginal head start committee is being established to ensure the initiative has support and strength across Canada. Its members will be chosen because they have a broad understanding of early childhood development.

• (1300)

It is clear to the federal government that programs for aboriginal people, designed and delivered by it, are more successful than those delivered by outside agencies. I have no doubt that aboriginal head start committees and local head start projects will succeed.

We have placed our investment and trust at the community level because we believe one of the ultimate goals of this initiative is to help parents and children build better futures for themselves. The Government of Canada will continue to work in strong partnership with Indian, Inuit, and Metis people in fulfilling the commitments made in the red book. Through the aboriginal head start program we are continuing to promote community action and empower communities by providing the tools and resources to improve overall economic and social opportunities for children and families.

Although it was inspired by a community based program of early intervention and had its start in the U.S. more than 30 years ago, this head start program is much improved, based on substantial input from aboriginal people in urban and northern communities.

Aboriginal head start will be flexible, respecting the unique characteristics of First Nations, Metis, and Inuit people. Grandparents, elders, and parents will play significant roles and the program will be guided in each region by a committee of aboriginal people nominated by their community.

Head start programs for young children have profoundly positive long term effects. Their impact on aboriginal communities will be even greater elsewhere because in these communities there are nearly twice as many children under the age of four, nearly twice as many in proportion to their share of Canada's population.

One specific program illustrates the care and concern manifest in this department. Last May, Health Canada was the major sponsor of the third annual international conference on diabetes and indigenous peoples, which was held in Winnipeg. Hon. members may be aware that diabetes is one of the most serious chronic diseases among aboriginal populations in Canada. Diabetes rates for natives are from two to five times greater than for Canadians in general.

Health Canada works in partnership with aboriginal people to improve knowledge and treatment of diabetes. The department recognizes what the minister calls the critical role for traditional aboriginal practices in the healing process. This recognition of the value of traditional practices is of fundamental importance and reflects the department's major focus on the native front, which continues to be transfer of control of programs to First Nations.

Over the years, Health Canada has come to recognize that health programs designed and delivered within aboriginal communities are often more successful than those delivered by outside agencies. Therefore, it now works with First Nations to enhance their control of health resources. There have been more

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than 40 health transfer agreements concluded, involving about 100 First Nations, and the annual expenditures are more than \$43 million. About twice as many again are under negotiation. Self-administered health care is one of the powers that will eventually enable First Nations to achieve self-government.

I have used this occasion to remind hon. members and all Canadians of the commitment in this department to improving health and longevity for Canada's first peoples. There remains much to be done, but I know that our Department of Health, rechristened and recharged, will reconfirm its dedication to those most in need.

I am pleased to support this clearing of the deck and positioning for the future brought about through Bill C-95.

Ms. Margaret Bridgman (Surrey North, Ref.): Mr. Speaker, I would like to address a couple of things in the bill. One is that there is a tendency to think of it as a housekeeping bill because it is a change of name. There are a couple of reasons for changing name. First, it can be done because we do not like the present name. Second, the mandate or the content of the department can be changed. I would like to suggest that the bill represents a little more than just changing the name of the department.

I find it a little amusing that we are discussing the creation of the health department two years into our mandate. I believe we are going to be doing human resources a little later. Also, through Bill C-107 we have created the B.C. Treaty Commission approximately two years after it began functioning.

• (1305)

Getting back to the health department, the fact that it has been up and running under this mandate for two years gives me a little concern as to what its mandate actually is. Whether its mandate has been increased or decreased is the focus of what I am looking at here.

The Department of Health is a product of the phasing out of the Department of Health and Welfare and the Department of Consumer and Corporate Affairs. It is my understanding that most of the mandate that was the Department of Consumer and Corporate Affairs went to the Ministry of Industry. I am assuming that a lot of the welfare aspect of the Department of Health and Welfare went to the Department of Human Resources Development.

I am wondering what is left for the Department of Health. When we talk in our debates about health we tend to zero in on the health insurance or the medicare component of this department. I would think there is a lot more to health than that particular aspect. That is one component of what a good and functioning health department should be.

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If we look at clause 4 of the bill itself, it states that the health department will promote and preserve the preservation of health for the people of Canada. I might add that it states it will do that where it has not been otherwise delegated to other jurisdictions within the government structure.

The second part expands on that a little more. Paragraph 4.2(a) refers to the promotion and preservation of the physical, mental, and social well-being of the people of Canada. I would argue that the social well-being, as we heard earlier in the debate, involves such things as housing, jobs, et cetera. It goes into great parameters from that point of view as to our individual well-being. I would suggest that possibly that aspect is being removed with the removal of the welfare component. Consequently, the health department is in a position of having to collaborate with a number of other industries in actually addressing some of these concerns.

The physical and mental component of that statement is relatively easy to address from a health point of view, because one can certainly look at that within this mandate. However, with the removal of the welfare component the mandate for health has been diminished to a point that now we are in more collaboration and co-operation with the other departments. There is not the same authority there the department once had.

When we move further down the list to what the mandate of this new department will be, in paragraph 4.2(b) it talks about the protection of the people of Canada against risks to health and the spreading of diseases. One would tend to think immediately in that component of communicable diseases and such other diseases that do not necessarily meet the definition of communicable diseases such as HIV-AIDS and possibly hepatitis B and C. These are pandemic kinds of situations. I would hope that a health department would have a major role in addressing these types of things that affect the Canadian people.

We have had some experience in the past two years with both these issues. In my opinion, the response of the government has been reactive. I am wondering if this is a sign of some weakening in the department's ability to pick up the reins and lead when these situations occur.

• (1310)

We go down to paragraph (c), which is "investigation and research into public health, including the monitoring of diseases". I am not sure if it is the only reference, but I believe it is the only reference made in the act to research.

In this context, one tends to think of investigation and research, more studies. We are going to research this, study it. As we all know, we have done a lot of studies. In some areas the

feeling is that we have done enough studies over the years and it is time to get into some action.

I also would like to suggest that the research component of health is very important. It not only should be addressing diseases that are out there, but we should be looking at where we are going in the future from a technological point of view and how these things will affect our health.

I am a little concerned that this is the only reference made to research. It tends to imply that we would be looking at diseases.

Paragraph (d) states that the health department will establish and control the safety standards and safety information requirements for consumer products and safety information requirements for the products intended for use in the workplace. That is a program called WHIMS, which is being carried out by the provincial governments. The federal role in that now tends to deal with a problem within a company in which they feel the giving out of that information on their product may violate the marketing aspects of their product, put them in jeopardy of being duplicated or whatever. I would suggest that the federal government's role in WHIMS is minimal now that it has actually been established and implemented.

Paragraph (e) refers to the protection of public health on railways, ships, aircraft and other methods of transportation. Here is a situation I made reference to earlier. The health department is in a position of not having necessarily authority in these areas but having to collaborate with other ministries. I suggest that this will weaken the leadership of this department.

Paragraph (f) moves into the promotion and preservation of health in public servants and other employees. That stands on its own. The health department definitely is a major player there.

Then we move into an environmental type of clause, international, dealing with the United States and others. Now we have another situation in which I am suggesting health is again in collaboration with another department, in this case environment, which means that there has to be a meeting of minds between the two departments for leadership to evolve in whatever situation has to be there.

Paragraph (h) refers to the Statistics Act and the collection, analysis, interpretation, publication, and distribution of information relating to public health. I would like to say that this aspect is being well done and has been well done in the past. We have had experience in our past where people have been able to get information about specific things. Having worked in the health care field before, I know that if one put the effort into obtaining information one certainly could get it. I suggest that the various departments in Health Canada, the bureaucratic component, have been the major bonus in this aspect of things.

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We are gathering information and correlating it and then disseminating it to the people. I have dealt with the health programs and services branch with Kay Stanley, specifically in relation to cardiac situations. I must say it has been excellent.

• (1315)

Two positive mandates of the health department have come up in my dialogue so far. One is the education and correlation of information and the other is public servants' health care.

The last item is the co-operation with provincial authorities with a view to the co-ordination of efforts made or proposals for preserving and improving public health. My interpretation of that is it is the one which addresses medicare or health insurance. Again, the role has been delegated to the provinces to provide the service. The federal role is the Canada Health Act and the five principles thereof which ensure that the provinces meet those five standards.

Through the amalgamation of departments we have weakened our health department with respect to giving it the necessary authority to address a great number of issues. Many other aspects of the health department, other than the health insurance aspect which has been transferred to the provinces, are tied up with other departments. One really does not know who has jurisdiction.

Being the critic for aboriginal concerns I have seen many studies. We just heard a member speak about programs. There are numerous studies, such as the EAGLE study which is being done in collaboration with the environment department. There is a drinking water study in progress on which the department of health is collaborating with the department of Indian affairs. As a matter of fact, with respect to the drinking water project, I believe an education program has been established.

All of these things are necessary. There is a great concern regarding the health of our aboriginal people which we should be addressing. We know that breast cancer is another problem which we should be addressing. There are many problems which need to be identified and addressed.

The authority to address these health problems within other jurisdictions, for example, aboriginal people falling under the department of Indian affairs, tends to weaken the authority of the health department. We can get caught up with money, priorities or other things. My point is that I think it is a weakness.

There is an abundance of money in the health care budget. There is a tendency to think of that money in relation to the health care insurance plan. We hear all kinds of dialogue about withholding transfers to the provinces and cutbacks in services. I realize there is a formula which is based on a dollar amount per head.

I might suggest that when we start looking at all of the areas in which health is involved, such as the studies and the various programs in collaboration with other ministries, possibly some of that money might be better used on the other side of the health department which is health insurance and medicare. I realize that entails changing the formula.

• (1320)

The moneys available in health care for health insurance—and I do not know what the percentages would be on that through the whole budget—should be revisited in relation to all the other things the health department should or could be doing with the dollars it has but has allocated elsewhere into studies and various individual programs.

Returning to the reference I made earlier that this bill is creating the health department, this department has been functioning for two years. It may support my argument that the department has been weakened. I hope there is a little more activity coming from the health department. We have had no legislation to date other than this bill. Bill C-7 was referred to the health committee but it was not introduced by the health department to this House.

We had the tobacco situation early last year which again had a negative effect on the health situation. We have had the blood tainting and HIV-AIDS situations. We have had comments about the transfer payments to the provinces in the west. We have had TB in the women's prisons and also the assisted suicide issue arise. There was not really any leadership from the health department. The medical profession actually expressed the pros and cons and the ethics of this and the other House undertook the study on palliative care issues.

I have concerns. We are not just dealing with a name change. I have concerns about the role of the government. I have great concerns that it is being diffused.

I have had some discussions with the Canadian Nurses Association. The association expressed the concern that with the removal of welfare the department would be restricted in its ability to address the whole human being which is important. The approach of health care workers in Canada has changed from an illness approach to a wellness approach where they must look at the whole body. There are concerns from the Canadian Nurses Association on that.

The association is also concerned that the national standards coming from the department relate specifically, from what we have heard so far, to the Canada Health Act and the five principles which relate to the health insurance program.

Those are some of my concerns. I will certainly be supporting this bill when the vote comes. I am concerned that it is being diffused. The team leader, the Prime Minister, calls the shots

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when it comes to setting up the ministries. I do have concerns that this department has been extremely weakened.

Ms. Hedy Fry (Parliamentary Secretary to Minister of Health, Lib.): Mr. Speaker, I appreciated the hon. member's comments, some of which were well thought out. I appreciate her supporting the bill.

The most important recurring theme I heard the hon. member refer to was that this new act will weaken the Ministry of Health in that the Ministry of Health will have to collaborate and co-operate with other departments. I do not see it that way.

As the hon. member rightly said, health is more than just the absence of disease. Health has to do with environmental issues. It has to do with issues relating to poverty and socioeconomic status. It has to do with issues of public health which has to do with contagious or transferable diseases.

• (1325)

Departments such as environment, Indian affairs and northern development and human resources development are already in existence and are already dealing with these issues. What happens is a duplication of efforts. In the past, programs were going on within other departments and health would be duplicating some of them. The idea is that if there had been a concerted effort, then health and the other department, which in turn deals with its colleagues at the provincial level, can create a better understanding of the issue. Then the appropriate department working with health can set a healthy public policy with regard to those things.

The positive thing is that in the past many departments have felt that they did not have an impact on health. There is now a real opportunity for departments to understand that health touches every single aspect of our lives. Those departments, whenever they make policy, can focus on looking at the healthy public component of their policy instead of focusing on the other aspects that did not include health and left the health components up to health, in which case it was very diluted. It was more diluted in that case than it would be in this way.

For example, let us look at the issue of poverty and the transfer of the welfare component of health and welfare to human resources development. We know that one of the things that has to do with poverty has to do with creating opportunity for people for employment training to become independent contributors to society. This is already a major part of human resources development. Therefore, developing human resources is going to decrease poverty in the long run which will then impact on health.

This gives better focus to all of the departments which will in turn see that health is an important component of whatever they do across the spectrum. It also gives the Ministry of Health the

ability to look at developing clear health promotion and disease prevention guidelines, focusing on research and some of the things the hon. member spoke about.

Research in terms of disease is not the only component of research one wants to do. The Medical Research Council is looking at health promotion research which will lead to the promotion of positive health status as opposed to just looking at the disease components.

This gives the Department of Health a better focus on some of those issues including public health which, as members well know, means taking healthy public policy with regard to things like sewers, contagious diseases, quality of drinking water and safety, as the hon. member mentioned, which is an important part of what the department does right now. The department will focus on those issues very clearly and will work in co-operation and collaboration with the other departments. This will be a learning process with the other departments to see how what they do impacts on health.

Ms. Bridgman: Mr. Speaker, I appreciate the hon. member's comments. I also appreciate that progress can be achieved much more quickly if we work together.

I recognize the validity of ministries getting together and talking to avoid duplication and channelling their energies in the correct direction. This just does not apply to health; it can also be applied to the environment. Environment affects all the ministries as well.

My concern is that somebody somewhere has to have the authority to take leadership in these situations. When one starts collaborating to that point, is it a committee decision, a health decision, or a ministry decision that we are talking about? How does the priority for recognizing the problem which has been identified actually come into being?

• (1330)

The authority of the department is diminishing because its role is becoming more of an associate or advisory role to the other ministries. It is picking up the gauntlet and running with the program out of its own budget. That is where my concern is. I have no problem with collaborating. That is excellent and it is time we got to it.

I do not see any authority in this paper. If we have a health problem what authority does the department have to put it on the front burner? That is what I am concerned about.

Ms. Fry: Mr. Speaker, I understand the hon. member's comment. It is like the chicken and the egg syndrome.

According to the member's vision of health it would be a super ministry encompassing all the ministries that will in turn look to the Department of Health to make decisions. Obviously that is not possible but it is an interesting concept.

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This is what we have to move to. If we are talking about sharing jurisdictions and incorporating, we are also educating other departments so that people do not continue to focus in a narrow tunnel vision in specific departments on only one component of what they do. It is better for public health policy if the Ministry of the Environment recognizes that whatever it does impacts health, as opposed to the Department of Health constantly saying that it must do this and that, and so on for every other ministry.

I see it as a positive move as opposed to a negative move.

Ms. Bridgman: Mr. Speaker, it might be the chicken and egg syndrome, but the concern first came to me with the EAGLE program. To my understanding that program is being done with the involvement of an aboriginal group. There is probably a specific group around the Great Lakes. The program is studying the effects on aboriginals of the Great Lakes environment. I believe it is being done in collaboration with Indian affairs.

This collaboration is ongoing. We are studying the effects on aboriginals of the Great Lakes environment. I am sure it is affecting other people as well but because it was done in collaboration with one department we have zeroed in on a specific group. This is the trend I am seeing. Instead of the effects on Canadians, we are studying the effects on aboriginals because of the ongoing collaboration. That could get out of hand eventually.

Ms. Maria Minna (Beaches—Woodbine, Lib.): Mr. Speaker, I am supporting Bill C-95 because of the important role Health Canada plays in the life of Canadians. Too often Canadians, and even some hon. members of the Chamber, do not realize that there is more to health than the Canada Health Act. Health Canada supports unique federal roles and responsibilities. The work undertaken by the department is far reaching and important.

Health Canada not only provides the benefits of universal health insurance, it also ensures the safety of food, drugs, cosmetics, medical devices and consumer products. It invests hundreds of millions of dollars in health research. It monitors disease in developing pathogens and it conducts a wide variety of health promotion programs and activities.

Finally, Health Canada administers health services to First Nations, federal public servants, Canadian civil aviation personnel and Canadians in need of emergency health and social services in case of national civil disaster.

The department touches Canadians every day in all aspects of their lives. Canadians look on their health system with pride. They have an overwhelming degree of satisfaction with what the department is doing. They expect governments to work hard to adapt to changing times and priorities. They understand the need

for cost effectiveness, but they demand the security of a department concerned with maintaining and improving the health of all Canadians.

• (1335)

The government has recognized that economically disadvantaged, unemployed or poorly educated Canadians are more likely to suffer from ill health and to have a lower life expectancy. Like governments everywhere we will strive to deal with these problems. We are committed to an equitable health care system. The vast majority of Canadians are solidly behind the efforts being made by government, professional groups and other stakeholders to improve the efficiency of the system.

Canada has a long history of commitment to these principles in serving a dispersed population in a federal system of government. We will maintain our commitment to these principles notwithstanding some difficult economic reality that we, as many nations of the world, are experiencing at the moment.

Canadians look to Health Canada for reassurance whenever there are natural or civilian disasters or threats to national health from chronic diseases such as cancer and tuberculosis or communicable diseases such as AIDS, HIV or the Ebola virus.

Within Health Canada 6,400 employees work to provide Canadians with the research data, programs, information and support they need to make positive lifestyle decisions. The business of the department is conducted in offices and laboratories, in cities and on reserves located on sites all across Canada. Just over half the department's employees work in the national capital region while the rest work in regional offices, collaborating with their provincial, territorial and non-government counterparts.

The Canada Health Act is administered by about 25 employees in Ottawa. The face of Health Canada comprises many names and many talents. Forty per cent of Health Canada staff are involved in the area of health protection, keeping Canadians safe from risks to their health arising from emerging diseases, dangerous products, the environment or unsafe food or drugs.

Defining, assessing and managing current and emerging health risks are also among branch responsibilities, along with maintaining the country's health protection infrastructure. More than 2,000 employees of Health Canada work in the area of First Nations health within the medical services branch. It is often forgotten that two-thirds of the budget of the department, excluding transfers to provinces, is devoted to native health.

Health Canada provides community health services to status Indians on reserves and to residents of Yukon through 600 health facilities across Canada. In order to help First Nations to achieve the highest possible standards of health care, the department has undertaken a variety of initiatives. These include the five-year building health communities strategy and

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the aboriginal head start program aimed at children. The latter is a government red book initiative.

However the department's major focus remains the transfer of control of programs to First Nations. The first main program of Health Canada is the health promotion and programs branch involving some 525 people. They provide support to groups at risk, including children, families and seniors, and develop programs to prevent and reduce heart disease, breast cancer and other illnesses. They also work with and assist Canada's many national voluntary organizations.

It is not well known that the federal government spends about \$340 million on health research annually. Altogether we estimate that in Canada we spend about \$1.5 billion a year on health research. This is a very impressive number.

Each of the three program areas has staff in every province and territory. Not only are offices located in provincial capitals but members will find Health Canada staff in smaller centres like Trois-Rivières, Hamilton, Thompson, Port Qu'Appelle, the Sarcee reserve at Tsuu Pina in northern Alberta, and Prince George.

Most of the remaining thousand or so employees work in the national capital region managing the department, developing health policy and legislation, undertaking consultation and managing essential departmental services. About 250 people work in the Pest Management Regulatory Agency, the Patented Medicine Prices Review Board and the Hazardous Materials Information Review Commission.

Canadians have a strong attachment to their health system and the federal role in it. They look to the federal government to provide a viable, well managed national health care system. According to an Angus Reid poll of March 1995 almost all Canadians want national standards in health care, with 94 per cent saying such standards are somewhat or very essential.

• (1340)

At a time when so much is changing in Canada and in the world people need security to cope with change. They expect their governments to play an important role in that regard by providing Canadians with the best health care system in the world and by reassuring them that they will be taken care of if they are sick, that the products they use are safe and that the most advanced research goes into the measures Health Canada takes to prevent disease. The Department of Health does this to earn the trust and confidence of Canadians.

We have proven over and over again that a publicly administered health care system is the most effective, most inclusive and most successful system one in the world. Privatization of the health care system is a weakening of the system of health care. It only makes the private corporations wealthier at the

expense of those who need health care and at the expense of accessibility.

This is why I support the bill and I encourage all members of the House to do so.

[*Translation*]

Mr. Pierre de Savoye (Portneuf, BQ): Mr. Speaker, this afternoon, we are considering Bill C-95, an act to establish the Department of Health.

This bill contains a number of disturbing clauses, and the Bloc members who spoke before me in this debate pointed out that the provinces will have to pay close attention to how the federal health minister implements these clauses, because they give the federal government an opportunity to encroach on an area of provincial jurisdiction.

I think that our concerns are totally justified; I would like to go beyond the clauses themselves and look at how the Department of Health has been positioning itself for some time now.

As hon. members will recall, in the throne speech almost two years ago, the government announced the national forum on health with great fanfare. What has happened since then?

I would like to think about this because I think it puts the bill before us in a special light and allows us to express a number of reservations with arguments that everyone can understand better.

This forum on health officially started its operations on October 20, 1994, under the chairmanship of the Prime Minister and the vice-chairmanship of the Minister of Health. The mandate of this forum is to improve the health of the Canadian people, increase the effectiveness and efficiency of health care services, and make recommendations to help the government achieve these goals.

We should point out here that the federal government does not miss any opportunity to interfere in the area of health. The federal government therefore decided to participate in the debate and even to initiate the consulting process to assess the Canadian health system, despite the fact that this is an area of exclusive provincial jurisdiction, while setting future priorities in order to improve the quality of health care.

The federal government is making a lot of claims. As you will recall, it turned down the request by provinces to participate fully in the work of the national forum on health. Instead, the Liberals decided to let the provinces attend the forum but only as observers.

How, I ask you, could the federal government disregard the main stakeholders in the area of health, namely the provinces? On September 27, 1994, the current Minister of Labour, who was then Quebec's Minister of Health, told *La Presse*: "The federal government's conduct does not make any sense. How can they contemplate reviewing the health care system without the participation of the provinces, which must provide the services. It is simply unacceptable".

Government Orders

• (1345)

Senator Thérèse Lavoie-Roux said, in the other place, on May 31, 1994, that the government was headed in the wrong direction by overlooking the role of the provinces. She said, and I quote: "Are the provinces not considered major partners? Why were they not invited to participate in the forum? Does the leader find it appropriate for the government to be acting unilaterally on a matter of provincial responsibility?"

Needless to say that the federal government went ahead with its national forum on health, in spite of the strong objections of the key players in the health sector, namely the provinces.

On October 21, 1994, during question period, the Prime Minister said, and I quote: "We in Canada cannot afford to lose our health insurance system because we did not take the time to plan for the future".

That statement from the Prime Minister is telling in more ways than one. First, the federal government sets itself up as keeper and promoter of the quality of health care services provided to the public. According to the Prime Minister, it is thanks to the federal government if the health care system, as it exists, is the pride of Canadians.

Following a meeting with provincial officials in Victoria, the health minister said, in a press release: "The October 15 date is final. However, I believe we can reach an agreement to end extra-billing by clinics to cover essential medical services. It was never my intention to penalize the provinces, but I firmly intend to preserve and to protect Canada's health care system".

Meanwhile, the federal government is careful not to mention the dramatic consequences of its financial withdrawal which, for Quebec alone, will have resulted in a shortfall of over \$8 billion between 1982-83 and 1994-95. That is a lot of money, considering that the government claims to be the keeper of health care in Canada.

The government is also trying to give the impression that it is the only one able and willing to propose efficient solutions to solve the thorny issue of funding for our health care system, as it currently exists. The federal government goes so far as to assume the responsibility of defining priorities to preserve the future of quality health care services.

The Prime Minister's statement shows to what degree the federal government sees itself as the "great thinker" regarding Canada's current and future health care systems, as well as the one which can ensure that it remains accessible, free and universal.

Let me quote an excerpt from a document on the federal-provincial perspective prepared by Thomas Duperré on behalf of

Quebec's commission of inquiry on health and social services: "By using several programs gradually put in place over the years, the federal health department tends to give itself overall responsibility for health and social services, and it does not hesitate to describe itself as the main architect of the implementation and smooth operation of Canada's health system. It should be noted that, for the Canadian government, health services (and, to a lesser degree, social services) in this country form, to a large extent, a nationwide system. Indeed, Ottawa sees provincial governments as mere health care providers, and provincial programs, which never seem to form a global structure, as mere elements of the national system. Provinces, and particularly Quebec, sometimes find it hard to understand the federal government's attitude in the health and social sector. This is because they forget that, rightly or wrongly, the central government gives itself a much larger role than the one provided in the constitution".

• (1350)

Nevertheless, it is obvious that the provinces constitute the ideal sociopolitical agent for health system reform. According to the distribution of powers under the 1867 Constitution Act, only the provinces have the power to create, deliver and administer health and social services to the public.

Let us look at the example of the various actions undertaken by the government of Quebec to transform, modify and improve the health system over the past ten years. Let us think of the Rochon Commission, which took a critical look at the entire health system in Quebec. Each component of the system was placed under scrutiny and a number of groups involved in the health field spoke before public Commission hearings, in order to make known their concerns, their anguish, and their suggestions for improving the irritants inherent to the system.

After this brief review, I hardly need point out in connection with Bill C-95 that the provinces and Quebec are the ones best placed to intervene directly and knowledgeably in the system of health care and services. Who better than the provinces is able to know what the true issues are, and what solutions are required, to keep the health system accessible, universal and free of charge?

The better solution by far would be to hand over to the provinces all taxes earmarked for health care, allowing them to provide their populations with appropriate and suitable health services. Interaction between the provinces would result in agreements to ensure the delivery of services that, while homogeneous and equivalent, were tailored to the specific requirements and means of each province, Quebec in particular. I shall close on this note, Mr. Speaker. Thank you for your kind attention.

*S. O. 31**[English]*

Ms. Hedy Fry (Parliamentary Secretary to Minister of Health, Lib.): Mr. Speaker, I thank the hon. member for his comments.

The hon. member spoke about the health forum. He said the health forum is encroaching on provincial jurisdictions. The health forum is a dialogue by Canadians who form the forum and who were chosen from every province. They have an ongoing dialogue with Canadians about their vision for health system as we move into the 21st century.

I believe it is appropriate for the health forum to do exactly that because Canadian medicare is Canadian. It is pan-provincial. It is a Canadian institution. Eighty-nine per cent of Canadians from every province agree and support medicare as something they treasure as a Canadian system of values and as being completely Canadian in its context.

The provinces deliver services. Nothing in the dialogue the health forum is having with Canadians should interfere with that. These are Canadians speaking with Canadians to get a vision of their health care and reporting back to the Prime Minister on what they believe in. It is appropriate for the federal government to meet and speak with the Canadian people. We talk about a bottom up approach to health care. Everyone agrees we need to know what people think.

Decisions in health care have always been made between governments and through discussion among governments in the health ministers' forum. It is very rare that the people of Canada get an opportunity to have an ongoing dialogue. This is putting the health care system into the hands of the people and letting them describe a vision for Canada as opposed to governments describing a vision for health care in Canada. I believe this is extremely appropriate.

Nothing in this interferes with the parallel meetings that occur constantly between deputy ministers of health in every province and the deputy minister of health in the federal government, and between ministers of health of every province and the federal Minister of Health. They are parallel. They are government to government. They discuss what governments can do.

• (1355)

This is important. Health care is a three-legged stool. That stool comprises the consumer, the Canadian public, who uses those services, the provincial governments which provide, manage and administer those services and the federal government which has been given the mandate under the Canada Health Act to ensure the five principles of Canadian medicare are kept. One leg of that stool has been pretty shaky. No one has bothered to talk to that leg for a long time.

The Prime Minister has said it is important for the people of Canada to speak about their vision. This is extremely appropriate if we see Canada as one country.

[Translation]

Mr. de Savoye: Mr. Speaker, you will permit me to disagree completely with my hon. colleague's remarks.

Health is a provincial matter. If the federal government wants to keep an eye on all the provinces, it should not go through the people of the provinces, but through the governments, whose job it is to administer the system within their province. When you start short-circuiting the authority of the individual provinces and going directly to individual citizens, you are short-circuiting a process that is normal, natural and desirable, because it is practical and necessary. You mess up the whole thing.

In June 1994, a journalist called me and asked me about the forum. I said it was window dressing. I say the same thing today, almost two years after the speech from the throne, this forum has served absolutely no purpose. We have not made any progress, and the provinces are increasingly aware that they are being given responsibilities and deprived of the means to carry them out. This is both unfair and inefficient, and, in the final analysis, the provinces will have the last word, because common sense always prevails.

The Speaker: It being two o'clock p.m. we will now proceed to Statements by Members.

STATEMENTS BY MEMBERS

[English]

CANADIAN VETERANS

Mrs. Bonnie Hickey (St. John's East, Lib.): Mr. Speaker, the past year we watched Canadian veterans return to the Netherlands to places they had fought and where many of their comrades laid down their lives in the defence of freedom. These veterans were greeted as the heroes they are. Dutch children have been taught about the Canadian sacrifice to liberate their country.

It is imperative for Canadian children to learn those same lessons. This week is National Veterans' Week. My home province of Newfoundland has also signed a proclamation declaring this Remembrance Week, the first province to do so. The flag of remembrance will be flown outside schools and municipal and provincial buildings across our province.

These tributes are important. We must take the time to remind ourselves and to teach our children about the courage and sacrifice of Canada's veterans.

In wartime and in peacekeeping missions around the world they have left a legacy of which we can be extremely proud.

* * *

[Translation]

CANADIAN ARMED FORCES

Mrs. Francine Lalonde (Mercier, BQ): Mr. Speaker, the latest information on the practices of the former Airborne Regiment in Petawawa is distressing. The revelation of more and more repugnant practices by former members of the Regiment not only tarnishes the reputation of Canada's armed forces, but indicates that a significant change must take place within the armed forces.

How could anyone tolerate a celebration of the anniversary of the massacre of 14 innocent women at l'École polytechnique? These sordid celebrations are an insult for and an attack on all women.

I call on the Minister of National Defence to act quickly to put an end to the unacceptable behaviour of the Canadian armed forces, which, it would appear, took place with the approval of higher ranking officers. Women are entitled to a public apology.

* * *

[English]

ARMED FORCES PENSIONERS/ANNUITANTS ASSOCIATION

Mr. Jack Frazer (Saanich—Gulf Islands, Ref.): Mr. Speaker, the Armed Forces Pensioners/Annuitants Association contracted a group dental insurance plan, but only under the proviso that monthly premiums be deducted at source.

The request to do so went to Treasury Board in October 1993. Only after many follow-up inquiries did the minister, almost two years later, finally agree to consider the pension deductions.

However, planned implementation could be no sooner than the summer of 1996 and at an estimated cost of "no less than \$100,000" for system development.

Treasury Board already processes payroll deductions for income tax, union dues, United Way campaigns, Canada savings bonds and other insurance plans. The software programs are in place and do not require the massive rewrites suggested by the minister.

The association is willing to pay reasonable administrative charges so there would be no cost to the taxpayer. Rather than letting his bureaucrats place unreasonable impediments in the way, the minister should direct Treasury Board to provide this service to a group of people who simply wish to protect their dental health.

S. O. 31

CANADIAN UNITY

Mr. Jag Bhaduria (Markham—Whitchurch—Stouffville, Ind. Lib.): Mr. Speaker, I congratulate the people of Quebec for the patriotic and historic decision they took last week by opting to remain in Canada. Fellow Canadians living outside Quebec are grateful for this expression of confidence.

At this time I also express my personal gratitude to the constituents of my riding who travelled with me by bus to Montreal on Friday the week before, and to the more than 50,000 South Asians living in Montreal and elsewhere in Quebec who worked with me over the past two months on the Canadian unity campaign. To all of you I say your efforts are deeply appreciated by all Canadians. The dedication and tireless efforts to serve your host country will long be remembered.

Finally, it was a pleasure to work with the various South Asian community leaders in Quebec during the referendum campaign. In a true sense you have made Canada strong and free.

* * *

TAKE OUR KIDS TO WORK DAY

Mr. Robert D. Nault (Kenora—Rainy River, Lib.): Mr. Speaker, as members may be aware, this Wednesday is Take Our Kids to Work Day.

Sponsored in part by the federal human resources department, 150,000 grade nine students from across Ontario will spend the day at the job of a parent, relative or other adult. This program is an integral part of the grade nine program and is supported by a majority of school boards across Ontario. Through direct experience it shows young people how important skills, training and education are to their success.

Today I have a constituent, Natalie Martz, shadowing me on the job. I am pleased to participate in such a valuable program and I encourage all members who have the opportunity to do so.

* * *

[Translation]

RADARSAT

Mr. Eugène Bellemare (Carleton—Gloucester, Lib.): Mr. Speaker, Canada has just launched Radarsat, its first earth observation satellite. With Radarsat, Canada undertakes a new international business venture using satellite imagery to monitor our environment and manage our natural resources.

In addition to providing us with exclusive images of our planet, Radarsat will allow us to follow the movement of ice in the Arctic, monitor the risks of forest fires, and detect pollution in coastal waters.

S. O. 31

Radarsat is among the first symbols of the evolution of our knowledge-based society. It also provides concrete evidence that space science can have major commercial benefits on earth.

* * *

ANNE BEAUDRY-GOURD

Ms. Albina Guarnieri (Mississauga East, Lib.): Mr. Speaker, last Friday, the audience at Place des Arts in Montreal witnessed the triumph of the human spirit and the overcoming of physical barriers to success.

At 75 years of age, Anne Beaudry-Gourd became the oldest graduate of the University of Quebec in Montreal when she received a Master's Degree in death studies.

This great achievement comes after Mrs. Beaudry-Gourd raised nine children, cared for a sick husband, hosted the radio program *Au pays des livres* in the Abitibi region for several years, founded the two municipal libraries in Rouyn and Noranda, and won a literary prize with, among other things, an article on the German writer Gertrude von Lefort.

Mrs. Beaudry-Gourd succeeded thanks to her great determination and tremendous potential. Congratulations to a much loved and admired woman.

* * *

NEW BRUNSWICK PREMIER

Mr. Pierre Brien (Témiscamingue, BQ): Mr. Speaker, Premier McKenna is on a mission in western Canada. He wants to explain to his colleagues that the distinct society clause to which the Prime Minister of Canada and he himself are referring is indeed the meaningless concept set out in the Charlottetown accord, even though this accord was rejected by a majority of Quebecers and Canadians.

To support his arguments, he can also remind those unfamiliar with constitutional wrangling of the key role he played in killing the Meech Lake accord. Despite Mr. McKenna's assurances on the purely symbolic value of the distinct society clause, the premiers of Ontario and western Canada are incapable of recognizing, even half-heartedly, the existence of the people of Quebec.

• (1405)

Since we know that two out of three Canadians do not want to reopen the constitution, Quebecers will quickly realize that the vague promises of change and the McKenna-style machinations in favour of distinct society are nothing but a ruse, and that real change can only be achieved through Quebec sovereignty.

[English]

PRIME MINISTER

Mr. Darrel Stinson (Okanagan—Shuswap, Ref.): Mr. Speaker, in opposition Jean Chrétien told minister Kim Campbell that—

The Speaker: I ask the hon. member to refer to present members in the House by their riding or title.

Mr. Stinson: In opposition, leader Jean Chrétien—

The Speaker: The hon. member for Burnaby—Kingsway.

* * *

INDONESIA

Mr. Svend J. Robinson (Burnaby—Kingsway, NDP): Mr. Speaker, December 7 of this year will mark 20 years since Indonesia illegally invaded East Timor and began a campaign of genocide and human rights violations. This November 12 will be the fourth anniversary of the Dili massacre.

Over the past two months repression has intensified as Indonesia tries to suppress protest in advance of these anniversaries and before the upcoming visit of the United Nations High Commissioner for Human Rights. Several hundred people have been arrested and it is feared they are being tortured. Others have been killed.

Given all of this, it is totally inappropriate for the Minister for International Trade to be planning a trade visit to Indonesia for November 11 on his way to the APEC summit in Japan.

This trip by the Minister for International Trade on the very eve of the Dili massacre anniversary demonstrates once again the complete moral bankruptcy of Canada's foreign policy.

I urge members of the House to support the New Democratic Party's proposal to end Canadian aid and arms sales to the Government of Indonesia and I urge the minister to reconsider his visit.

* * *

FIRST NATIONS

Mr. Raymond Bonin (Nickel Belt, Lib.): Mr. Speaker, I rise today to ask my colleagues to join with me in congratulating these aboriginal Canadian communities: the James Bay Cree, the Walpole Island First Nations and the Sanikiluaq Inuit community.

Recently these three communities were honoured by the United Nations for their achievements in overcoming great hardships to improve the quality of life of the members of their communities.

As recipients of the United Nations award "We the Peoples" our three aboriginal communities were held up as models to others facing hardships. The award serves as a testimony to the

ability of communities to come together under a common banner to promote positive change in the harshest of circumstances.

I thank the peoples of the James Bay Cree, the Walpole Island First Nations and the Sanikiluaq Inuit community for reinforcing our hope and resolve in bettering the lives of aboriginal Canadians from coast to coast.

* * *

THE LATE YITZHAK RABIN

Mr. Sarkis Assadourian (Don Valley North, Lib.): Mr. Speaker, one who kills in the name of morality kills nothing except one's own morality.

The world has suffered the loss of a great peacemaker. Mindless violence has claimed a leader whose foresight and courage led his nation from the twisted path of endless conflict and pointed it toward the road to peace.

I was honoured to nominate Prime Minister Yitzhak Rabin for the Nobel Peace Prize in January 1994 and overjoyed when he was awarded that honour in December 1994.

Yitzhak Rabin was a soldier who fought for his country and yet he grew to realize that the only solution was to become a soldier for peace. He survived conflict as a soldier but died as a soldier of peace.

When I met him last year in Canada he promised he would continue to work toward a lasting peace.

I extend my deepest condolences to Mrs. Rabin, her family and the nation of Israel.

* * *

THE LATE YITZHAK RABIN

Mr. Peter Adams (Peterborough, Lib.): Mr. Speaker, this evening at the Beth Israel synagogue in Peterborough people of all faiths will be meeting to mourn and remember Mr. Yitzhak Rabin.

I met Mr. Rabin once. He impressed me greatly.

Israel is an extraordinarily democratic nation. The struggles of the great majority of Israelis to solve their enormous problems through the democratic process are an example to us all.

Mr. Rabin's career was a key thread in the fabric of a democratic Israel from its birth to today. He showed us the path of moderation is not a soft option. It is a tough road beset by the pitfalls and traps of extremists. It is a path often shrouded by the fogs of apathy.

S. O. 31

• (1410)

Our thoughts are with Mr. Rabin's family and the state of Israel at this difficult and tragic time.

* * *

THE ECONOMY

Mr. Dale Johnston (Wetaskiwin, Ref.): Mr. Speaker, the government's head in the sand approach to running the country must stop. Our debt is \$567 billion and Stats Canada reports the October jobless rate increased to 9.4 per cent.

The Pollyannas across the way no doubt have been told: "Don't worry, be happy; the economy is improving". The 65,000 new entrants into the job market will not be happy until they find a job.

The increase would have been even higher if it were not for the spinoff from the resurgence of the U.S. economy. While the Prime Minister and his cabinet were perfecting their do-nothing routine during the referendum, they failed to realize the status quo approach to the economy will bring Canada even closer to financial collapse.

The minister of HRD's orchestrated leaks about new job creation schemes show he is still clinging to the socialist notion that governments can create jobs. History has proven this approach to be an unmitigated failure.

Why does the government not get out of the way so the private sector can create some real jobs?

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[Translation]

TRAGIC DEATH OF PRIME MINISTER OF ISRAEL

Mrs. Pauline Picard (Drummond, BQ): Mr. Speaker, following the tragic death, two days ago, of Yitzhak Rabin, Israel and the whole international community have lost a great statesman.

Yitzhak Rabin was one of the main architects of the peace process in the Middle East. His death must not end the hope for lasting peace between Israel and its Arab neighbours.

Yitzhak Rabin was like a reflection of his country and of the whole Middle East. Born in a country under foreign control, he fought for national independence before becoming his country's defence chief of staff, and eventually ambassador, prime minister and peacemaker. It is thanks to his dedication to peace if, in recent years, we witnessed a rapprochement between Israel and its Arab neighbours.

More than anything else in his distinguished career, Yitzhak Rabin will be remembered as a man of peace who was loved by his people, by neighbouring nations, and by us all.

*Oral Questions**[English]***THE LATE YITZHAK RABIN**

Mr. Rey D. Pagtakhan (Winnipeg North, Lib.): Mr. Speaker, only two years ago Israeli Prime Minister Yitzhak Rabin proclaimed to the world: "Enough of blood and tears. Enough".

Today citizens of the world remember those courageous words as they mourn the tragic loss of this great peacemaker. It is indeed ironic that a man of peace should be taken from the world so violently.

Today as we mourn his death we also celebrate his life. We shall continue to remember him for the legacy he has left behind: peace in the Middle East which will be treasured by every child who comes of age in a better world.

Mr. Rabin knew the soul of his people and his people came to him for leadership in war and in peace.

As we grieve with his family and his nation, let us resolve that his death shall not still the life of peace.

* * *

THE LATE YITZHAK RABIN

Mrs. Jane Stewart (Brant, Lib.): Mr. Speaker, when a man of war becomes a general of peace, we have surely witnessed a miracle. When a man can turn a hawk into a dove, we have surely witnessed a miracle. When a man can learn to give instead of take, we have surely witnessed a miracle.

This miracle will be remembered as Yitzhak Rabin. The history he has written will become a beacon of hope, a symbol of peace, a miracle of humanity for all the world to share.

As but one who has watched his leadership and listened to his words, I share the grief, I feel the sorrow and I know we have lost someone rare.

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GOVERNMENT SPENDING

Mr. John Williams (St. Albert, Ref.): Mr. Speaker, the first set of supplementary estimates was tabled last week and with these estimates the government is proposing \$936 million in new spending; spending that only six months ago was unforeseen, unimagined and completely unanticipated by the government.

I am appalled by some of this spending. The government's failure to collect information and its efforts to hide information have led to an expensive Somalia inquiry budgeted at \$7.4 million. This could have been, would have been and should have been avoided if the Department of National Defence had done its job correctly.

There is a \$4 million subsidy to Canada Post Corporation for providing services to the north. I thought Canadian postage rates are supposed to pay for delivery everywhere in Canada. Does Canada Post need an additional \$4 million subsidy to do the job it is already paid to do?

* * *

● (1415)

PHARMACY AWARENESS WEEK

Mr. Paul Szabo (Mississauga South, Lib.): Mr. Speaker, I am pleased to rise today to bring to the attention of all Canadians that November 1 to 7 is Pharmacy Awareness Week.

Each year there are 12,500 deaths, two million lost work days, and \$150 million in lost earnings in Canada because people do not take their medications properly.

The purpose of Pharmacy Awareness Week is to recognize the important role pharmacists play in health care, particularly in the use of medication. It also serves to encourage a dialogue between pharmacists and their patients on the proper and safe consumption of prescription drugs. Pharmacy Awareness Week is an opportunity for patients and pharmacists to reduce the risk involved with unsafe medication consumption.

I recognize the efforts of pharmacists in the field of health and I encourage them to continue their efforts to ensure that medications and their proper use continue to improve the good health of all Canadians.

ORAL QUESTION PERIOD*[Translation]***THE CONSTITUTION**

Mr. Gilles Ducesse (Laurier—Sainte-Marie, BQ): Mr. Speaker, last Wednesday, in response to a question, the Prime Minister said he was in favour of a veto right, not for the Government of Quebec but for Quebecers.

When asked about this last week, both the Minister of Intergovernmental Affairs and the Deputy Prime Minister were unable to explain what the Prime Minister meant.

Could the Minister of Justice explain what the Prime Minister means when he talks about a veto right for Quebecers?

Hon. Marcel Massé (President of the Queen's Privy Council for Canada, Minister of Intergovernmental Affairs and Minister responsible for Public Service Renewal, Lib.): Mr. Speaker, last week we said that the best way by far to give Quebecers the veto was to proceed with the good government we had started to put in place and implement the changes and reforms that were clearly demanded by the public. That was the best way to prevent the next referendum.

Oral Questions

Mr. Gilles Duceppe (Laurier—Sainte-Marie, BQ): Mr. Speaker, I directed my question to the Minister of Justice because I thought that directing it to the Minister of Intergovernmental Affairs would not give us more of an answer than we had last week.

I will again put my question to the Minister of Justice. Could he confirm his government's plans to table legislation in the House of Commons authorizing federal referendums in five regions in Canada, including Quebec, for the purpose of amending the constitution?

Hon. Marcel Massé (President of the Queen's Privy Council for Canada, Minister of Intergovernmental Affairs and Minister responsible for Public Service Renewal, Lib.): Mr. Speaker, obviously the government speaks with one voice, whether it does through the Prime Minister, who is in charge, the Minister of Justice or myself. Furthermore, the questions now being asked by the hon. member for the opposition are about purely speculative matters on which the government is not prepared to commit itself.

Mr. Gilles Duceppe (Laurier—Sainte-Marie, BQ): Mr. Speaker, we will keep trying to find out a little more about the vacuum that exists on the other side.

Does the Minister of Justice realize that this plan to hold federal referendums that might amend the Canadian constitution means that his government intends to go over the head of the Quebec National Assembly, as it did in 1982?

Hon. Marcel Massé (President of the Queen's Privy Council for Canada, Minister of Intergovernmental Affairs and Minister responsible for Public Service Renewal, Lib.): Mr. Speaker, the purpose of a referendum is to find out how the public feels. We know how the public feels. People want to stay in Canada, and they want changes made within Canada. They expressed their opinion. It is over. Because we believe in democracy, we concluded that their no was a real no, and we are acting on that basis. That is why we are going to put reforms in place in Canada.

Mr. Michel Bellehumeur (Berthier—Montcalm, BQ): Mr. Speaker, the Minister of Justice refuses to rule out, as a scenario for amending the constitution, the possibility that the federal could hold its own referenda in the five regions of Canada, including Quebec.

My question is for the Minister of Justice. In this context, are we to understand that the right of veto for Quebecers the Prime Minister of Canada referred to would consist in violating the authority of the Quebec national assembly by flouting its prerogative to hold its own referenda?

Hon. Sheila Copps (Deputy Prime Minister and Minister of the Environment, Lib.): No, Mr. Speaker.

Mr. Michel Bellehumeur (Berthier—Montcalm, BQ): Everyone but the Minister of Justice answered, Mr. Speaker.

My second question is for the Minister of Justice. Is this federal initiative not an indication that Ottawa is trying to pave the way for another dirty trick like the one it played on us in 1982 by amending the constitution without the consent of the Quebec national assembly? They are at it again.

Hon. Sheila Copps (Deputy Prime Minister and Minister of the Environment, Lib.): No, Mr. Speaker.

* * *

● (1420)

[English]

SECURITY OF PRIME MINISTER

Miss Deborah Grey (Beaver River, Ref.): Mr. Speaker, all Canadians were shocked to hear of the break-in at 24 Sussex Drive on Saturday night.

The Prime Minister deserves to be protected. He must be protected, especially in his own home. The more Canadians learn about this, the more outraged they are at this breach of security.

I ask the Solicitor General of Canada, where in the world did our security system go wrong on Saturday night?

Hon. Herb Gray (Leader of the Government in the House of Commons and Solicitor General of Canada, Lib.): Madam Speaker, this is a very unfortunate situation.

I met with the commissioner yesterday and discussed it with him again this morning. I can confirm that I have asked for a full investigation and he has agreed that such an investigation be carried out into the security of the Prime Minister and that of all official residences.

A full investigation is being carried out into this incident by a senior officer of the RCMP not connected with the management of the security system. The purpose of this investigation is not only to find out what happened but to make sure it does not happen again.

Miss Deborah Grey (Beaver River, Ref.): Mr. Speaker, the minister says it was an unfortunate incident. In fact it was terrifying. I have sympathies for Mrs. Chrétien, who went to the door and found such a frightening thing. It is not acceptable that it just be deemed unfortunate, especially on the heels of the tragic murder on that same day of the Israeli Prime Minister.

It took the RCMP almost 10 minutes to respond. If Mrs. Chrétien had called the fire department, their response time would have been three and a half minutes. Why did it take so long?

Hon. Herb Gray (Leader of the Government in the House of Commons and Solicitor General of Canada, Lib.): Mr. Speaker, I have already pointed out that this incident is totally unacceptable. The commissioner of the RCMP had a

Oral Questions

press conference earlier today and expressed his shock and dismay at what happened.

Obviously a full investigation has not been completed. It would appear that the RCMP officers on the site did not follow procedures. Instead of moving immediately to the house, they surrounded the house before going in and arresting the person who had broken into the house and placing him under control.

Miss Deborah Grey (Beaver River, Ref.): Mr. Speaker, platitudes and investigations and all these kinds of things are one thing, but Canadians are demanding more. They are demanding action, not just reports and tabling of reports. They do not feel safe in their own homes. Now they find out that their Prime Minister is not safe in his.

How can the solicitor general assure Canadians that this government has taken immediate steps so that this will never happen again? Will he commit today to tabling the report that is brought forward so that all Canadians can look at it?

Hon. Herb Gray (Leader of the Government in the House of Commons and Solicitor General of Canada, Lib.): Mr. Speaker, the report is going to be made to me by the commissioner. I will review it. To the extent that information can be made public without undermining security, I will certainly attempt to bring it forward to this House.

I can also confirm to this House that enhancements and improvements to the security at 24 Sussex have already been made. The RCMP and the government are not waiting for the report before making necessary improvements in security.

Above all, this incident is shocking and dismaying. It is unacceptable. As far as I am concerned, everything possible will be done to make sure it never happens again.

* * *

[Translation]

THE CONSTITUTION

Mr. Pierre de Savoye (Portneuf, BQ): Mr. Speaker, my question is for the Minister of Justice.

Saturday he confirmed that the federal government is opposed to any constitutional recognition of the distinct status of Quebec and that it is preparing instead to table in the House of Commons a simple and inconsequential resolution which will not change anything concretely for Quebec.

Are we to understand that the fact that only one Canadian out of three outside Quebec would be prepared to modify the constitution explains the federal intention to offer Quebecers

only a simple resolution on the distinct society which will serve no useful purpose to the men and women of Quebec?

Hon. Allan Rock (Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, I never said that, but it is our intention to respect the Prime Minister's commitments.

• (1425)

As my colleague stated today, the most important thing is to ensure good government; then another referendum campaign will not be necessary.

Mr. Pierre de Savoye (Portneuf, BQ): Mr. Speaker, I appreciate the reply by the real Minister of Justice. But I must regret the lack of insight in his answer, which led to my supplementary question.

Because two out of three Canadians are opposed to reopening the constitution, will the Minister of Justice admit that the only true path to change for Quebecers is the sovereignty of Quebec?

Hon. Allan Rock (Minister of Justice and Attorney General of Canada, Lib.): No, Mr. Speaker.

* * *

[English]

NATIONAL UNITY

Mr. Bob Ringma (Nanaimo—Cowichan, Ref.): Mr. Speaker, polls over the weekend indicate that in the wake of last week's no vote a strong majority of Canadians, both inside and outside Quebec, feel that the country should be more decentralized. The polls also indicate that support for a distinct society clause is weak and that such a clause would likely run into problems if the government tries to introduce it.

Given these sentiments, will the government commit to abandoning the distinct society clause?

Hon. Sheila Copps (Deputy Prime Minister and Minister of the Environment, Lib.): Mr. Speaker, we have made it clear that we intend to proceed with the engagements taken by the Prime Minister during the course of the referendum. We intend to respect those.

Mr. Bob Ringma (Nanaimo—Cowichan, Ref.): Mr. Speaker, the answer is a little vague, but let us try to pin it down a bit more.

Will the minister not agree that rather than trying to enshrine a distinct society into the Constitution, if that is what is meant by the answer, legitimate aspirations of everyone can be met through the devolution of powers for language and culture from the federal to all provincial governments without the need for constitutional change?

Hon. Sheila Copps (Deputy Prime Minister and Minister of the Environment, Lib.): Mr. Speaker, Canadians made it clear, both Quebecers who voted in the referendum and other Canadians across the country, that they want governments that

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embrace change and governments that are prepared to challenge the status quo.

We are the government that over the last two years has not only challenged the status quo, we have laid out a path for harmonization to make sure that governments that can best deliver to the people are the governments that are in the position of doing so. We believe that process should continue.

We challenge the status quo. Unfortunately, the two parties that seem to hide behind the status quo are the Bloc Quebecois and the Reform Party.

* * *

[*Translation*]

REFERENDUMS

Mr. Jean-Paul Marchand (Québec-Est, BQ): Mr. Speaker, last week as he left a cabinet meeting, the Minister of Justice clearly raised the possibility of dusting off an ancient federal power of disallowance which has not been used for more than half a century or going before the courts to stop Quebec if someday it wanted another referendum on its political future.

My question is directed to the Minister of Justice. Could the minister confirm that he intends to use the power of disallowance which, according to the Supreme Court, has become obsolete, to prevent Quebecers from voting democratically on their political future?

Hon. Allan Rock (Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, the real question, the most important one for the future, is good government for Canada. The Prime Minister promised to provide good government for Canada. Constructive changes in the government's administration have been discussed, and once these are implemented, we are confident there will be no need for another referendum campaign in the future.

Mr. Jean-Paul Marchand (Québec-Est, BQ): Mr. Speaker, if I understood correctly, the Minister of Justice does not deny what he said last week, so I am back with a supplementary.

Does the Minister of Justice not think it was indecent to consider resurrecting the power of disallowance or going before the courts to silence the voice of the people of Quebec?

• (1430)

Hon. Allan Rock (Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, the questions last week about constitutional powers were technical but the concerns of this government are not only about constitutional powers but about this government's responsibility for political stability in Canada. The source of that stability is good government.

[*English*]

CANADA MORTGAGE AND HOUSING CORPORATION

Mr. Randy White (Fraser Valley West, Ref.): Mr. Speaker, it is kind of sick to think that the Conservative and Liberal governments over all these years have raised the debt in this country to \$567 billion.

On the very day of the referendum, the government quietly tabled legislation to increase Canada Mortgage and Housing Corporation's loan liability by \$50 billion, from \$100 billion to \$150 billion.

I would like to ask the minister of public works why is this government adding a further \$50 billion liability to this country and an already overburdened economy, thereby expanding the government's authority in the area of housing?

Hon. David Dingwall (Minister of Public Works and Government Services and Minister for the Atlantic Canada Opportunities Agency, Lib.): Mr. Speaker, I am not surprised at the question from the hon. member who continues to show a lack of understanding of the various programs operated by the Government of Canada.

In the premise of his question, once again the hon. member alludes to facts which are incorrect. The hon. member and all hon. members should know that this fund is self-sustaining. There are no appropriations from the Government of Canada for this fund. In point of fact over 330,000 Canadians have benefited from this program.

I would suggest to the hon. member that once in a while he should get his facts straight.

Mr. Randy White (Fraser Valley West, Ref.): Mr. Speaker, I guess after the rough ride the minister had this summer he wants to get back. That is interesting.

There are two types of liability in this country. One type is on the books of the government and the other rest in the 24 seats in the front here.

I confirmed with the vice-president of finance for CMHC that if any of these mortgages are defaulted they are a liability against the government. Perhaps the minister missed that idea.

Will the minister commit today to introducing legislation to guarantee exclusive provincial control of housing, and if not, why not?

Hon. David Dingwall (Minister of Public Works and Government Services and Minister for the Atlantic Canada Opportunities Agency, Lib.): Mr. Speaker, the answer to the first part of the hon. member's question is no. The reason is that unlike the third party, the government does not have an ideology that the role of the national government is to be a Visa or Chargex for provincial governments.

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We believe there ought to be a role for the Government of Canada in the affairs of the nation. Such a suggestion which has been proposed by the hon. member is not shared by other members of his own party who are asking the government to put more money into housing programs across the country.

* * *

[Translation]

ROYAL CANADIAN MOUNTED POLICE

Mr. Bernard Deshaies (Abitibi, BQ): Mr. Speaker, my question is for the Solicitor General.

As my colleague from the Reform Party pointed out, an individual armed with a knife broke into the Prime Minister's official residence with disconcerting ease, thereby highlighting the shortcomings of the security system designed to protect the Prime Minister and all other Canadian parliamentary leaders.

How can the Solicitor General explain the fact that an individual was able to break into the Prime Minister's residence so easily, and does this come as a surprise to security officials?

Hon. Herb Gray (Leader of the Government in the House of Commons and Solicitor General of Canada, Lib.): Mr. Speaker, a complete review of the security measures to protect the Prime Minister and the official residences is currently under way.

• (1435)

Security measures have already been tightened, and once this review is completed, I will receive a report, in light of which we will take all the measures required to prevent such incidents in the future.

Mr. Bernard Deshaies (Abitibi, BQ): Does the minister promise to table in this House the results of this internal investigation?

Hon. Herb Gray (Leader of the Government in the House of Commons and Solicitor General of Canada, Lib.): Mr. Speaker, I do not think the House would want the report to undermine in any way the security measures for the Prime Minister's residence. So, as I just said, I will do what I can to disclose the content of this report, but it may be impossible to release all the information, at the risk of undermining the security measures. I think that priority must be given to the security measures required to protect the Prime Minister and his family.

* * *

[English]

MIDDLE EAST PEACE PROCESS

Ms. Shaughnessy Cohen (Windsor—St. Clair, Lib.): Mr. Speaker, Canadians are shocked and saddened by the tragic death of Prime Minister Yitzhak Rabin of Israel. They are also

concerned about the future of the peace process and our role in the Middle East.

Will the Minister of Foreign Affairs tell the House what role Canada has played and what future role we will play in the Middle East peace process?

Hon. André Ouellet (Minister of Foreign Affairs, Lib.): Mr. Speaker, indeed we are saddened by the tragic and senseless death of Prime Minister Rabin. It is a tremendous loss for the peace process of a man who dedicated his life to his country and gave tremendous impetus to the peace process.

Canada has been a full supporter of the peace process and is playing an important role as chair of the refugee working group. Canada believes there will not be full peace in the region until the question of refugees is totally resolved. Canada will continue its efforts in this regard.

We hope that despite this great loss and tragedy the work engaged in and started by Prime Minister Rabin will be pursued and that all of Israel's neighbours will sign and agree to lasting peace in the region.

* * *

INDIAN AFFAIRS

Mr. Jim Hart (Okanagan—Similkameen—Merritt, Ref.): Mr. Speaker, the Penticton Indian band and the British Columbia government have failed to reach an agreement regarding the Green Mountain Road, a federally owned road. Yet another Indian band in British Columbia is poised to set up roadblocks and the band has threatened violence.

We have been constantly asking the government to exercise its constitutional duty to be responsible for Indians and lands reserved to Indians.

What is the Minister of Indian Affairs and Northern Development going to do about the situation?

Hon. Ron Irwin (Minister of Indian Affairs and Northern Development, Lib.): Mr. Speaker, there is the B.C. treaty process which was really a creature of the present leader of the Reform Party in B.C. when he was a member of the other government in cabinet. We have to make it work. We have put a lot of money and lot of time into it. That deals with related issues.

The hon. member knows because we have discussed it that on roadblocks all kinds of other issues come in. The roadblock is used per se, almost as a bargaining tool for land, for the Penticton lodge, for all of these things. We have to keep those in the B.C. treaty process or we will destroy a process that we both support. It will not work unless we go to that process.

Specifically on roads, I met with the B.C. minister of transport Jackie Pement for an hour just before question period. We are trying to set up a process where we can work collectively if it is a road issue. If it is a broader issue we are trying to encourage the First Nations to go to the table. Otherwise, if there is success on all the issues just because there is a roadblock, there will be

more roadblocks and the 70 per cent of the First Nations of B.C. at the B.C. table will walk away.

• (1440)

Mr. Jim Hart (Okanagan—Similkameen—Merritt, Ref.): Mr. Speaker, the minister knows full well that there is no roadblock at this particular point.

I have spent the past two weeks personally seeking out the minister in an attempt to have him do something about this situation. The British Columbia government is helpless. Its hands are tied. Canadians have already learned that the federal government's inaction was a major cause of the Oka crisis. The B.C. government has been consistently reminding the federal government of its duties and responsibilities.

Will the minister take action now and prevent another Gustafsen Lake?

Hon. Ron Irwin (Minister of Indian Affairs and Northern Development, Lib.): Mr. Speaker, I disagree with the premise. We are working positively with the B.C. government and it is doing fine work.

In October 1993 we came into office. In December 1993 we opened up the office of the B.C. Treaty Commission. No other government before us was able to do that.

We have worked 10 solid weeks to get the formula which members have seen in the paper in the last few days and it is getting there for the B.C. treaty process. We are close to settling the Nisga'a. We deal positively on all matters.

My problem is not with the B.C. government; my problem is with the Reform members who come from B.C. and refuse to address the issues.

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[Translation]

COPYRIGHT

Mrs. Christiane Gagnon (Québec, BQ): Mr. Speaker, my question is for the Minister of Canadian Heritage.

Following a question asked on May 15 about copyright, the hon. member for Saint-Hubert was finally told, five months later, by the justice minister that he would transmit her question to the ministers responsible, namely the industry and heritage ministers.

Given that Quebec and Canadian composers, authors and performers have been waiting eleven years for this bill, will the Minister of Canadian Heritage pledge to table this legislation in the House as soon as possible?

Hon. Michel Dupuy (Minister of Canadian Heritage, Lib.): Mr. Speaker, it is perfectly normal to have several ministers involved. There is of course the Minister of Justice, since the bill must be drafted by his department. There is also

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the Minister of Industry, since he is responsible for the Copyright Act. And, finally, there is the Minister of Canadian Heritage, who is responsible for proposing amendments to the act.

The three ministers work together, make decisions together, and will get results together. As for the duration of the process, I publicly stated on several occasions that we are going as fast as we can, that the issue is complex, and that the bill will be tabled in the House as soon as it is ready.

Mrs. Christiane Gagnon (Québec, BQ): Mr. Speaker, I have a supplementary.

Will the Minister of Canadian Heritage make sure, through the copyright bill, that the rights paid to creators will not be reduced by providing numerous exceptions?

Hon. Michel Dupuy (Minister of Canadian Heritage, Lib.): Mr. Speaker, we have to find a good balance between the rights of creators—we are establishing new ones—and the rights of users. This is the real issue. This is where we have to find a balance, and the hon. member will see how we do it when the bill is tabled.

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[English]

NATIONAL DEFENCE

Mr. Jay Hill (Prince George—Peace River, Ref.): Mr. Speaker, we spent the last few weeks discussing Quebec sovereignty in the House. I think it is high time that we turned to another sovereignty issue and that is Canada's failure to assert sovereignty over the Northwest Passage in the Arctic.

On June 13 the minister told the Standing Committee on National Defence and Veterans Affairs that the United States informs Canada when its nuclear submarines travel under Canada's Arctic ice.

Will the minister confirm the existence of this, as he put it, novel diplomatic arrangement, when it was signed and whether similar agreements exist with other countries?

Hon. David M. Collenette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, we have a number of bilateral agreements with the United States. One of them provides for the movement of U.S. vessels in Canadian waters upon agreement of such a manoeuvre.

When the U.S. requires such permission, they let us know that they intend to use our waters and we acquiesce.

• (1445)

Mr. Jay Hill (Prince George—Peace River, Ref.): Mr. Speaker, if the minister is speaking about the 1988 agreement he will know full well that agreement only covered surface vessels such as icebreakers and not submarines.

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It is ironic that Canada as a world leader in acoustic technology does not even monitor subsurface use of our Arctic waters.

Will the minister provide us with a timetable today for the installation of the promised Arctic subsurface surveillance system in the Northwest Passage.

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, this is one measure that was foreseen in the white paper. It is a matter that officials are working on.

It is a very expensive proposition and any move toward implementing the system for underwater detection in the high Arctic has to be made within the financial constraints of the government and the department's budget.

* * *

TRADE

Mr. Walt Lastewka (St. Catharines, Lib.): Mr. Speaker, my question is for the Minister of Finance. I come from a region where small and medium size businesses compete not only directly with one another but also with American businesses across the border. These American businesses have an advantage because of the so-called free trade zones.

Could the minister tell the House what measures he has taken to allow Canadian businesses to compete more effectively in the international market?

Hon. Paul Martin (Minister of Finance and Minister responsible for the Federal Office of Regional Development—Quebec, Lib.): Mr. Speaker, Bill C-102, designed to amend the Customs Act, has exactly that purpose in mind. It will encourage businesses to locate in Canada. It contains improvements that will streamline the duty deferral program and will make programs more user friendly and accessible. It will remove administrative restrictions and will ease cash flow pressures by providing as much up front duty relief as possible.

Regions, municipalities and businesses will be able to co-operate as a result in promoting their communities because a critical component of the bill encourages partnerships to encourage economic development.

I congratulate the member for St. Catharines because he has been a leading proponent of many of the initiatives in the bill.

* * *

[Translation]

CANADIAN ARMED FORCES

Mrs. Monique Guay (Laurentides, BQ): Mr. Speaker, my question is for the Minister of Defence. Last week, we learned that, on two separate occasions, members of the former regi-

ment from Petawawa organized dinners to celebrate the massacre of 14 innocent victims at l'École polytechnique. A 14-round salvo was even fired.

Will the minister confirm that the Canadian Forces private who organized these dinners has since been promoted to Master Corporal?

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, this allegation was raised at the hearings of the Commission on Somalia and we will look into it.

[English]

This allegation was raised at the hearings of the commission on Somalia last week. We are looking into the matter, but I can say on behalf of the government that if indeed this were true it was totally unacceptable, totally abhorrent and something we will not tolerate.

[Translation]

Mrs. Monique Guay (Laurentides, BQ): Mr. Speaker, does the minister not agree that every promotion granted to any CFB Petawawa official, for example that of Colonel Peter Kenward, should be cancelled or suspended for the duration of the inquiry?

[English]

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, what I am prepared to do is when I receive a report on the allegations and if indeed they are verified, I will submit the report to the commission.

It will be made public at that time and may therefore have some relationship with respect to its ultimate deliberations.

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IMMIGRATION

Ms. Val Meredith (Surrey—White Rock—South Langley, Ref.): Mr. Speaker, last year when the minister of immigration introduced a document entitled "A Broader Vision", it acknowledged that defaulted sponsorship obligations cost Canadian taxpayers close to \$700 million in 1993. The minister announced that initiatives would be introduced in five areas to reduce that amount.

Could the minister advise the House whether these initiatives have been successful and has the taxpayers' burden to default sponsorship been reduced?

Hon. Sergio Marchi (Minister of Citizenship and Immigration, Lib.): Mr. Speaker, as the member may know, the Peel project has started in earnest. It is working well. We are finding out information that will no doubt prove useful to an eventual position that the government will take.

We have struck a committee that liaises with all provincial governments. They too are very supportive and collaborative.

• (1450)

It is our intention before the House of Commons rises for Christmas to have a final response on the whole question of family sponsorship.

Ms. Val Meredith (Surrey—White Rock—South Langley, Ref.): Mr. Speaker, in 1989 Mohammed Assaf sponsored his brother and family to settle in Alberta. Since then Alberta taxpayers have shelled out \$40,000 in welfare payments to support the family.

Assaf then attempted to sponsor his second wife to Canada and was refused by immigration officials. He decided to go to the IRB that in turn ruled that Assaf did not have to pay his first obligations before sponsoring his second wife.

How will the minister accomplish the task of reducing sponsorship defaults when the IRB is telling sponsors that it does not make any difference whether or not they repay those defaults?

Hon. Sergio Marchi (Minister of Citizenship and Immigration, Lib.): Mr. Speaker, unlike the Reform Party that uses a negative, cynical case analogy or example, we prefer to deal with issues on a national basis with some degree of thought, due course and reflection. We will not be deterred by listening to comments on the floor of the House of Commons about individual cases.

We can always learn from cases whether they are in my portfolio or anywhere else, but we would be wrong if we looked at one case, generalized and made it applicable to all immigrants or refugees coming to Canada. We will not engage in a small kind of world that simply tries to create perceptions which may not be true. Let us deal with facts. Let us find solutions that work.

I ask my hon. colleague if she would find the time and place to come on board with that kind of attitude rather than negatively parade individual cases before the House and then extrapolate from them irresponsibly.

* * *

CANADIAN NATIONAL RAILWAY

Mr. Bill Blaikie (Winnipeg Transcona, NDP): Mr. Speaker, the legislation which privatizes CN guarantees that Montreal will always be the headquarters of CN. The Transcona shops have just as proud a place in the history of CN as Montreal does, yet many are worried that Transcona is slated for extinction given the 485 layoffs on Friday last and the 266 before that in September.

My question is for the Deputy Prime Minister or for the Minister of Human Resources Development answering in his

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capacity as regional minister. Will the minister now, in the interests of regional fairness and national unity, instruct CN either administratively or legislatively to stop the decimation of the Transcona shops, to keep Transcona as CN's main repair shop and to ensure the Transcona work is not siphoned off to CN's wholly owned subsidiary in Montreal, AMF, or anywhere else for that matter? Will the Liberal government give Winnipeg the kind of guarantees that Montreal has received?

Mr. Joe Fontana (Parliamentary Secretary to Minister of Transport, Lib.): Mr. Speaker, I thank the hon. member for his question but I think he ought to get the facts straight.

The jobs being lost at Transcona in Winnipeg are only of a temporary nature. Therefore to assume that these are permanent layoffs by Canadian National would be inappropriate.

The hon. member would know that CN is on the brink of its commercialization and privatization. It needs to get its house in order so that it can be a competitive and viable railroad, providing service from sea to sea and providing employment to all Canadians across the country.

Mr. Bill Blaikie (Winnipeg Transcona, NDP): Mr. Speaker, will the government give a guarantee that the recall date will be honoured and that the recall date is not just a way of appeasing employees?

Will the government answer my first question? Why guarantees for Montreal and no guarantees for Transcona and Winnipeg that have just as much a place in CN as anyone else?

Mr. Joe Fontana (Parliamentary Secretary to Minister of Transport, Lib.): Mr. Speaker, again I tell the hon. member that the layoff notices are temporary.

I am sure as CN moves toward privatization it will become much more efficient as a national railroad in the country. In fact there will be future job opportunities for everyone in Canada, not only in Quebec but in Winnipeg, B.C. and Atlantic Canada.

* * *

EMPLOYMENT

Mr. Ron Fewchuk (Selkirk—Red River, Lib.): Mr. Speaker, my question is for the Minister of Human Resources Development.

• (1455)

Last Friday new figures were published by Statistics Canada showing continued full time employment growth in the Canadian economy. Given the concern of some Canadians that the government is not doing enough to fulfil its jobs and growth agenda, could the Minister of Human Resources Development explain the latest changes particularly as they affect my province, Manitoba, and young Canadians today?

Oral Questions

Hon. Lloyd Axworthy (Minister of Human Resources Development and Minister of Western Economic Diversification, Lib.): Mr. Speaker, amidst the tumultuous events of last week a very important milestone was not properly recognized.

The government has now served two years since it was officially elected by the people of Canada. The most appropriate way to celebrate that event is to point out, with the employment statistics released on Friday, that since the election over 500,000 full time permanent jobs have been created in Canada.

In particular it is important to point out that last month alone 46,000 jobs were created for young people, which is the highest increase in one month for young people since June 1986.

I am happy to report that in the province of Manitoba, which I share with the hon. member—

Mr. Cummins: Time.

Mr. Morrison: Order.

Mr. Axworthy (Winnipeg South Centre): They just do not like to listen to good news; that is their problem. They are just the Bad News Bears.

I will simply conclude by saying that the figures show there is still a lot of work to do. There are still far too many unemployed people in Canada. We have now shown that the foundation has been laid and the next two years will be even better.

* * *

[Translation]

AMATEUR SPORT

Mr. Benoît Sauvageau (Terrebonne, BQ): Mr. Speaker, my question is for the Minister of Canadian Heritage.

In about 40 per cent of international competitive sports, national coaching certification training programs are given in English only. It is obvious that, in amateur sports, there is discrimination against francophones even in elite coaching training.

How does the minister explain that a mere 14 per cent of all Canadian coaches trained for international competition are from Quebec and that coaching training courses for 40 per cent of competitive sports, including biathlon, hot dog skiing and synchronized swimming, are offered exclusively in English?

Hon. Michel Dupuy (Minister of Canadian Heritage, Lib.): Mr. Speaker, responsibility for the training of coaches as well as athletes rests with specialized agencies and not with the heritage department. However, if my colleague cares to provide me with details, I will, of course, be delighted to take a look at them.

[English]

CANADA HEALTH AND SOCIAL TRANSFER

Mr. Ian McClelland (Edmonton Southwest, Ref.): Mr. Speaker, my question is for the Minister of Human Resources Development.

The minister would know that as an unintended result of the block transfers for the Canada health and social transfer many of the Canadians who are most vulnerable or who feel most vulnerable are Canadians with disabilities.

To date Canadians with disabilities have not yet been assured that there will be consultation with the provinces to ensure that persons with disabilities will not be financially affected by the Canada Health and Social Transfer Act. Would the minister make those assurances today?

Hon. Lloyd Axworthy (Minister of Human Resources Development and Minister of Western Economic Diversification, Lib.): Mr. Speaker, I thank the hon. member for his question.

I know the hon. member would be interested that on Thursday I will be appearing before of the Standing Committee on Human Rights and the Status of Disabled Persons. At that time I will be setting out a series of principles and directions for a disability strategy which the federal government would like to retain.

In particular, the inauguration of the Canada health and social transfer gives us a real opportunity to sit down with the provinces to work out a mutually satisfactory strategy to deal with the very important issue of disability. It gives us the opportunity to collectively work together, to share resources and to come up with a common approach we think will be beneficial to over two million disabled Canadians who are without work.

I hope the hon. member will be in attendance at the committee because I would welcome his remarks.

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AIR SAFETY

Mr. Elijah Harper (Churchill, Lib.): Mr. Speaker, my question is for the Minister of Transport.

Recently the Transport Safety Board released its report on the tragic crash of a Keewatin Air flight at Thompson airport in June 1994. Two people died in this crash and one was seriously injured. In light of this tragedy, can the Minister of Transport reassure northern air travellers by telling us what action he will take in response to the board's recommendations?

• (1500)

Mr. Joe Fontana (Parliamentary Secretary to Minister of Transport, Lib.): Mr. Speaker, I want to thank the hon. member for his great interest in this matter concerning northern air travellers.

As he has indicated, the Transportation Safety Board has tabled its report. Transport Canada officials are reviewing the recommendations. Within 90 days, in the middle of January, the Transport Canada minister will make those recommendations known.

I can assure the member that Transport Canada and the minister will do everything possible to ensure safety in our airlines and ensure that northern air travellers have nothing to fear.

The Speaker: My colleagues, this would bring to a close the question period.

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BUSINESS OF THE HOUSE

Mr. Don Boudria (Glengarry—Prescott—Russell, Lib.): Mr. Speaker, I wish to ask the House for consent. Tonight there is a vote scheduled for 6 p.m. and another one for 6.30 p.m., which now will likely be held at 6.45 p.m. In order to permit the House to save on overtime costs and to permit members to attend vigils tonight, would the House consent to taking both votes at 6 p.m.?

The Acting Speaker (Mr. Kilger): Is there unanimous consent?

Some hon. members: Agreed.

* * *

THE LATE YITZHAK RABIN

Hon. Sheila Copps (Deputy Prime Minister and Minister of the Environment, Lib.): Mr. Speaker, humanity has lost a peacemaker of extraordinary courage. Israel has lost a leader of extraordinary devotion. Mrs. Rabin and her family have lost a husband, father, and grandfather.

On behalf of the Prime Minister and the Government of Canada, I wish to pay tribute to Yitzhak Rabin.

[*Translation*]

A man of great bravery was struck down by an act of cowardice. Through their prayers all Canadians are with Mr. Rabin's family and the people of Israel. Let us hope that these prayers will bring peace to the souls of all of us who are mourning today.

Prime Minister Rabin dedicated and finally gave his life to the service of his country and his people. As a soldier and war hero, Yitzhak Rabin fought for the survival of Israel.

Tributes

[*English*]

As Prime Minister, Yitzhak Rabin pursued a future of peace and prosperity for Israelis and for all people in the Middle East. The pursuit of peace became Yitzhak Rabin's mission.

When Prime Minister Rabin was assassinated on Saturday, he had just spoken with a great sense of joy and accomplishment. What he accomplished is truly remarkable. Will any of us ever forget when Yitzhak Rabin and Yasser Arafat shook hands—a simple act of reconciliation, a profound act of destiny.

As Prime Minister Rabin said, "Our land of milk and honey has flowed with blood and tears for too long. Enough, enough." With incredible dignity and enthusiasm, Yitzhak Rabin has allowed the world to dream of the day when Israel will be at peace with all of its neighbours.

The history of Israel stretches back to the beginnings of humanity. In that struggle, we have witnessed both the barbaric acts in the history of humanity and some of the most noble aspirations of which we are capable as human beings. Prime Minister Rabin died pushing all of us to speak and to act for the better side of human nature.

[*Translation*]

The death of Prime Minister Rabin should be an inspiration to us to let our thoughts, words and actions reflect the best in our human nature. As we emphatically reject the act of cowardice that took his life away, we also have an obligation to embrace the cause to which Yitzhak Rabin was dedicated.

[*English*]

As we act today, let us remember the history of time as Yitzhak Rabin understood that history. Let us reflect Prime Minister Rabin's understanding that it is up to us as individual human beings to shape the forces of destiny.

As we grieve for the man, let us pursue his dream. As we pay tribute to Prime Minister Rabin with our words, let us pay tribute to him with our actions.

• (1505)

Canadians continue to extend the hand of friendship to the people of Israel. We shed our tears of condolence for Mrs. Rabin and her family and we pay honour to Yitzhak Rabin for the nobility of his spirit and his actions.

Shalom, Yitzhak Rabin. Shalom, Israel.

[*Translation*]

Mr. Gilles Duceppe (Laurier—Sainte-Marie, BQ): Mr. Speaker, we were all astonished and deeply saddened by the news of the assassination on Saturday of the Prime Minister of Israel, Mr. Yitzhak Rabin. Today, we want to pay tribute to a man who dedicated his life to the defence of his people and his ideals.

Tributes

A joint recipient of the Nobel Peace prize, Yitzhak Rabin believed in the reconciliation of the Israeli and Palestinian people and struggled to find ways to bring them closer together. The peace accord signed by both nations shows that his efforts have borne fruit and brought hope to this part of the world. We are convinced that he did not sacrifice his life in vain and that the road to reconciliation now taken by his people and the people of Palestine will lead to a better future for all who believe in peace in the Middle East.

We earnestly hope that his violent death will not halt the diplomatic negotiations he initiated with Yasser Arafat to establish a plan for peace in the region. We firmly believe that the process started by these two leaders will prevail over radical movements that are oblivious to democratic values and condone violence.

On behalf of my colleagues in the Bloc Québécois, I wish to express our condolences to the family and relatives of Mr. Rabin, the Jewish people, the international Jewish community including that in Quebec, and to show that we share the grief of losing a unique human being. Shalom Yitzhak Rabin!

[*English*]

Miss Deborah Grey (Beaver River, Ref.): Mr. Speaker, on behalf of my leader and our party I rise this afternoon to pay tribute to the late Prime Minister of Israel, Yitzhak Rabin.

Rabin earned his reputation with Israelis as a soldier and then as a politician. His first hand knowledge of the military and his deep commitment to preserving Israel's security, first through arms and later through peace, made him undeniably one of the world's greatest statesmen.

It is well known that Mr. Rabin earned his credibility on the battlefield. However, Rabin's greatest honour and truest victory came through his pursuit of a lasting peace with his former enemies.

He sought peace not through fear but through courage, seeing it as the only hope for the future. He understood that true peace is not the absence of all differences, but genuine goodwill and the putting aside of those differences for the common good. Of the necessity for peace, Rabin said: "We should not let the land flowing with milk and honey become the land flowing with blood and tears".

Yitzhak Rabin truly believed that "the majority of people want peace and are ready to take a chance for peace". He took that chance and paid recently with his life.

Just six weeks ago, King Hussein of Jordan, President Mubarak of Egypt, Chairman Arafat, and Prime Minister Rabin signed a peace agreement on the White House lawn. In words that seem almost prophetic today, Prime Minister Rabin said: "Only poets have dreamt of this moment, and to our great pain soldier and civilian went to their deaths to make this moment possible".

He was soldier and civilian both, as well as one of Israel's greatest leaders. We hope and pray that his death, although tragic and untimely, will leave a legacy for lasting Middle East peace, for which he sought so valiantly.

Our sympathy and prayers are with Mrs. Rabin and her family. Shalom, Prime Minister Rabin.

Mr. Svend J. Robinson (Burnaby—Kingsway, NDP): Mr. Speaker, Yitzhak Rabin was a soldier in war who became a soldier in peace. He fought as hard to achieve peace as he did in war. His greatest victory will unfortunately come only after his death.

The proof of the strength and durability of the move toward peace that Prime Minister Rabin created is that there can be no doubt this peace process will continue. It will continue until we reach the comprehensive peace that Mr. Rabin so eloquently lauded in the speech he gave before hundreds of thousands of Israelis demonstrating for peace last weekend, just shortly before his tragic death. There remains much to be done, but Mr. Rabin has made a start possible.

• (1510)

Together with two other New Democrat members of Parliament, Howard McCurdy and Ian Deans, I had the privilege and opportunity to meet with our Labour Party colleague, Yitzhak Rabin, in the mid-1980s. We had a vigorous exchange of views and certainly some profound disagreements, but there was a sense of openness and mutual respect.

Since his election as Prime Minister in 1992, I have been enormously impressed by his courage and determination to bring a just and lasting peace to the Middle East. As others have noted, we were all profoundly moved to see Mr. Rabin and Yasser Arafat shake hands on the White House lawn. That handshake symbolized the partnership in peace that has been forged between Israel and the Palestinians.

The member for Beaver River and the Deputy Prime Minister both quoted some of the words spoken that historic day. I would like to quote some others. He said in prophetic words: "We the soldiers who have returned from battles stained with blood, we who have seen our relatives and friends killed before our eyes, we who have come from a land where parents bury their children, we say today in a loud and clear voice: Enough of blood and tears. Enough."

[*Translation*]

On the evening of his death, Mr. Rabin made a passionate plea against violence. "Violence, he said, undermines the foundations of democracy in Israel. It cannot be condoned and must be condemned." During the weeks and months that preceded the tragedy on Saturday night, statements made by certain politicians and citizens of Israel in the course of the debate on the peace accords were not only filled with anger but showed undercurrents of violence. Yitzhak Rabin has proven that in a

civilized society, political debate, however deep its roots, must be based on respect for every individual.

[*English*]

In closing, I would like to extend condolences on behalf of myself and my colleagues in the New Democratic Party of Canada to Mr. Rabin's family, the people of Israel, and the Jewish community in Canada and around the world. We share your profound sense of anguish and loss. Remember that the Kaddish, the Jewish prayer for the dead, is an affirmation of the power of faith and hope in the midst of despair.

Hon. Herb Gray (Leader of the Government in the House of Commons and Solicitor General of Canada, Lib.): Mr. Speaker, like millions of people in Israel and around the world, I was shocked and saddened to learn of the tragic death of Yitzhak Rabin Saturday afternoon.

I was shocked because his death came just after he had spoken and sung for peace at a rally of 100,000 Israelis. I was shocked because his murder was completely inconsistent with the way of life in Israel, where this kind of violence has not been a means of dealing with political differences. It has not been a part of the life of that democratic country. I was shocked and also saddened that Prime Minister Rabin's own life, so filled with achievement and service, had been cruelly ended before his main work could be completed: the work of making peace between Israel and all its neighbours.

Yitzhak Rabin proved he could be successful as a leader in making war. He was proving he could be equally successful as a leader in achieving peace. He had made war to protect his country, but he wanted and preferred peace for Israel and all the peoples of the Middle East.

It has been said that Yitzhak Rabin was a martyr for peace. Therefore, the best way to honour his life and his memory is to make sure that his work for peace continues and is successfully concluded.

Just after this government took office, two years ago last week, its first official visitors were Yitzhak Rabin and his wife. I, together with my wife, had the honour of officially welcoming them to our country. At that time, in talking with him all too briefly, I was struck and impressed by his mixture of firmness, resolve, personal modesty, and his commitment to achieving his goal of peace for Israel with its neighbours.

• (1515)

There is a word in Hebrew that is used as a greeting. It is also used to say goodbye and at the same time it signifies peace, that

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most sublime of human conditions. Unfortunately we cannot extend a greeting to Yitzhak Rabin on this earth again, but we can say goodbye by using that word which had come to mean more to him than almost anything else. We can say shalom. Shalom Yitzhak.

The Kaddish prayer said by Jewish mourners concludes with these words: "He who maketh peace in his high places, may he make peace for us and for all Israel".

[*Translation*]

I want to express my sincere condolences to Mrs. Rabin and the family of Yitzhak Rabin.

[*English*]

To Mrs. Rabin, to her family, to the people of Israel and to all people of goodwill everywhere, I conclude with the traditional Hebrew words of sympathy and condolence:

Hamakom y'nahaim etkhem b'tokh sh'ar availai tziyon veeyerushalayim.

May the Lord comfort you with all the mourners of Zion and Jerusalem.

Mr. Bob Mills (Red Deer, Ref.): Mr. Speaker, I rise today to send our deepest condolences to the family of Yitzhak Rabin and the people of Israel.

Although Mr. Rabin has fallen, he leaves behind a tremendous legacy of peace and a lifetime of work for the people of Israel.

As a soldier, Mr. Rabin learned to meet adversity with courage and determination and as a statesman this courage continued as he dared to make peace with the Palestinians and with Jordan, even in the face of bitter criticism from the opponents of peace.

In a world filled with conflict and strife, Mr. Rabin did not despair or allow anger to move him. He chose instead to dedicate his life to laying the groundwork for a peace that will be enjoyed by his children and grandchildren and by all the children of the Middle East.

On this sad day, though the torch must be passed, Mr. Rabin is gone but the need for hard work in the name of peace endures. As Mr. Rabin said, we will continue the peace process. There is no alternative to that regardless of what the enemies of peace might do.

We must remember these words. In so doing I join with all Canadians in hoping that others will step forward to finish the peaceful battle so well fought by Mr. Yitzhak Rabin, an example for us all.

*Routine Proceedings***ROUTINE PROCEEDINGS***[English]***GOVERNMENT RESPONSE TO PETITIONS**

Mr. Peter Milliken (Parliamentary Secretary to Leader of the Government in the House of Commons, Lib.): Mr. Speaker, pursuant to Standing Order 36(8), I have the honour to table, in both official languages, the government's response to three petitions.

* * *

*[Translation]***COMMITTEES OF THE HOUSE**

ENVIRONMENT AND SUSTAINABLE DEVELOPMENT

Hon. Charles Caccia (Davenport, Lib.): Mr. Speaker, the Standing Committee on the Environment and Sustainable Environment has completed its consideration of Bill C-83 and is now ready to table its report. Bill C-83, an act to amend the Auditor General Act, establishes the position of Commissioner of the Environment and Sustainable Development. I have the honour to table this report.

* * *

*[English]***PETITIONS**

ASSISTED SUICIDE

Mr. Ray Speaker (Lethbridge, Ref.): Mr. Speaker, I have three petitions to present.

The petitioners on the first, out of respect and concern for the sanctity of human life, pray and request that Parliament continue to prohibit euthanasia and assisted suicide. The petition bears 135 signatures.

RIGHTS OF THE UNBORN

Mr. Ray Speaker (Lethbridge, Ref.): Mr. Speaker, the second petition, which bears 56 signatures, prays and requests that Parliament act immediately to extend protection to the unborn child by amending the Criminal Code to extend the same protection enjoyed by born human beings to unborn human beings.

• (1520)

HUMAN RIGHTS

Mr. Ray Speaker (Lethbridge, Ref.): Mr. Speaker, the third petition, which bears 208 signatures, requests that Parliament not amend the human rights code, the Canadian Human Rights Act or the charter of rights and freedoms in any way which

would tend to indicate societal approval of same sex relationships or homosexuality.

YOUNG OFFENDERS ACT

Ms. Val Meredith (Surrey—White Rock—South Langley, Ref.): Mr. Speaker, I am pleased to present 209 signatures of my constituents asking that Parliament urge the government to review the Young Offenders Act in an open and accountable process which addresses the following principles: deterrence of the offender, the accountability of the offender, and the rights of the victim.

INCOME TAX

Mr. Paul Szabo (Mississauga South, Lib.): Mr. Speaker, pursuant to Standing Order 36, I present a petition which has been circulating all across Canada. This petition has been signed by a number of Canadians from Ancaster, Ontario.

The petitioners draw to the attention of the House that managing the family home and caring for preschool children is an honourable profession which has not been recognized for its value to our society. They also state the Income Tax Act discriminates against families that make the choice to provide care in the home to preschool children, the disabled, the chronically ill or the aged.

The petitioners therefore pray and call on Parliament to pursue initiatives to eliminate tax discrimination against families that decide to provide care in the home for preschool children, the disabled, the chronically ill or the aged.

* * *

*[Translation]***QUESTIONS ON THE ORDER PAPER**

Mr. Peter Milliken (Parliamentary Secretary to Leader of the Government in the House of Commons, Lib.): Mr. Speaker, Question No. 195 will be answered today.

*[Text]***Question No. 195—Mr. Riis:**

With respect to the government policy regarding the protection of workers from environmental tobacco smoke (ETS), (a) are there any estimates of the number of workers under the federal jurisdiction who are (i) exposed to ETS resulting from smoking where smoking is permitted, (ii) exposed to ETS resulting from smoking where smoking is not permitted, and if so, what are these estimates, (b) are workers who are exposed to ETS justified in quitting their jobs within the meaning of the Unemployment Insurance Act, and (c) since 1989, (i) have any inspections been made to ensure compliance with the Non-Smokers' Health Act, and if so, how many, (ii) have any tickets been issued pursuant to the Non-Smokers' Health Act and if so, how many?

Hon. Lucienne Robillard (Minister of Labour): The Non-Smokers Health Act affects almost 650,000 workers in about 26,700 workplaces under federal jurisdiction and approximately 240,000 employees of the Public Service of Canada.

(a) (i) There is no estimate of the number or percentage of federally regulated workers who are exposed to environmental tobacco smoke resulting from smoking where smoking is permitted and (a) (ii) where smoking is not permitted.

(b) Under the UI act, “just cause” for voluntarily leaving an employment exists where, having regard to all the circumstances, the claimant had no reasonable alternative to leaving employment.

Working conditions that constitute a danger to health or safety is one of the 13 specific circumstances identified by the legislation that may constitute just cause for voluntarily leaving employment.

Before leaving the employment, a reasonable alternative for the person working in such a place would be to report the situation to the employer and/or the union so that the situation can be remedied within a reasonable period of time. If the situation still does not improve and the working conditions likely affect his or her health, a person could reasonably prove his or her point by means of a medical certificate or other similar document.

(c) (i) The national statistics at our disposal reveal that from April 1, 1990 to March 31, 1995, there were 144 inspections and 467 complaint investigations conducted under the Non-smokers Health Act.

(c) (ii) Until the Contraventions Act (Bill C-46) is proclaimed, issuing warnings or initiating prosecutions are the only alternatives to “ticketing” an individual for non-compliance. To this end, labour branch officials ask the employer or employee to sign an assurance of voluntary compliance (AVCs), by which they make the commitment to cease the contravention within a specified period of time. Failure to do so can lead to prosecution. From April 1, 1990 to March 31, 1995, a total of 156 AVCs have been received by safety officers and no prosecutions have been initiated.

[Translation]

Mr. Milliken: Mr. Speaker, I ask that the remaining questions be allowed to stand.

The Acting Speaker (Mr. Kilger): Is it agreed?

Some hon. members: Agreed.

GOVERNMENT ORDERS

[English]

DEPARTMENT OF HEALTH ACT

The House resumed consideration of the motion that Bill C-95, an act to establish the Department of Health and to amend and repeal certain acts, be read the second time and referred to a committee; and of the amendment.

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Mrs. Dianne Brushett (Cumberland—Colchester, Lib.): Mr. Speaker, as we consider Bill C-95, hon. members will want to reflect on the business of the Department of Health as it embarks on its new life, its new beginnings.

The department is no longer responsible for social assistance. Does this reduce its importance in the national structure? Is it fading away? Is it weakened? Far from it. As I read the results, the Department of Health is now poised and primed to take on perhaps the greatest challenge it has ever known. It has gathered its strength in order to guard the health of Canadians through an era of stress, strain and dislocation that is testing us all.

It is finding alternatives to the financial resources once thought inexhaustible but now known to be limited alternatives described by words such as collaboration, knowledge and intelligence, waste reduction and value for money. These are the watch words of the new department, focused today more than ever on health because it is focused on health alone.

The basic facts of Bill C-95 are as follows. The department is renamed. Some inspectors are empowered. The social well-being dimension of health is acknowledged and there are to be charges to businesses for services that have business value.

A new name means a new focus. This is what the bill is about, what is in the bill and who can object. It is eminently reasonable. It has been well set out by the minister and by other hon. members and the significance of the new name, the Department of Health, is personified in that single word because of the very importance of health to Canadians.

I would go one step further. The Department of Health is a symbol of a new beginning. This nominal act speaks volumes about a determination to focus intensely on the health of Canadians, our most precious resource.

• (1525)

The renamed department will continue all the essential work that has helped Canadians reach the top of the world rankings in health. However, it will do far more than maintain hallowed traditions. It intends to be a dynamic player in a world filled with new challenges and opportunities for health care.

The department is in business to protect the health of Canadians but it is doing that business in a new way, streamlined by a new vision of the way things must work in the future.

What indicators are there of this new approach? None is more practical or more telling than the consolidation in the department of 11 separate activities distinguished as such even up to the recent main estimates into just four business lines. This move reflects what has been learned from the program review process and participation in the science and technology policy review. More than this, it reflects a willingness to consult, to listen, to learn and to change.

Government Orders

The first of the new business lines will position the department to support and renew the health system in Canada. It will try to achieve a better balance among health care, disease prevention and health protection and promotion.

Quality health care services contribute to the health of the population, but good health is not simply the result of health care. Rather, it is more true to say health care is the result of ill health. Good health arises from a host of social, economic and environmental lifestyles and genetic factors.

Hon. members are aware of the initiatives undertaken by the Prime Minister's national forum on health to determine the necessary and sufficient conditions for health and identify the root cause of illness. The recommendations of the national forum will guide the department in its efforts to make the system healthier for all Canadians.

It will work with the provinces and territories to contain costs, including the costs of prescription drugs, in order to ease spending pressure on governments and the private health care system. It will lead consultation aimed at interpreting the Canada Health Act but it will not cease to enforce the act so that universal access to appropriate health care is maintained throughout Canada.

Canadians look to the federal government, to hon. members here in the House, to create bridges among the provinces. They want us to ensure national standards for health care. They insist we intervene to remedy inequalities and protect infrastructure. For all of this the Department of Health is our means, our instrument.

Another line of business the department has recently adapted will focus on the health problems of disadvantaged groups. This involves marshalling a number of existing programs toward this single objective. It involves new programs to be delivered in partnership with the provinces. As well, it involves improving the flexibility to respond when a new health need arises.

The department will intervene to help protect those at most risk when it is clear that the federal government is placed to provide the best care at the lowest cost. Affordable health care of the highest quality is the aim, the objective, while eliminating overlap and duplication with the provinces and other partners.

I will not dwell on the delivery of health services to First Nations, Inuit and the people of Yukon. I pass over it not because it is less important. Indeed it accounts for the largest share of the department's entire budget. I pass over it because it has been thoroughly explored in the representation of the minister and other hon. members speaking on the bill.

This is the new business line that flows least change from the department's previous portfolio of responsibilities. Helping

native people and northerners attain a level of health comparable to that of other Canadians who live in similar conditions has long been a goal of this department, a goal of this government. The goal has not yet been achieved, but great strides are being made in the right direction to serve the people of the north.

• (1530)

The fourth reconstituted business line of the Department of Health seeks to reduce the health risks to Canadians arising from food and drugs, from consumer products and medical devices, from disease and disaster. This is the regulatory and compliance thrust of the department. This is the heart of health protection, where the department stands on guard to preserve the health of Canadians. It is here that Bill C-95 adds some muscle and meat to the refocused mission of the Department of Health.

The transfer of responsibility for the safety of consumer products and workplace equipment is formalized in the bill. Officials of the department get powers in the bill to inspect possible disease-carrying agents entering this country by way of foreign products. The costs of services provided to businesses may be recovered under a provision of the bill. If risks to Canadians are going to be managed effectively in an era of restraint, new ways to meet those costs must be found. This is one such way.

The late Lewis Thomas was a physician who taught at Yale. He was a great essayist and was called the poet laureate of 20th century medical science. Dr. Thomas wrote that the term health industry provides the illusion that it is in a general way all one thing and that it turns out on demand a single unambiguous product which is health.

Thus, health care has become the new name for medicine. Health care delivery is what doctors and nurses do along with hospitals and other professionals working with them. They are now known collectively as the health providers or the health team. Patients have become health consumers. Once we start on this line, there is no stopping.

We tend to forget sometimes that health is not simply a product distributed in neat little packages from a constantly replenished inventory on a shelf somewhere. We also forget sometimes in our rhapsodies over a multibillion dollar health system that it ultimately comes down to one patient, often hurt and scared, and one medical professional who may or may not be sure either about the cause of the complaint or what to do about it. It is a face to face, one to one confrontation as to what to do. This reality is part of the new understanding of the department which will be renamed with the passage of the bill.

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I take the minister at her word, given to doctors at the CMA leadership conference in March, that decisions will be based on solid Canadian values such as fairness, compassion and respect for the fundamental dignity of all people, of all Canadians.

In the October edition of the *Fraser Forum*, which is published by the Fraser Institute, there was an article entitled: "Two-tier health care system". I quote from the article:

I would say that of all the government health plans in Europe the German system is the king among the blind. However, it's still one-eyed, it is still inferior compared to a purely private system, I believe. Now, the German system does not guarantee universal coverage—

The Canadian system is the best system, the single tier system. Only last week we heard that great American, Ralph Nader, telling us here in Canada to be vigilant, to be watchful and not to lose that single tier system where all Canadians have access to excellent health care.

I am pleased to speak on Bill C-95 today. I am pleased to enunciate for the second time the new name, Department of Health, and the significance we in this government place on the health of our people and the well-being of all Canadians. It is because of this naming, the single word health, that we give no extended situations to other things but singly the health of Canadians and the prominence it will play within our government.

• (1535)

I urge hon. members in this House to support the government with this very important bill. It is the fibre that helps this country maintain the strength of its unity.

[Translation]

Mr. Osvaldo Nunez (Bourassa, BQ): Mr. Speaker, I rise today to speak on Bill C-95, an act to establish the Department of Health and to amend and repeal certain acts.

The main change brought about by Bill C-95 is the change in designation from Department of National Health and Welfare to Department of Health. I welcome this opportunity today, because this bill speaks volumes about this government's intention to further centralize and strengthen its powers despite its pre-referendum rhetoric about decentralizing.

On the face of it, this bill looks completely innocuous, technical, minor and inconsequential. Yet, some provisions of this bill could have a major impact on the exclusive provincial jurisdiction over health care.

I will go over them rapidly because my colleagues from the Bloc Quebecois have already reviewed significant health issues since the beginning of the Canadian confederation. Just the same, it is imperative, in my opinion, to bear in mind what,

obviously, this government tends to forget, and that is that, under the constitution, health is an exclusive provincial jurisdiction.

Everyone agree on this. How can certain provisions of this bill be justified in that context, I wonder? I am referring in particular to clause 4, which states that:

4.(1) The powers, duties and functions of the Minister extend to and include all matters—relating to the promotion and preservation of the health of people—

(2)—the Minister's powers, duties and functions—include the following matters:

(a) the promotion and preservation of the physical, mental and social well-being of the people of Canada;

(b) the protection of the people of Canada against risks to health and the spreading of diseases;

(c) investigation and research into public health—

(d) the establishment and control of safety standards—for consumer products—

(e) the protection of public health on railways, ships, aircraft—

(f) the promotion and preservation of the health of the public servants and other employees of the Government of Canada;

(h)—the collection, analysis, interpretation, publication and distribution of information relating to public health; and

(i) cooperation with provincial authorities with a view to the coordination of efforts made or proposed for preserving and improving public health.

These are provisions which are far-reaching and whose legal implications are difficult to foresee. This is especially worrisome since part of these are new provisions which were not found in the former act, that is to say the act respecting the Department of National Health and Welfare.

• (1540)

This bill reveals the federal government's will to centralize, as do other facts. I refer you in particular to the red book published by the Liberal Party of Canada, which called for widespread consultations on health care in the form of a public forum. I quote from page 80 of the red book: "The role of the federal government should include the mobilization of effort to bring together Canada's wealth of talent and knowledge in the health care field. This is a societal issue in which every Canadian has an interest. The federal government must provide the means to ensure that Canadians are involved and informed, and can understand the issues and the options". These sentences speak for themselves and clearly show the Liberal Party's intentions even before they came to power.

In June of 1994, the Minister of Health announced the creation of this forum. Though its own Minister of Health, Quebec vigorously denounced this initiative and refused to take part in this exercise. And Quebec was not the only province that registered a protest. To this day, no province is a participant in this forum.

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A few days before the referendum, some federal spokespersons changed their tune in order to win. They were focusing on change, decentralization, and powers to be negotiated with the provinces. What is happening now? Exactly a week after a significant vote that clearly revealed Quebecers' desire for change, we in this House are debating a bill that brings us back to the sad reality. No change can be expected from the current government.

The government has no intention of relinquishing any of its powers, despite what it said before the referendum. I hope that the minister will fully comply with clause 12 of the bill, which reads as follows:

12. Nothing in this act or the regulations authorizes the minister or any officer or employee of the department to exercise any jurisdiction or control over any health authority operating under the laws of any province.

Mr. Speaker, allow me to give a historical overview of the legislation and of the federal government's interference in the area of health care. First, let us not forget that section 92.16 of the Constitution Act gives the provinces overall jurisdiction over health issues on their territory, by providing the following, and I quote: "—generally all matters of a merely local or private nature in the province".

Moreover, subsections 7, 13 and 16 of section 92 recognize the provinces' jurisdiction over hospitals, the medical profession and practice, as well as health care, on their territory.

Health is clearly a provincial, not a federal responsibility. However, the federal government has always managed to interfere in that sector, either through legislative measures such as the Food and Drug Act, or indirectly through its spending power.

Such interference has often generated tension and conflicts between the central and provincial governments. Quebec has certainly been the one denouncing most often and most directly Ottawa's interference in its field of jurisdiction. In 1919, the federal government established the health department and gave it the authority to provide grants.

• (1545)

In 1945, during a federal-provincial conference, the federal government proposed the establishment of a national health care program for which it would assume total responsibility. It should be pointed out that, in those days, after the war, the federal government exercised almost total control over the primary fields of taxation.

In 1948, a national health grant program was set up. In 1957, the federal Hospital Insurance and Diagnostic Services Act was passed, followed in 1966 by the Medical Care Act. The Canada Health Act was then passed in 1984, after a long debate and a lot of criticism. The central government had decided to legislate to

ensure that health care and services that were medically necessary would remain accessible, available to all and free.

That federal act had the effect of imposing on the provinces the obligation to comply with these principles, in spite of budget cuts that the central government would make in transfer payments to the provinces for the health sector. The federal government also gave itself the power to impose monetary penalties on non-complying provinces. That act establishes national standards, namely, as I said, the universality of services, accessibility, transferability from province to province, public management and comprehensiveness. If these standards are not met, Ottawa can withhold its transfer payments for health care.

Based on the 1995-96 budget, Health Canada will spend some \$1.5 billion to operate the program and some \$7.4 billion in transfer payments. This department funds, among other things, the integration of people with disabilities, the fight against domestic violence, the new horizons program, the Seniors Secretariat, the fight against smoking, the national anti drug campaign, the national AIDS strategy, programs on pregnancy and child development, the Children's Bureau and the national health forum.

I have always supported a health insurance scheme that is universal, free, provincially administered, funded by our taxes and available to all. I do not support a system with two tiers: one for the rich and the other for the poor. I am, for example, concerned about what is happening in the United States, which does not have a public health scheme, preventing millions of people from having access to proper health care. Health, in my opinion, is people's most precious possession. This is why we must protect this system, and make preventing disease and promoting health our priority.

Naturally, with Canada's and Quebec's aging population, health care costs more and more. But services must not be rationed, nor cuts made unjustifiably. Unfortunately, Canada's entire health care system is in an acute state of crisis. Since the program's inception in 1977, the rate of growth of its funding has not kept up. This has meant a shortfall for the provinces. For example, in 1986, the federal government cut the rate of growth of transfers by 2 per cent. In 1989, the indexing factor was reduced by 1 per cent. In 1990, Bill C-69 froze transfers at the 1989-90 level for a two-year period. In 1991, the federal government extended the freeze another three years. All this time, the Liberals were vigorously criticizing these cuts.

• (1550)

Now that they are in power, they have totally changed their position and continue to nibble away at the Canadian health system. Scandalous.

It must be pointed out that, between 1977 and 1994, Ottawa's contribution to the health system dropped from 45.9 per cent to 33.7 per cent, and Quebec and the provinces have had to absorb this 10.6 per cent shortfall, with great difficulty.

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The forecasts for 1997–98 indicate that the federal share of funding will be 28.5 per cent. Total cuts for Quebec alone are \$8 billion dollars. To this must be added the \$308 million reduction for 1995–96 and the \$587 for 1997–98 in the Canada social transfer.

Is this what the flexible federalism of the Liberal government means? The only thing it is decentralizing is the deficit.

My fear is that these cuts will lead to the end of the health system as we know it. I am against social program cuts, as I have stated in this House on numerous occasions, particularly cuts in health programs through the drastic reductions in transfers to the provinces.

I support the campaign by the Canadian Labour Congress, the CLC, to save the Canadian health system. This coming December 5, the leaders of that organization will be here to meet some of the ministers and members as part of their campaign. The same battle is being waged in Quebec by the FTQ.

As a sovereignist, I voted Yes on October 30 because of my conviction that we in Quebec can build a more just society, a more egalitarian, more humane society. I am concerned about the Liberal Government's lean to the right, its blind cuts in unemployment insurance, social assistance, old age pensions, postsecondary education and so on. I am concerned about the antisocial orientations, with their lack of concern for what becomes of the least advantaged members of society, developed by the governments of Ralph Klein in Alberta and Mike Harris in Ontario, both Conservative governments.

In addition, I am greatly concerned about the right-wing, sometimes ultraright philosophy of the Reform, particularly when it comes to immigration, firearms control, cuts and the battle against the deficit.

The British Columbia NDP government's decision to refuse social assistance to anyone who has not been in the province for three months concerns me.

So, nearly all of English Canada is aligning along the most conservative of lines. In my opinion, the federal government ought to show some compassion, understanding and generosity towards our poor and needy fellow citizens. Canada has the means to protect the unemployed, the welfare recipients, the sick and so on.

My wish in closing is for the federal government to do everything necessary to preserve the health system in Canada.

[English]

Mr. Jesse Flis (Parliamentary Secretary to Minister of Foreign Affairs, Lib.): Mr. Speaker, I listened very carefully to the words of the member for Bourassa. I wonder if he could clarify a few things.

He again reminds us that he is a sovereignist. I do not know what that has to do with this bill. I would remind him to reflect on the words the former Premier of Quebec and his own leader used about the kinds of people they want to live in that part of Canada. So when he says he is a sovereignist, I assume he means that he is a Canadian sovereignist.

• (1555)

I got this feeling from statements made in the foreign affairs committee and in the House that to that party everything seems to be a provincial jurisdiction. There seems to be nothing left for the federal government and provinces to co-operate on. Here is a bill that calls for co-operation to maintain health standards across Canada and keep costs down, and the hon. member cannot even support that.

He quoted from clause 2. I refer him to paragraph (i), where the minister's powers, duties, and functions relating to health include "co-operation with provincial authorities with a view to the co-ordination of efforts made or proposed for preserving and improving public health". Is the hon. member honestly against this kind of a bill?

He also went on to say that he is against the two-tier system. Great, I agree with him. So am I, and so is everyone on this side of the House, the government side. How does he expect to prevent the two-tier system if he allows health care to be the total responsibility of the province?

My wife happens to live in Ontario and her brothers live in Quebec. Their mother used to switch from Quebec to Ontario. She would live at her son's at one time and at her daughter's another time. If each province is responsible for its own health system, their mother could not have done that. Under the present system she was able to move from province to province and have her prescriptions, doctor bills, and everything covered. Thank God, she lived to 89. She had gone through Siberia and had the kind of life that no one would want to hear about in this House. Yet she lived in this country happily until she was 89 because of the health system in this country and because of the standards that were kept from province to province.

I would like the hon. member to clarify what he means. He is against the two-tier system, yet he wants no federal involvement at all. How does he expect to maintain Canadian standards if he wants health to be the sole jurisdiction of the provinces?

*Government Orders**[Translation]*

Mr. Osvaldo Nunez (Bourassa, BQ): Mr. Speaker, I would remind the hon. member, as I did in my address, that health is a provincial matter, not because I say so, but because the constitution says so. Very clearly. I quoted section 92 earlier.

I am sure, as I have already said, that we in Quebec are capable of providing care to the entire population, care funded from our taxes, quality care. We in Quebec have no need of the federal government to provide our entire population with such care.

Furthermore, the health system in Canada is at risk today, not because of the provinces, but because of federal cuts in transfers to the provinces. That is where the true danger lies.

I think that the hon. member ought to get up to criticize his own government's cuts in the system of transfers to the provinces. I trust that he will react to the next federal budget because it will seriously aggravate the situation. The government will be making cuts everywhere, including health care, in the next budget.

[English]

Ms. Hedy Fry (Parliamentary Secretary to Minister of Health, Lib.): Mr. Speaker, I want to comment on the hon. member's statement.

Much has been said about paragraph 4.(2)(a) and that it in fact has begun to encroach on provincial jurisdiction. I would like to refer the hon. member to clause 12, which states:

Nothing in this Act or the regulations authorizes the Minister or any officer or employee of the Department to exercise any jurisdiction or control over any health authority operating under the laws of any province.

That clearly specifies that the bill does not move into provincial jurisdiction.

- (1600)

I will quickly touch on the issue of transfer payments. In 1991-92 federal health transfers as a percentage of provincial expenditures were 31.2 per cent. In 1993-94 to Quebec it was 31.9 per cent. In 1994-95 it was 31.7 per cent. In 1995-96 it is 32.2 per cent. I may not be an accountant but I surely know that is an increase in terms of percentage of expenditure.

The major transfer to Quebec will approach \$11.7 billion in 1995-96. It will account for over 30 per cent of Quebec's estimated revenues in 1995-96. It means that roughly \$1,590 per person is spent in Quebec by the federal government.

[Translation]

Mr. Nunez: Mr. Speaker, briefly, I appreciate the hon. member's comments but I find that there are certain contradictions in clause 12 of this bill, which have been pointed out by the critic

for our party. Furthermore, practice and experience have shown us that, even where there are clauses to forbid federal interference in provincial matters, the federal level retains the spending power, which it sometimes uses to interfere unduly in provincial matters.

[English]

Mr. Paul Szabo (Mississauga South, Lib.): Mr. Speaker, during the last number of years a significant trend has occurred in health care in Canada in relation to the average length of stay that Canadians have in hospitals. In Ontario alone the average length of stay has reduced from some seven days to about 4.2 days.

There has also been a major shift toward ambulatory care. Rather than having people go to the hospital and wait for a day for surgery and so on, they come in on the same day of surgery and are out a lot quicker; similarly with regard to maternity.

The member should also appreciate that there have been substantial changes in medical technology as well as in medications and that in fact Canadians are living longer today than they have historically. They continue to live longer. In addition there has been a tremendous elimination of duplication of services between hospitals and community agencies.

All this results in a substantial reduction in health care costs. Yet the member will clearly find out, if he checks the figures, that our health care institutions province by province have been able to service as many or more Canadians with less facilities. Those are the savings.

Because the savings have been achieved by the provinces the federal government has not achieved any benefit from the savings. The member should realize that health care is much cheaper to provide now and that the cuts simply reflect the lower cost of providing health care to all Canadians.

[Translation]

Mr. Nunez: Mr. Speaker, as I said in my speech, I am in favour of a universal health system that is free of charge and funded from tax revenues. I think that this is a major benefit for the population, and one I would not like to see endangered. That is why I would invite the hon. member across the way to pressure the Minister of Finance to stop making cuts in transfer payments to the provinces in order to finance the health program.

Contrary to what the hon. member states, I feel that costs are on the upswing at present, particularly because of longer life expectancies. The population wants care, increased care. In my riding of Bourassa there are very many seniors who complain of not having proper health care. We can work together to improve the system, but not to destroy it, as you will by making cuts in the health field.

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[English]

Ms. Mary Clancy (Parliamentary Secretary to Minister of Citizenship and Immigration, Lib.): Mr. Speaker, may I say that it gives me a great deal of pride today to speak in support of Bill C-95 to establish the Department of Health.

• (1605)

My pride lies not just in the federal government's record of accomplishment and achievement in the broad health domain, although I have a great deal of pride in that, but also in a health system that is the envy of the world. In addition I have pride in the knowledge that the genius of Canada's Constitution is found in the fact that the world's finest health system did not come about at the expense of a fundamental respect for the letter and spirit of our Constitution.

While we are batting around our good and much maligned Constitution I should like to make a slight comment. Members of either the official opposition or the third party who are fond of making comments about the Constitution could perhaps learn a bit if they would read the Constitution. Many of the misapprehensions we have heard from both those opposition sides might be cleared up if they would merely read it. Maybe they need some help in reading it. However they should read it.

We could speculate on how the Fathers of Confederation would have dealt with health care had they any idea of the enormous technological changes that would take place in the first century of our country's history and in the even more profound technological advances that continue to arise each and every day. Perhaps we could speculate on how the Constitution would have been written if anyone in 1867 could have imagined the day when health expenditures would account for about one-tenth of Canada's economy.

Last Thursday the hon. member for Drummond enumerated the various heads of power over health the Constitution assigns to provincial legislatures. She drew particular attention to subsections 92(7), 92(13) and 92(16) which deal with health institutions, property and civil rights, and local matters. The hon. member could have added that subsection 92(2) deals with local taxation and spending and has health implications.

Those listening to the hon. member's stirring defence of Canada's Constitution could have been forgiven for thinking that everything the Constitution has to say about health is encapsulated in subsection 92. The fact of the matter is that other subsections also have considerable relevance. In the interest of peace, order and good government and in the interest of ensuring the people of Canada understand what is actually happening I should like to name some of them.

Subsection 91(27) gives the Parliament of Canada exclusive jurisdiction over criminal law. "Ah", I hear some people cry,

"what does that have to do with health?" I will tell them. It is the basis of a number of statutes protecting public health and safety. That is federal jurisdiction.

Subsection 91(2) assigns to the federal Parliament responsibilities for international and interprovincial trade. It again supports the basis for federal regulations, as a small example, in the area of drugs and medical devices. That is federal jurisdiction once again.

Subsection 91(11) gives the federal Parliament explicit power over quarantine and marine hospitals. That is an interesting sidelight. It reveals a good deal of the thinking in 1867 about where matters cease to be local and take on national significance: quarantine and marine hospitals. It is not too big a stretch to see that should be and indeed is constitutionally within the federal domain.

Subsection 91(7) concerns the military and veterans. It is federal. Subsection 91(8) has to do with the federal public service and subsection 91(4) concerns aboriginals and lands reserved for aboriginals.

All these powers account for a great deal of the federal role in health. They account for the considerable array of the duties and responsibilities set out in clause 4 of Bill C-95 and by extension they account for the vast majority of Health Canada's operating expenses.

When viewed from the perspective of federal constitutional responsibilities, health is clearly a great deal broader than my hon. friend's narrow view of health care delivery, important though that is. No one in the Department of Health and no one on the government side is trying to minimize the responsibility of the provinces in health care. It is clearly not my intention to reopen the Constitution on this occasion but to separate myths from reality, particularly as they regard the application of federal spending powers in the health field.

• (1610)

I will again reiterate my earlier comment. The Constitution is a wonderful compilation of documents that has been much maligned both by the official opposition for obvious reasons and by the third party for reasons I can only claim are obscure. Most of their reasons are pretty obscure to me.

The biggest myth is that the spending power broadens the sphere of federal regulation. The reality is that nothing in the Constitution gives the federal Parliament the means to regulate provincial matters in the guise of spending power. Perhaps I could say it again very slowly. It can attach conditions to the funds it makes available to the provinces. However, just as it cannot compel the provinces to accept the funds it offers, neither does it buy jurisdiction when its offer of funds is accepted.

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Clause 12 of Bill C-95 makes the limitation clear just as the existing Department of National Health and Welfare Act also makes it clear. It states:

Nothing in this act or the regulations authorizes the minister or any officer or employee of the department to exercise any jurisdiction or control over any health authority operating under the laws of any province.

That is why the Canada Health Act does not forbid user fees. It does not require that provincial legislatures forbid them. It simply makes it clear that any province which decides to finance medically necessary health services through such means cannot count on receiving the full amount of financial assistance the federal government is prepared to offer.

This brings me to the matter that the federal government is intruding into provincial prerogatives. There is an immense distinction to be drawn between intrusion and involvement. The motivation for the federal government's involvement in health financing does not derive from any desire to centralize powers or to colonize a field of provincial jurisdiction.

The federal role in health care has been the exercise of leadership. There are those who would hold that leadership is a dirty word or a symptom of megalomania. I hold differently, as do members on this side of the House. I hold that leadership is a characteristic all Canadians value. All Canadians from all regions of the country expect and demand their federal Parliament to display leadership. It is not a dirty word. It is a great word which we over here absolutely applaud.

It is here that doctors and hospitals cease to have just local significance. The value that all Canadians share transcends being merely local. The importance that all Canadians attach to the principles of universal health care is a defining characteristic of the Canadian psyche. This is who we are. This is what we stand for. This is what we are proud of and this is what we fight for.

How is it possible to overlook this aspect of health care? I do not understand it. It is beyond me. At a time when all Canadians welcome the positive forces of reconciliation and partnership, I cannot understand how we in the House would allow ourselves to ignore the positive contribution that the federal government has made and continues to make to the health and well-being of all Canadians and to the articulation of the spirit of community that hold us in high regard the world over.

Before I close I should like to tell a little story about something that took place in my first session of Parliament in the House when we were in opposition. There had been a debate, again I believe it was an opposition day debate on the question of health care. After the debate was over, I joined two of my colleagues, one from my own region of Atlantic Canada and another from Ontario. We talked about how important medicare and the Canadian health care system was to each one of us.

• (1615)

It turned out that each one of us had had fathers who had suffered and families that suffered because of injury and illness prior to the development of medicare in this country, prior to the Canadian health care system. We came from three different backgrounds, from three different areas of the country, but all three of us remembered what it was like in childhood and how our families had suffered because the Canadian health care system had not yet been put into place, put into place I might add by the federal government, a federal Liberal government.

This is why I am pleased to have had an opportunity to speak in support of Bill C-95. This is why I and my colleagues on this side of the House in the Government of Canada will fight and maintain the Canadian health care system in the face of all odds.

[*Translation*]

Mrs. Christiane Gagnon (Québec, BQ): Mr. Speaker, I welcome this opportunity to speak today in the debate on Bill C-95, an act to establish the Department of Health and to amend and repeal certain acts.

I feel particularly concerned by this bill since in my riding, 50 per cent of the population lives below the poverty line and the quality of health care is extremely important. Although the government claims it is only a technical bill, its purpose being merely to change the name of the Department of Health, that is not the case.

Since 1919, we have seen the same situation time and time again. Once more, the federal government has shown its desire to invade provincial jurisdictions, as we will show later on.

I must firmly condemn the latest in a series of hijackings by the federal government. It hijacked the jurisdiction of the provinces over health care. It started many years ago in 1945, and it is about to finish the job.

Particularly revealing in this respect is the well known national forum on health. This forum, announced during the election campaign in the fall of 1993, was established a year later. Its mandate was very clear: to develop a vision of the future of Canada's health care system, to foster discussion with Canadians on their health care system, to identify priorities for the future and to achieve a broader consensus on the changes that are required.

We know that the provinces, which according to the constitution have jurisdiction over health care, are not involved in the forum.

What does this mean? The answer is simple. Instead of showing some willingness to respect the jurisdictions of the provinces, the government has simply gone over their heads without consulting them. The membership of the forum is a case in point, and I quote the Minister of Health: "The forum now has 22 members with a vast experience in health care, either as professionals, volunteers or consumers, and it will be a pleasure

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to join them in the months to come to work on a wide range of issues”.

As you can see, the federal government did not bother to appoint representatives for the provincial governments. Consumers, professionals and volunteers come under the exclusive jurisdiction of the provinces. If any doubts remain as to the determination of this government to get the provinces out of this area, let me eliminate them immediately by quoting what was said by the parliamentary secretary to the Minister of Health at the twelfth international convention of the International Society for Quality in Health Care last May. She said, speaking on behalf of the government: “Canada has already taken many steps to achieve its goal: renewal of the health care system. We are reinforcing the community aspect of health care, improving the role of consumers in this respect and looking for a more integrated approach to health which goes beyond care as such”. She went on to say: “We want to improve the effectiveness and quality of health care, and one of our common priorities is to promote the use of guidelines for clinical practice. We want health care to focus on the practices that are most effective for various high-risk groups”.

• (1620)

These are fighting words for the provinces. Since when has the community aspect of health care or the role of consumers and health care been a federal responsibility? Are these not the exclusive responsibility of the provincial governments?

Why did the federal government, as it paid lip service to eliminating duplication and overlap, set up the national forum on health? I wonder. The answer is clear: this government is caught up in its desire for centralization and its obsession with encroachment. It never intended to withdraw from the areas of provincial jurisdiction it has invaded with impunity since 1919.

It is too bad that public opinion and the opinion of governments, including that of Quebec, are not important at all to this government. If only this duplication could be an asset, but unfortunately, that is not the case, as we shall see.

Let us look at the repercussions of this obnoxious policy on provincial governments. In Quebec, the provincial government has for a number of years considered the changes that will be necessary to deal with budgetary constraints and at the same time improve health care services to the public.

Through broad public consultations, Quebecers had a chance to express their needs and expectations and help identify priorities and implementation mechanisms. The Quebec government’s action plan is ready and is now being implemented. Is there any justification for the expense of the new consultations

carried out by the forum? Would it not have been better to respect the autonomy and jurisdiction of the Government of Quebec and transfer all moneys concerned directly to it for the benefit of Quebecers?

I am sure this option never crossed the mind of the federal Liberals. Now it cannot be done, because the federal Minister of Health announced in March her firm intention to direct all health policy matters.

As they were thus assuming their so-called leadership, they cut transfers to the provinces, thus depriving those who provide the services of the funds they need to set up their own policies. In fact, provincial governments, not only Quebec, will have to slash health spending. In addition to their own budget constraints, they will have to deal with cuts in federal funding.

Once again it will be women who will feel the effect. A report on women’s health prepared by the International Federation of Gynaecology and Obstetrics revealed a year ago that women were sick or incapacitated longer than men. Moreover, as their life expectancy is longer than men’s, it is primarily they who will be deprived of necessary health care because of the expenses arising from duplication in health matters and cuts in federal spending.

For Quebec, these cuts represent more than \$8 billion over 10 years. The provinces were not consulted, although they have to incorporate them and suffer the wrath of their citizens. We have to bear the unbearable.

Allow me to conclude with a quote from an article that appeared in *La Presse* on March 4, 1995, which aptly summarizes the situation. It said that, together with the provinces, Ottawa would have to establish a list of essential services that would continue to be covered by the health insurance plan. It felt that this was the way Ottawa intended to allow the provinces to deal with increased health costs in a context of reduced federal transfers. In the end, according to the article, the bill for services not considered essential would have to be paid by taxpayers.

The aim of Bill C-95 is to enshrine government control over health. We have no intention of supporting this greed, which will mean Quebecers and Canadians alike will suffer.

Mr. Pierre de Savoye (Portneuf, BQ): Mr. Speaker, I listened with interest to the comments made by my colleague from Quebec. She raised what I think is an extremely important point, which I would like her to develop further.

She talked about centralization and decentralization. We now see that the federal government, in particular the Department of Health, is trying to centralize a number of health matters, especially the general direction of health care in Canada.

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• (1625)

At the same time, we see that the provinces, including Quebec, want to make innovative, creative decisions to better manage health care within their territories. In Quebec, there is a wide consensus to decentralize health care decisions to administrative regions. I am not talking about Canada's administrative regions but about administrative regions in Quebec. We see that the people want to be able to define in their own communities the kind of health care services they need and to have access to them.

This is in complete opposition to the tendency evident in the federal government's measures. Our concerns are justified. The federal government's centralizing vision is totally out of touch with the expectations of people in every province, including Quebec.

I would like the hon. member for Quebec to expand on this, to give the people listening to us and the members of this House an overview of Quebec's favoured approach, which seems to strike a chord in some other provinces.

Mrs. Gagnon: Mr. Speaker, of course, this debate we are having today, members and ministers of previous governments have already had it. Legislation has been passed since 1919 that basically encroaches on provincial areas of jurisdiction.

That is not what the constitution of 1866 intended. What it intended was for the provinces to have full and complete jurisdiction over health, education and manpower training. I think that what is happening—When I look at the federal government's expenditures, I think that the problem comes from the federal spending power.

Federal spending for 1995–96 is \$1.5 billion for operations, \$347 million for personnel and \$703 million for goods and services. If this money had been transferred to the provinces, Quebec and the other provinces would have had more money for health care, and would not have had to impose budgetary restraints and to cut back personnel and services at the taxpayers' expense.

What do you do at a forum? You discuss. You try to find a way to sing the same tune as the other provinces. But in the end, as minister Rochon pointed out in the Quebec national assembly, all that the provinces do at meetings and federal–provincial conferences is complain about not having enough money. There are costs involved with holding forums and conferences. When you do not have enough money, you stop discussing and start acting.

And in acting, you need money to follow these actions through. I think that agonizing choices lie ahead. Quebec's goal has always been to provide a safety net in several areas such as social services, health and education.

The federal government is driving us back against the wall by providing less funding. Federal transfers to the provinces have been reduced by \$8 billion. Who does the public turn to? To the one making the cuts, the one that says: "We will not be improving services this year because we do not have enough money. Instead, we will be downsizing". As a result, employees too are concerned.

I think that I am not the first person to make this point. Since 1919, other parliamentarians, from Taschereau to Jean Lesage, have made it before me. There must be some truth in what we say. I cannot understand the federal government. We have to keep hitting it with the same arguments over and over again. What a waste of time. Time has come to act. And to act, we need money.

[*English*]

Mr. Paul Szabo (Mississauga South, Lib.): Mr. Speaker, I listened with interest to the speech made by the hon. member. I would like to try to put this in a simpler context. I think what the hon. member and what many Bloc members are saying is that they would like the province to be totally responsible for health care with no federal involvement whatsoever.

• (1630)

I would like to give the member a simple example and ask the member to comment on one particular aspect of health care that we take care of, and that is the research, study, and recommendations to deal with specific problems Canadians have. One of them I am quite interested in is fetal alcohol syndrome or fetal alcohol effects. That disease affects about one in 500 births. It also accounts for five per cent of all fetal defects in Canada. That particular disease results in central nervous system disorders, brain damage, cognitive problems, attention problems, and so on. It is a very serious problem.

The federal government, using part of its money, one of many studies and programs it does, looked into this in 1992 and apparently is coming out again with a joint statement with the provinces with regard to a strategy to deal with fetal alcohol syndrome and fetal alcohol effects. That is just one example.

Does the member not agree that there are problems of health in Canada that are much better dealt with as a national Canada-wide effort—AIDS, aboriginal health, alcoholism, drugs, and so on—and are better handled by the federal government rather than handled individually in each and every province?

[*Translation*]

Mrs. Gagnon: Mr. Speaker, I do not deny that there are health problems, but the provinces are certainly able to meet the needs of the public. The federal government is not there to set standards, organize forums and make studies. Rather, its role is to transfer money to the provinces, so that they can act directly where it is needed. I do not deny that there are problems with alcoholism. However, I believe that Quebec is certainly capable

of setting up its own programs and making realistic decisions, based on the existing demand and need.

You talk about national standards. These may be appropriate for a province, but less so for another. When you set national standards, you must also provide financial support. We are discussing eligibility for all. I agree with that principle. However, do you not think that the federal government jeopardizes access, for the population as a whole, to quality health services, by spending and generating costs without even seeking our approval?

The issue is not health care, but transfer payments and the provinces' responsibility.

As I said before, ministers and members of provincial legislatures, not only in Quebec, have been wondering about decentralization since 1919. The word "decentralization" was not invented in Quebec. Other provinces are also concerned. Just look at what is happening in Ontario and in British Columbia, which will pass a law that may not please everyone. The federal government interferes in fields of provincial jurisdiction. Given that \$603 million is spent on goods and services, and another \$347 million on personnel, the federal should let the provinces spend the money where it is really needed and avoid duplication of services and personnel.

[English]

Mrs. Rose-Marie Ur (Lambton—Middlesex, Lib.):
Mr. Speaker, I rise to address the House in support of Bill C-95, an act respecting the Department of Health.

I would like to take this opportunity to congratulate the minister who proposes this bill for the efforts she has made over the past year to defend and strengthen the principles enshrined in the Canada Health Act that underpin Canada's magnificent medicare system. I might add, it is a system of which I was proud to be a part in my previous position as a health care professional.

• (1635)

The department this bill deals with is an essential part of the fabric of this nation. The minister has said that it touches the life of every Canadian every day. Medicare in Canada transcends medicine. It is both a service for Canadians and a critical bond with Canadian federalism. Without it we would suffer as individuals and as a country.

It is essential that medicare be sustained and strengthened and that it remain as a bond within the country. This is the challenge and the responsibility of this department. This is the reason for Health Canada, and the reason I will support Bill C-95 without reservation.

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It is true that the provinces have primary responsibility for the design and delivery of health care services. This is as it should be. Health care is a local responsibility. Doctors and hospitals work in communities. Provincial control of health care is not a weakness of the system, it is a considerable strength. The values, beliefs, wants and aspirations that define Canada and the Canadian identity are not unique to any sector of the Canadian population or to any region of this great country of ours. But the circumstances in which health care is delivered differ across regions, and the health care needs and priorities of these regions will differ. What we have is an opportunity system, where 12 variations on a common set of principles all going at medical problems in slightly different ways provide administrators and practitioners in different parts of the country with the opportunity to learn from each other.

The provinces plan, manage, and operate the health care system, but through the exercise of the federal role and through its transfers to the province, a national health system is the reality in Canada.

There are clearly many important health matters that require national leadership and co-ordination. There would be little to be gained, for example, if the work of the federal laboratory for disease control were duplicated in each province.

Many federal initiatives in the areas of health promotion and disease prevention have stimulated provinces, public health authorities, and non-governmental organizations to work to improve the health of all Canadians. Health Canada also has a special role to play with respect to the delivery of certain health services to First Nations, which will continue until the process of devolving responsibility for self-government has been completed.

After World War II ended, our forefathers and our predecessors, federal and provincial, looked down the road and asked what kind of nation we wanted to have. What kind of health care system do we want to have? What kinds of values do we have? As a country, as a people, and as the Liberal Party, we concluded that top-flight medical care was of paramount importance. We also recognized certain principles of fairness, equity, and efficiency that reflect the ideal of Canadians. Out of all this, our system of medicare was assembled just over a decade ago. It was anchored by the Canada Health Act.

If I may remind hon. members, the Canada Health Act came into being in order to defend the principles that were the foundation of medicare, principles of equal and universal access, principles that were even then under attack by various schemes that allowed extra billing and user fees.

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In 1983, extra billing in various provinces amounted to \$100 million, a total that had doubled over the previous five years. An erosion of medicare was taking place. The erosion was stopped by the minister in 1984. When there were signs of it restarting in 1994 under the guise of private clinics, it was stopped again by this minister, who has insisted that the federal government will ensure that the fundamental principles of the health care act are maintained.

The minister has said that it is not her intention to preclude the use of private clinics, which are often a cost-effective way to deliver services. She has said though that they have the potential to create a two-tiered system of health care: one level of service for the wealthy and another for the rest of Canadians. This is unacceptable today, just as it has been unacceptable through all the years we have been building and defending Canada's medicare system.

There is no mistaking where Canadians stand on this issue. Canadians want effective federal leadership in the health field. This is evident from the favourable reaction to the minister's announcement regarding user fees at private clinics.

• (1640)

Hon. members who have concerned themselves with the evolution of the health care system will be familiar with the work of Dr. Michael Rachlis. He was co-author of *Second Opinion*, an influential book that examined the Canadian system. Dr. Rachlis recently criticized the combining of public and private medicare, saying "it entails a wrong prescription for what is wrong with our health care system and then issues a wrong diagnosis".

Frank Maynard, former Deputy Minister of Health for Manitoba, warned:

We already have the beginnings of a two-tier system; we should not enlarge it. Health care is not a commodity, so it is not a valid choice to offer the rich faster access to required medical service.

Wendy Armstrong, president of the Alberta chapter of the Consumers' Association of Canada, wrote:

What happens is private clinics choose to treat things with the least risk of complication, least overhead cost and with potentially high volume. It's skimming the cream.

I could multiply these quotations by the hundreds, but I will conclude with only one. This segment is from a letter to the editor published by the *Calgary Herald* on October 16, 1995:

It is time for Albertans to stand behind the federal government and demand universality of health care. This issue has nothing to do with political affiliation. It has everything to do with preserving a cornerstone of what makes Canada the best country in the world.

That just about sums it up. We are all in it together. For the most part we are all delighted to be in it, because there is no better system to be in, anywhere in the world.

The role of the Department of Health is to sustain and improve Canada's health system, to keep it intact. That is why I support the department, and that is why I support this bill.

[Translation]

Mr. Pierre de Savoye (Portneuf, BQ): Mr. Speaker, we know that transfer payments for health and postsecondary education have been reduced over the last several years.

I personally asked the Minister of Health to give me the figures in constant dollars on a per capita basis. There has been indeed a 7 per cent reduction over the last four or five years. Obviously, this has had an impact on the provinces' ability to assume their responsibilities with regard to health.

In Quebec, for example, we know that the Minister of Finance has announced a \$1.5 billion reduction in transfer payments for health and postsecondary education for next year. At the same time, we learn that the federal government is going to spend \$2 billion to buy armoured vehicles.

There is some type of dichotomy here. I want to believe that we do need armoured vehicles, but health is also essential. Armoured vehicles will not be much help to us when we get sick. There are societal choices to be made.

I know that Quebec would not have made that choice. I know that if Quebec had collected its tax money directly from the taxpayers, it would not have chosen to invest that money in armoured vehicles rather than in health care.

I would like my colleague opposite, if she can listen to me, to talk about the societal choices that are made here, in this House, and that have an impact not only in Quebec but in every province. These are the choices that have Canadians increasingly worried about their province's ability to provide them with the health care services they need, considering the fact that they have paid for these services but, for some reason or other, that money seems to have come to Ottawa on a one way ticket.

How is it that this money finds its way here but is not being returned where it should to fund something as essential and fundamental as health?

[English]

Lip service is a nice thing, but we should do something more. We heard from the MP opposite. I am waiting for your answer.

Mrs. Ur: Mr. Speaker, I thank the hon. member for his questions. To reassure the member, I indeed was listening. I had my earphone in and I did understand his question.

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• (1645)

I can certainly vouch for the efficiencies within Health Canada as a health care professional. Dollars are being cut and a lot of Canadians are going to suffer.

The member can rest assured that with efficiencies within Health Canada, new technologies and research and development, they enable us to work more efficiently with less dollars and to look at eliminating duplication and look at where services can be done differently. This is the direction we are headed. It does not mean that Canadians will be getting less health care, but that they will get health care that all Canadians can afford, rich or poor. I can attest to that avenue in the health care system or any other department.

Ms. Margaret Bridgman (Surrey North, Ref.): Mr. Speaker, I would like the hon. member to expand in other areas the act covers besides the medicare or health insurance component.

One concern I have is in relation to section 4(2)(a) where it actually says that the department will be responsible for the promotion and preservation of the physical, mental and social well-being of the people of Canada. What I am thinking about here is the social well-being component of the statement. With the removal of welfare from the health and welfare department making it strictly health, does the hon. member not think that addressing the social well-being aspect is being inhibited now by having to deal and collaborate with other departments? Following on that, the Department of Consumer and Corporate Affairs was deleted and a lot of that mandate went to industry.

I feel that the department is being diluted in its ability to address the actual social component.

Mrs. Ur: Mr. Speaker, I thank my hon. colleague for her question. We have worked hard at health committee meetings and I understand her sincere question.

There has been sufficient research and involvement within Health Canada to make this diversity within the ministry as to who best can allocate for all Canadians. I believe the right choice has been made by looking at the ministry and the Department of Consumer and Corporate Affairs working in conjunction with Health Canada. It is going to be more productive because of the avenues taken and it will be beneficial to all Canadians.

Mr. Paul Szabo (Mississauga South, Lib.): Mr. Speaker, I compliment the hon. member for Lambton—Middlesex on her debate on this important bill.

I know the member is a nurse by training. I also know she is a member of the important health subcommittee on AIDS. It is important for all members to understand that the federal government has a role to play in terms of major diseases such as AIDS which affect all Canadians.

Perhaps the hon. member would like to comment on the work she has seen through the subcommittee on AIDS that the federal government has been doing for the benefit of all Canadians.

Mrs. Ur: Mr. Speaker, I am pleased to be one of the members on the subcommittee for HIV-AIDS. It certainly has been a learning experience to say the least, to sit on that committee and hear witnesses.

The ministry has been allocating dollars proportionately to research regarding HIV-AIDS. Many issues have been addressed. This disease certainly is not under control by any means, judging from the stats that come by our desks daily. The dollars that have been funded through the minister have been allocated most effectively. I hope that in the not too distant future we will see positive ramifications from those dollars. There has been very good ongoing research.

Again, sitting on that committee has been a learning experience. I am sure its work will be most valuable to the House.

• (1650)

Mr. Pierre de Savoye (Portneuf, BQ): Mr. Speaker, I listened a few moments ago to the answer of the hon. member opposite. She said that access to health care should not depend on the wallet, that poor and rich people should have equal access to services. I could not agree more with that.

Some hon. members: Hear, hear.

Mr. de Savoye: I thank the members opposite for applauding these words. However, the question is: What kind of services? I have a problem I want to share with the hon. member. She will probably have an interesting answer and I am eager to listen to it.

Two years ago, former first minister Bourassa had skin cancer. Where did he go for treatment? Washington, D.C. I want to know if people with a fat wallet will have to cross the border to get proper treatment. How come Mr. Bourassa could not be treated either in Quebec or in Canada? What was special? How would health care in Canada be able to cope with such a situation?

I am sure the member has a proper answer and I am eager to hear it.

Mrs. Ur: Mr. Speaker, I again thank my hon. colleague with whom I had the pleasure of working on the health committee. I know his question is most sincere.

With respect to that individual, I believe it was freedom of choice. It was his choice to seek medical help elsewhere. I can also relate a story. My husband had a heart attack five years ago. I did not have to go south; I was able to deliver my husband to an emergency room. He was having a heart attack and they did not ask me what my bank account was. I was able to go in there with my only concern being to make sure my husband had the best health care service. I knew he had it because that is Canada's health care system.

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[Translation]

The Acting Speaker (Mr. Kilger): This brings questions and comments to a close. It is my duty, pursuant to Standing Order 38, to inform the House that the question to be raised tonight at the time of adjournment is the following one: the hon. member for Mackenzie—public works.

[English]

We will now move on to the next stage of debate. We have exhausted the five hours of debate with 20-minute speeches and 10-minute questions and comments. We now go to straight 10 minute speeches without questions or comments.

Ms. Jean Augustine (Parliamentary Secretary to Prime Minister, Lib.): Mr. Speaker, I am pleased to join with my colleagues to speak to Bill C-95, an act to establish the Department of Health and to amend and repeal certain acts. I want to assure all Canadians who are watching today's debate that this is a housekeeping bill. It is not a bill encroaching on provincial powers. It is not a bill kidnapping powers. It is not a bill discussing a two tier system, one for the rich and one for the poor.

In any of the polls done, it has been shown that 89 per cent of Canadians believe we have the most important and the best health care system in the world. They believe in the principles involved in the health act: universality, portability, accessibility, comprehensiveness, public administration.

Health Canada has certain responsibilities that are implicit in its mandate. Bill C-95 is attempting to make this explicitly acknowledged. Bill C-95 is before the House at a time when so many things within the world of biomedical technology are before us.

Bill C-95 affirms a whole series of things we promised in our red book. Partnership and co-ordination are words that are very important to us as we move on this issue. Those are the reasons for this proposed legislation. It is to confirm the existence of the Department of Health and to specify that mandate working with the provinces, working for a holistic approach to health, taking into consideration the social as well as the physical and mental well-being of our population.

• (1655)

This proposed legislation contains a series of provisions concerning the transfer of responsibility. I want to affirm—I think there was general agreement on all sides—that the history of universal medicare and the health department are intertwined.

The department has played an essential role in the evolution of medicare from its infancy in the 1950s and 1960s to its current status as one of the most respected health systems in the world. Why is Canada's health system so respected? One of the reasons is that it is predominantly a single payer, publicly

financed health system. That unique feature of our health system has been there from the beginning.

When we were putting in place universal hospital insurance coverage under the Hospital Insurance and Diagnostic Services Act, the federal government cost shared the start up of this component of the health system. The same happened when it came time to establish universal coverage for physician services under the Medical Care Act. Federal cost sharing was essential to assisting provinces and territories in establishing their medical care insurance programs. Medicare as we know it would not have gotten off the ground without the federal role in and commitment to health and its financing.

Cost sharing gave Canada universal hospital and medical care insurance, but cost sharing had its shortcomings. The change in financing arrangements in 1977 to block funding under the EPF, established programs financing, provided the provinces and territories with the flexibility necessary to focus beyond the traditional hospital and medical components of their health systems.

Anyone who says that the federal government is not a financial player in health is not looking at the numbers, which I will provide. In 1995-96, \$15.5 billion in EPF health contributions will go to the provinces and territories. The long tradition of block funding and the flexibility it affords provinces and territories in their health programs will continue with the Canada health and social transfer.

Scheduled to begin in 1996-97, the CHST will transfer \$26.9 billion to the provinces and territories for their health, post-secondary education and social assistance programs. In 1997-98, the CHST will contribute \$25.1 billion. No one is denying the importance of the CHST reductions but let us put these reductions in perspective.

The reduction of \$2.5 billion for 1996-97 amounts to less than 3 per cent of total estimated provincial spending on health, post-secondary education and social services and less than 2 per cent of provincial government revenues. The CHST is a balanced and fair approach to dealing with Canada's deficit and debt in making our health system fiscally sustainable.

Federal transfer reductions do not threaten our universal publicly financed health system. The minister has said this over and over in the House. Let us not be fooled by those who say it will and that privatization will save the health system.

The Canadian experience bears out results from studies by the Organization for Economic Co-operation and Development and the World Bank. Both have said that cost containment is more successful in health systems with a high share of public financing. The public share of health expenditures in Canada was about 72 per cent in 1993. The rest, 28 per cent, came from private sources ranging from employment based supplementary benefits to individual out of pocket purchases.

• (1700)

In terms of cost control the public sector succeeded in containing the rates of increase to 2 per cent in 1993. Private sector health expenditures grew three times faster, with an increase of 6.4 per cent.

Canada's publicly financed, single payer health system has the built in capability to pull various levers to rein in costs. Global budgets for hospitals and capping payments to physicians are two examples which come to mind. There are many others which provinces and territories can use without resorting to privatization or putting national health principles in jeopardy.

The federal government and the Department of Health played a key and necessary role in building our publicly financed, single payer health system which continues to reflect the values of fairness and equity on which the system was originally built. The need for a strong federal presence and role in health remains important in ensuring that fairness and equity are at the centre of our health system.

I assure all Canadians, especially the seniors in Etobicoke—Lakeshore who are watching the debate in the House, that Bill C-95 is a housekeeping bill and deserves the attention of all members.

Mr. Ovid L. Jackson (Bruce—Grey, Lib.): Madam Speaker, it is a pleasure for me to speak today to Bill C-95. Health is one of the most important things in Canadian life, if not the most important. The human being is the most valuable resource we have. We can talk about resources, human and natural, but it is our human resources which make Canada the best country in the world.

Today a fundamental piece of legislation for the operation of the federal government is under discussion. Contrary to what has been implied in the House, the role of the federal government in health care is very important. It is crucial for the continued health and well-being of Canadians.

Everyone is familiar with the major role the federal government has played as the architect of a national health insurance system for Canada. Everywhere in the world it is regarded as an excellent example of public sector innovation in a crucial field of service provision. We should not forget what the health system in Canada was like before the advent of national health insurance.

Lack of infrastructure in the health area was highlighted during the Depression when financing was so desperately short that many doctors had to go on relief in the western provinces because patients could not pay their bills. Military recruiting

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drives for World War II demonstrated the poor health of the overall population, especially military aged males.

Saskatchewan pioneered the national health insurance model, first for hospital services and then for medical services.

The national health system we have today owes its origins to the leadership of consecutive federal governments, first to build infrastructure with hospital grants, with the Hospitals and Diagnostic Services Act and the Medicare Act, and in our own era with the Canada Health Act and established programs financing.

Who among us doubts the importance of this multi-decade effort to build a national health insurance system, both in terms of nation building and in terms of the security it provides each and every Canadian that their medical needs will be met regardless of their pocketbook.

We should not forget that the Canada Health Act, the last incarnation of this major national effort, is a piece of legislation which received all-party support in 1984.

Since this government was elected it has taken its responsibilities under the Canada Health Act very seriously. Under the private clinics policy a rigorous distinction is being drawn between the public health sector for insured services and entrepreneurial medicine. This is a critical distinction. No Canadian should be able to buy his or her way to the front of a queue for services. Services ought to be rendered on the basis of medical need, not by the pocket book.

• (1705)

As important as the CHA is, however, it is but a small part of the federal role in health. Health Canada is operative across Canada to ensure that the food Canadians eat, the drugs they consume and the medical devices they use are safe. It is important to recognize how much the department is operative behind the scenes to guarantee security in these areas. For example, for well-being during a baby examination, the immunization series is provided by a provincially paid practitioner but the quality of the vaccine and vaccination is ensured by the federal government.

Health Canada also plays a major role in encouraging both the public and private sectors to promote health and prevent illness and accidents.

Whatever the hazard of the day, smoking, AIDS, nuclear fall-out, radon, ebola, the plague, there is a Health Canada employee with direct responsibility for ensuring Canadians have the information they require to reduce their risk and that they are aware of the various protective strategies that exist to combat risk. They can build on those factors in their social and physical environment which will ensure Canadians are protected now and into the future.

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Let us look at an instance of how this works. The ebola scare is fresh in Canadian minds. The Quarantine Act was recently invoked to ensure there was no risk of the ebola virus spreading in Canada. Networks of federal officials from Health Canada and with Health Canada's lead, many federal departments were mobilized to ensure security was always in place to reduce risk and follow up on any and all suspicious circumstances.

Working with Canadians across this great country of ours, using our public health intelligence of the highest calibre, Canadians acquired worldwide respect for their handling of the ebola crisis and their management of a situation with a high potential for panic and public disorder.

Ebola is but one of the many instances in which Health Canada rolls into action to protect Canadians. Many hazards have less public profile. Many require detailed risk assessment to determine how they should be managed. At all times Health Canada has the responsibility for dealing with the national dimensions of hazards to health and reducing them to ensure the high quality of life Canadians enjoy.

Another key role in the department is in the population health area. Recently we have come to understand the power of using population and sub-populations as the primary unit of analysis in the development of health policy and programming. The health status of populations is heavily influenced by a number of key health determinants including biology, income, education, environment, to mention a few. The department is now in the process of operationalizing the health determinants perspective on issues with the help of many of the country's most creative thinkers in the health area.

As an illustration, take Canada's children as a key sub-population. Concern is increasing about key social indicators such as rates of youth offences and incarceration. Quite recently there was a study on young women which is very troubling.

The preconditions for these increases in rates are set much earlier in the development of a young person. There are recognized determinants that are predictors of pathways that lead to healthy child development; for example, supportive families, social networks, parental employment and so on. There are others that are strong predictors of difficulties in achieving healthy development; for example, inadequate nutrition, high risk socialization patterns.

Important policy factors in development include developing positive relationships, experiencing success and developing self-esteem.

We need to take these types of development considerations into account if we are to build a society in which all young people are able to thrive.

• (1710)

Health Canada is working to make this possible. Programs such as prenatal nutrition and aboriginal headstart are breaking down many of the barriers to a healthy development.

With a population optic on these issues and key investments targeted early in life, we will achieve much to reverse some of society's most ingrained problems.

Health Canada has therefore a major role to play in improving Canadian society. Proof of these important efforts lies in the high quality of life Canadians continue to enjoy despite the rigours of the economic climate of today, the quality of which is unrivalled in the world and will do much to strengthen the federation as we proceed to implement the important post referendum change agenda.

I come from a rural riding. In that riding medicare is important but with the changes we have, the changes in technology for instance, practitioners and people with experience could use video conferences. We will be recruiting very young, good positions and finding ways to look after rural ridings.

The Acting Speaker (Mrs. Maheu): Is the House ready for the question?

Some hon. members: Question.

The Acting Speaker (Mrs. Maheu): The question is on the amendment. Is it the pleasure of the House to adopt the amendment?

[*Translation*]

Some hon. members: Agreed.

Some hon. members: No.

The Acting Speaker (Mrs. Maheu): All those in favour will please say yea.

Some hon. members: Yea.

The Acting Speaker (Mrs. Maheu): All those opposed will please say nay.

Some hon. members: Nay.

The Acting Speaker (Mrs. Maheu): In my opinion the nays have it.

And more than five members having risen:

The Acting Speaker (Mrs. Maheu): Call in the members.

And the division bells having rung:

The Acting Speaker (Mrs. Maheu): Pursuant to Standing Order 45(5)(a), a recorded division on the motion before the House stands deferred until 6 p.m. today, at which time the bells to call in the members will be sounded for not more than 15 minutes.

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[English]

MANGANESE BASED FUEL ADDITIVES ACT

Hon. Michel Dupuy (for the Minister of the Environment, Lib.) moved that Bill C-94, an act to regulate interprovincial trade in and the importation for commercial purposes of certain manganese based substances, be read the third time and passed.

Mrs. Karen Kraft Sloan (York—Simcoe, Lib.): Madam Speaker, I will explain to the House what is in Bill C-94 and why we are taking immediate action against MMT. I will also respond to some of the misplaced concerns expressed by members of the opposition as well as identify why the government is addressing the MMT question.

As many members are now aware, MMT is a manganese based fuel additive used to increase the octane rating of gasoline. It has been used in Canada since 1977 as a replacement for lead in unleaded gasoline. Lead was phased out of virtually all Canadian gasoline by 1990. Canada is one of the few countries that use MMT. The United States banned it from unleaded gasoline in 1978.

Gasoline containing MMT adversely impacts the operation of sophisticated onboard diagnostic systems. These OBD systems are important because they monitor the performance of emission control components in vehicles.

The auto industry has made the decision that it will no longer accept the risk of increased warranty repair costs caused by MMT related damage.

• (1715)

Some companies have even indicated they will disconnect the OBD systems in whole or in part and may reduce Canadian vehicle warranty coverage starting with the 1996 model year if MMT continues to be used in Canadian gasoline. That means the increased cost of maintaining these systems would be passed on directly to the Canadian consumer.

The Canadian Automobile Association is a 3.7 million member consumer advocate organization for automobile owners. During its presentation to the standing committee it articulately outlined concerns facing Canadians both environmentally and economically. It stated that MMT is a heavy metal based fuel additive. When the sensors of the OBDs are coated with the heavy metal they cannot properly detect oxygen.

It is easy to see then that when sensors give a false reading, the warning light signals the motorist and the motorist would bring the car in for unnecessary warranty covered repair work. This cost will undoubtedly be transferred to the consumer down the road in the form of higher automobile sale prices, making

already difficult car purchases an impossibility for many prospective car buyers.

Because the new OBDs are an advanced system of detection that catches ignition problems as soon as they fall below standard, the CAA states that the new system of OBDs will be one of the best things that could happen to cars from an environmental perspective, and if MMT would reduce its effectiveness, CAA wholeheartedly endorses a ban on the substance.

Consumers will opt not to use MMT in their fuel. The Reform Party is against this ban. The Reform Party should remember to represent its constituents and not take the position of defending a special interest lobby group against the wishes and protection of the people of Canada.

Who is the Reform Party standing up for, Ethyl Corporation, an American based firm which is the sole manufacturer of MMT? Ethyl Corporation manufactures MMT in the U.S. and ships it to Canada.

The Reform Party claims there is no reason for this bill. It says the minister is unilaterally pushing the legislation through. This process began under the previous government, which saw the necessity to examine the MMT question.

Last October the Minister of the Environment urged both the automotive and petroleum producing industries to voluntarily resolve the issue of MMT in Canada by the end of 1994, otherwise the government would take action. This deadline was subsequently extended into February of this year to review automobile and petroleum industry proposals.

The matter was not resolved and so the federal government has had to step in. The result is Bill C-94. The MMT issue is no longer an industry dispute and this is important to understand. Its outcome can affect the vehicle emissions programs we are putting into place. It could also negatively impact the automotive sector which would pass the newly incurred costs on to the Canadian consumer.

Some members of the House have gone so far as to suggest MMT creates great benefits for Canada's environment. They suggest that nitrous oxide emissions are reduced by 20 per cent when MMT is used. What they do not say is that this claim is based on data collected by Ethyl Corporation, the makers of MMT, from test cars that were driven 50,000 to 110,000 miles. This was then extrapolated to 195,000 miles.

This does not take into consideration the adverse wear and tear of the automobile which is degraded over time. Because of this it has been determined that there has been no rigorous scientific basis for applying the Ethyl Corporation's average emission values to Canada-wide projections.

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When examined in the context of the current Canadian fleet, Environment Canada's analysis indicates that NO_x reduction would be only about 5 per cent. This has been substantiated by the University of Waterloo institute for improvement in quality and productivity. The report also indicates that the results of a study by Ethyl Corporation on reduction of NO_x emissions greatly overestimates the reductions in NO_x.

The Ethyl Corporation experiments have not been shown to be representative of field vehicle use, and the scientific rigour of the experiments is uncertain.

Ethyl's research was conducted and presented by a private consultant from the U.S. When I asked about the extreme differences in statistical data between the Ethyl Corporation report and the University of Waterloo analysis, she replied: "Statistics is not an exact science. There isn't only one right way to look at a set of numbers".

• (1720)

As every member of the House knows, the University of Waterloo is a Canadian university whose research is of national and international acclaim. The University of Waterloo does not have a particular vested interest, being a public university. So whose interpretation of the statistics is more likely to be in the public interest?

What would the Reform Party know about scientifically proven environmental concerns? Very little. This is the same Reform Party whose member for Swift Current—Maple Creek—Assiniboia stated earlier in the House: "There is an awful lot of voodoo science around with respect to the effects of man made carbon dioxide on global warming". Can anyone believe this? Voodoo science?

I am continuously shocked by statements made by the Reform members who choose to ignore accepted realities. Of the 196 living Nobel Laureate scientists 99 along with roughly 2,000 other world scientists jointly signed an urgent warning to humanity. In their declaration they appealed to the people of the world to take immediate action to halt the accelerating damage threatening humanity's global life support systems.

I quote from their media release when I say human activities may so alter the living world that it will be unable to sustain life in the manner we know. A great change in our stewardship of the earth and the life on it is required if vast human misery is to be avoided. This kind of consensus is truly unprecedented.

The urgent appeal goes on to say that no more than one or a few decades remain before the chance to revert the threats we now confront will be lost and the prospects for humanity immeasurably diminished.

The Reform Party openly scorns the leading scientists of our planet. Voodoo science? Is the Reform Party suggesting the Nobel Prize is a mystical, voodoo award?

To return to the claim by Ethyl Corporation of a 20 per cent reduction of NO_x emissions, if this 20 per cent reduction claim

were true, why would the people who make cars in this country be working hard to make onboard diagnostic systems so advanced if MMT fuel could do the job by itself? The reason they are working hard is simple. MMT does not provide the answers to NO_x reduction that its makers claim. Let us be very clear about this.

Los Angeles has some of the worst pollution problems in North America. California has taken strong action against environmental pollutants, including a ban on the use of MMT. If MMT is what Ethyl Corporation and the Reform Party advocate as a product to reduce NO_x emissions, perhaps they should consider why the state of California has acted decisively on the issue.

Canada is one of the few countries that uses MMT. While we are on the topic, some members opposite are citing a recent U.S. court hearing in favour of the Ethyl Corporation, the producers of MMT. MMT will still be banned in California and in those states that require federal reformulated gasolines to be used. That means 30 per cent of the United States will continue with the ban on the use of MMT in fuel.

Furthermore, witnesses have told the committee that given the negative consumer attitudes toward MMT it is very likely consumers will demand to use MMT free gasoline, just as the consumers have chosen to use unleaded gasoline. What is more, we have yet to see if the U.S. government will appeal the decision.

Some members opposite also quite conveniently fail to talk about what the onboard diagnostic system does and what can happen if and when MMT causes the system to fail. Onboard diagnostic systems are designed to monitor the performance of pollution control systems, in particular the catalytic converter, and alert the driver to malfunctions.

If the OBD system is not working a 50 per cent reduction in the efficiency of the catalyst translates into a twofold increase in emissions compared with a properly functioning vehicle. What we are talking about is the failure of new emissions technology in automobiles resulting in increased car emissions harmful to our environment.

Let us also be clear about the economic impact of removing MMT. Some members of the House have suggested the cost would be in the billions of dollars. In fact the costs will be small for the entire petroleum industry. Estimates of the costs of MMT removal provided by the industry itself range from \$50 million to \$83 million per year which means an additional one-tenth to one-quarter of a cent per litre increase at the pumps.

• (1725)

Furthermore, likely alternatives to MMT would be produced in Canada, creating more jobs and opportunities for Canadians, whereas MMT is produced exclusively in the U.S. My question to the members of the Reform Party is why are they opposing this bill? Whose interests are they protecting?

The bill has a number of important improvements for Canadians. Here are some of the key highlights of the bill. It will prohibit the import or interprovincial trade for a commercial purpose of MMT or anything containing MMT. It will give the minister the power to authorize exceptions for MMT that will not be used in unleaded gasoline subject to a monitoring requirement. Coverage of the act can be expanded by order in council to cover other manganese based substances used in automotive fuel.

The act is binding on all persons and entities including the federal and provincial governments. The enforcement tools are similar to those in the Canadian Environmental Protection Act. The penalties are strict. For the unauthorized import or interprovincial trade of MMT the maximum penalty on summary conviction is a \$300,000 fine and/or six months in jail, and on indictment the maximum fine is \$1 million and/or three years in jail. For knowingly providing false or misleading information on the importation or interprovincial trade of MMT the penalties are the same but with a maximum of five years in jail instead of three on indictment.

On conviction, as in CEPA, the court can also order an additional fine equal to the monetary benefits resulting from the offence, prohibit conduct that may lead to a repeat offence and direct the offender to notify third parties about the conviction.

In summary, we have two polarized positions on this issue. On one hand, over 20 automotive manufacturers, competitors, independently came to the same conclusion that MMT is harmful to OBD systems on their cars, OBD systems that are necessary to reduce emissions. The CAA, a consumer advocate organization, supports this position. A report from the University of Waterloo supports its claims with regard to NOx emissions. It has undertaken a considerable amount of work to prepare its support of the ban. If MMT really reduced NOx in the quantities suggested by Ethyl Corporation it could reduce emissions for the automotive manufacturers for free.

On the other hand, we have an American company, the sole manufacturer of MMT, holding an opposing position. I remind the House that Ethyl Corporation fought against the reduction of lead in gasoline in 1984.

This legislation is for Canadians. It is to protect Canadians from increases in automobile prices. It is legislation to protect

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our environment by ensuring the effective use of new, advanced onboard diagnostic systems for cleaner exhaust emissions. It is my commitment to the people of York—Simcoe for a better community.

[Translation]

Mrs. Monique Guay (Laurentides, BQ): Madam Speaker, we are now at third reading of Bill C-94, an act to regulate interprovincial trade in and the importation for commercial purposes of certain manganese-based substances.

This bill is more directly aimed at prohibiting the commercial use of MMT in Canada. MMT is added to gasoline to raise its octane level, and, consequently, to improve engine performance. The Minister of the Environment reached this decision on April 5, and today we are being asked to vote on the decision to ban the use of MMT in Canada.

But the minister has not been very convincing in this matter. Indeed, there are many questions on this bill, which remain unanswered, and the minister totally refuses to look at them. She is dismissing all other analyses, studies and solutions put forward. It cannot be said that open-mindedness and a sense of conciliation are the strongest qualities of the Minister of the Environment, who is also Deputy Prime Minister.

In this case, as in many others, the minister has decided and stands firm, in spite of the strong opposition of the petroleum industry and Ethyl, the company producing MMT. The minister is closing her eyes and seems to be simply responding to the carmakers' lobby which, strange coincidence, is concentrated in her part of the country.

• (1730)

I am not saying that the automotive industry does not have valid reasons or arguments for not wanting MMT in its vehicles. I am simply saying that the minister is leaning to one side and that she does not listen to the arguments of the other side. But this attitude on the part of the Minister of the Environment is not new. In many other instances, she has acted the same way.

There is, among others, the ongoing and very disturbing case of the *Irving Whale*. Once more, the minister, through her lack of openness which, in my opinion, looks more and more like a lack of competence, is creating very serious problems that threaten the environment. The issue of the *Irving Whale*, a total fiasco, is a case in point.

By refusing to take into account studies made by Marex and CEF, the minister has embarked on an adventure which is dangerous for the environment of the gulf and which has already cost \$12 million. This amount represents the total cost initially forecasted and the barge still lies on the bottom of the gulf.

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It must be pointed out that the method chosen is not the safest one. The operations we saw this summer proved it and smacked of amateurism. I would also underline that the barge is still leaking, now more than ever. According to a report of the Canadian Coast Guard, more than 500 litres have recently leaked from the wreck.

The Acting Speaker (Mrs. Maheu): The hon. member for Davenport on a point of order.

Mr. Caccia: Madam Speaker, I am sorry to interrupt, but I believe that the hon. member is not dealing with the bill presently before the House, Bill C-94.

The Acting Speaker (Mrs. Maheu): I believe you have raised a matter of debate.

Mrs. Guay: Madam Speaker, there are facts which have to be brought to light and this is part of the bill. The minister does not want to go further on this issue as in the case of the bill we are debating today. She stubbornly refuses to be further advised on such important decisions that have to be taken. Her reasons for refusing any new course of action clearly appear to be unfounded.

I would even go further and say that the minister definitely shows her bad faith on many issues, as we saw during Question Period in recent days. Her answers to questions relating to the environment showed her ignorance and incompetence. All she tells us, and I think it is totally childish and silly, is that, when he was Minister of the Environment, Mr. Bouchard, our leader, said this and that, did this, did not do that, and so on. This is how the minister has been answering our questions for the last two years.

Come on. Let us be serious and exercise a little intellectual rigor. On any other question, she is big on quotes, which proves that she is no authority and misinformed on important issues. Frankly, I think that such behaviour from a deputy prime minister is quite alarming.

As for the *Irving Whale*, she rejects the solution recommended in the Marex study, although it was commissioned by her department and the Coast Guard—

The Acting Speaker (Mrs. Maheu): I recognize the hon. member for Davenport on a point of order.

Mr. Caccia: Madam Speaker, I am sorry but again I must remind the member that the bill is about gasoline and the manganese content of gasoline. It is not about the *Irving Whale*. I invite the member to discuss the bill—

The Acting Speaker (Mrs. Maheu): Again, this is a matter of debate.

Mrs. Guay: Madam Speaker, as for the *Irving Whale*, the minister says she rejects the solution recommended in the Marex study, although it was commissioned by her department and the Coast Guard, because, according to her, this firm has financial interests in the pumping method it recommended.

Last week, after last summer's failed refloating attempt that cost us \$12 million, the minister said she was rejecting the offer

to strike an expert panel to review the issue, made by the Société pour vaincre la pollution, or SVP, on account of Daniel Green's financial interest in this proposal. I recall that, last year, the minister went as far as claiming in this House that SVP had gone bankrupt. She has some nerve. What is obvious is that the minister is always trying to discredit those who think differently from her in order to compensate for and hide her incompetence and lack of action in several areas

Discrediting is what the minister does best. On another—

• (1735)

The Acting Speaker (Mrs. Maheu): Order, please. The member for Davenport, on a point of order.

Mr. Caccia: Madam Speaker, again I am sorry, but it seems to me that we must adhere to the rule of relevancy. We are debating Bill C-94.

The Acting Speaker (Mrs. Maheu): I would ask the member to make a connection between her comments and the bill before us.

The member for Gaspé, on a point of order.

Mr. Bernier (Gaspé): Madam Speaker, currently the Bloc Québécois is the official opposition in Ottawa. Whether they like it or not, people will have to listen to what we have to say. The member for Davenport is simply filibustering.

The Acting Speaker (Mrs. Maheu): This is not a point of order.

Resuming debate. The member for Laurentides.

Mrs. Guay: Madam Speaker, if I was allowed to make my speech, the connection with Bill C-94 would become obvious; I would ask the member for Davenport to listen for once and stop his filibustering during my speech. I will respect his to the extent he will respect mine. Allow me to continue.

To another question I was asking him regarding—

Mr. Caccia: It is about time.

Mrs. Guay: Madam Speaker, could you call the member to order and ask him to show some respect?

The Acting Speaker (Mrs. Maheu): Order, please.

Mrs. Guay: I can go on then. I asked the minister another question concerning the ban on PCB exports to the United States. The minister said in this House that she was making representations to the EPA, the U.S. Environmental Protection Agency.

A few days later, we received confirmation from the chair of the hearings on the PCB issue that the EPA had never heard from our environment minister on that issue, in spite of the invitation extended by the EPA to the minister. Just smoke and mirrors once again, Madam Speaker.

Government Orders

Why is the minister saying such poppycock? Does she really think Canadians are that naive?

It is easy to see that environmental stakeholders are disenchanted with the minister's performance. She who was to be the great champion of the environment became the great speech-maker on the environment instead. As we say in Quebec, she is all talk and no action.

Bill C-94 follows this erroneous way of—

The Acting Speaker (Mrs. Maheu): The hon. member for Peterborough, on a point of order.

[*English*]

Mr. Adams: Madam Speaker, I rise on a point of order. I listened to part of this speech on television and I have just arrived in the House. I was under the impression that we were debating Bill C-94, the Manganese based Fuel Additives Act. I wonder if I have arrived at the wrong time.

[*Translation*]

The Acting Speaker (Mrs. Maheu): I would ask the member to make sure her comments relate to Bill C-94.

The hon. member for Gaspé, on a point of order.

Mr. Bernier (Gaspé): Madam Speaker, two liberal members have now interrupted my colleague. She is doing a good job.

The Acting Speaker (Mrs. Maheu): This is not a point of order either.

The hon. member for Laurentides.

Mrs. Guay: Madam Speaker, I will go on until my speech is finished.

Bill C-94—I hope this will please my colleagues—is just one more example of this improper way of doing our best. The minister started out with an idea and she will not change her mind, even if her idea is not the best one. It is impossible to go any further with other studies and analyses. The minister said no, and her no is irrevocable. Yet, there is room for debate on the issue of MMT. Let us look at the arguments both sides are making, and try to find the best route to follow.

First, we will talk about the MMT lobby, which is composed of oil companies and Ethyl Corporation. This lobby came to defend MMT before the standing committee, besides meeting many members of Parliament.

The MMT lobby tells us that by removing this additive from gasoline, we will aggravate the problem of urban smog, since we are increasing the nitrogen oxide emissions by 20 per cent. Health Canada studies indicate that the MMT additive does not constitute a major threat for human health.

• (1740)

Independent laboratory experiments prove that, contrary to the statements made by the automobile lobby, MMT used in Canada is totally compatible with the new onboard diagnostic systems for pollution control, the OBD-II systems.

Also according to the MMT lobby, the U.S. Environmental Protection Agency should reintroduce this additive very soon in that country. In fact, under an October 20 ruling by the United States Court of Appeal, District of Columbia, in the case Ethyl v. Browner, chief administrator of the EPA, the EPA has been compelled to register MMT as an additive for unleaded gasoline, something the EPA had refused to do until now. In its ruling, the court stated:

[*English*]

On November 30, 1993 the EPA found that MMT had no adverse effects on automobile emission control systems.

[*Translation*]

Consequently, the EPA was recognizing de facto that MMT did not adversely affect pollution control systems. At the refining stage, MMT allows to reduce some polluting emissions. It would cost refineries about \$100 million in capital and about \$10 million in operating expenses to replace MMT. Plants would then have to extend the whole refining process. Extra refining costs more money and pollutes more.

So, these are essentially the arguments made by the MMT lobby. I want to emphasize that, to substantiate its arguments, only Ethyl Corporation made a series of experiments on the effect of MMT on vehicle pollution control devices. You tell us that those tests go back quite some time and that the same components are no longer used? That may be, but Ethyl was the only one to conduct those tests, which seem to prove that MMT does not gum up the systems.

Furthermore, the carmakers' lobby claims that MMT affects the emission control system and more specifically the electronic pollutant detection system. In concrete terms, this system uses a light to indicate that your car's emission control device is defective.

However, there is no scientific evidence to sustain the theory of MMT causing a malfunction of this light. The carmakers' lobby tells us they have evidence, but they have made nothing public to prove it. Besides, the industry in the United States is only just beginning to conduct scientific tests to support its claims.

To bring more pressure to bear, the minister, together with the carmakers' lobby, is claiming that it could cost as much as \$3,000 more to buy a car, that guarantees could be reduced, and even that the famous detection device could be disconnected.

Government Orders

After checking recently, we found that the guarantees on 1996 cars have not yet been changed, contrary to what the minister was claiming. This pressure can be seen as a form of blackmail on the part of the industry, but according to the minister, it is serious.

The other major argument used by the minister has to do with the harmonization of fuel standards in Canada with those in the United States. Now, as we saw earlier, the U.S. could very soon have the same MMT rates that we presently have in Canada. Some even talk about next December, when close to 50 per cent of American refineries could use MMT.

If this should happen, the minister, who is now talking about harmonization, would look rather silly. Why not wait a few weeks and see what happens in the United States? This is what both sides are saying.

The minister, who naturally tends to lean towards the car manufacturers' lobbyists, has decided to order this ban, not because of the toxic or polluting effects of the MMT on health, but because of its impact on a new electronic system being used in cars.

MMT in itself is not recognized as a toxic or hazardous product as evidenced by the fact that the minister cannot regulate the use of this product through the Canadian Environmental Protection Act, or CEPA, which deals with toxic substances. The minister has no other alternative but to pass a specific act on the sale of this product.

In her press release dated April 5, the minister indicates that this decision follows almost two years of discussions between the oil industry and the automotive industry. One can wonder about the relevancy of these discussions and their true value, since the minister has warned both parties that, if they did not come to an agreement, an act banning MMT would be passed.

• (1745)

In saying so, was the minister not telling the automotive industry: "There is no need to discuss this much further, since I support your position and will legislate on this matter."

Again, the minister was showing her clear support for the automotive industry, which does not want to use MMT anymore and does not seem to support any of the fuel additives. Therefore, I wonder what will happen to ethanol, a favourite among additives, for which the government has recently set up a \$70 million investment program.

If the automotive industry does not want to hear about additives, why would the government want to develop such a product? What a blatant inconsistency it is to ban one additive while speaking of developing another one, when the automotive industry does not want any additives at all.

How can we be sure that the automotive industry will not soon ask the government to ban ethanol because of its negative effects on a component or some equipment used in their cars? It is certainly not easy to rule in favour of one side or the other. The arguments used look valid. However, the ball is now obviously in the court of the automotive industry and of the minister who, once again, has not done her homework in a responsible and transparent manner.

Granted, the automotive industry knows these systems well but its concerns about the effects of MMT are not based on scientific studies. It is important to note that the automotive industry has made great progress in the exhaust emission control over the past 25 years. According to a study by the Canadian Automobile Association, the adoption of emission standards has greatly improved air quality. Indeed, the study reveals that, for every kilometre driven, a 1970 model polluted as much as 20 cars made in 1995. As far as I know, all this progress has been made in spite of the presence of MMT in fuel.

One can give the benefit of the doubt to the automotive industry as the minister does, but that does not seem enough. I firmly believe that it would be a great mistake to always give the benefit of the doubt on environmental issues.

One needs accurate information to make the best decisions. One must not be afraid to ask for more. On environmental issues, asking for too much is better than asking for too little. It is the future of this planet that is in jeopardy, the survival of our children. Care must be taken not to make decisions lightly and without sufficient justification.

The minister has not done so, right from the beginning of her mandate. I would like to quote an article over the byline of Terrence Corcoran in the *Globe and Mail* of October 21, headlined "Sheila Galileo meets MMT". It reads as follows:

[English]

Scientific rigour has never been at the heart of the environment movement, nor does it appear to be the first love of Canada's Environment Minister—In a speech last Monday, Ms. Copps demonstrated her scientific flair by accusing all who doubt the existence of the greenhouse effect as "the same kind of people who rejected Galileo".

Now there's nothing deeply offensive about that accusation, except that it came from Ms. Copps midway through a speech in which any kind of science, let alone good science, was totally ignored. Speaking to the international panel on climate change in Montreal, Ms. Copps reviewed a list of "weather events from this summer documented by scientists" to prove the existence of the greenhouse effect.

Space does not permit a full rundown, but here are some of the items identified by Sheila Galileo as evidence for the greenhouse effect: the second worst year in history for forest fires; record rains in Alberta; record electricity production in Ontario; the death of a half million chickens and turkeys on one August weekend; wind damage on every property in Oxbow, Saskatchewan; a record number of icebergs floating off Newfoundland; a steady stream of migraine sufferers, heart patients and asthmatics admitted to hospital emergency departments.

Government Orders

Ms. Copps said “these are facts provided by Canada’s leading scientists”. Could be, although the list looks more like the output of a good newspaper clipping service.

There’s already evidence that bad science, or no science at all, drives environmental politics in Canada, and Ms. Copps is at the leading edge of the movement. Indeed, her department and the entire Government of Canada are now up to their test tubes in a murky scientific and political game they’ve been playing over a gasoline additive called MMT. In the wake of a ruling yesterday by a Washington court over MMT use in the United States, there’s now a good chance that Ottawa’s entire fuel emissions program is about to go up in a cloud of smoke, the victim of scientific and political negligence.

● (1750)

[*Translation*]

End of quote, Madam Speaker.

So much for the scientific rigour of the Minister. In light of the information available at this time, and recent developments in the US, I feel that delaying adoption of this bill is mandatory. It seems vital for studies by independent experts to be carried out to set us completely straight, so that we will have a clear idea of the impact of MMT—and why not of any other additive such as ethanol—on pollution control systems. This would be a more appropriate and more reasonable approach as things stand at the present time.

When the Minister of the Environment is constantly speaking of harmonization, bragging that this is what her policy is all about, a lot of questions come to mind. Canada is composed of provinces, each of which has an environmental policy, each of which has different needs depending on its industries. Our environment must be constantly improved, and I am convinced they are all aware of that.

In Quebec, the environment is the third-ranking priority after jobs and health. The minister must learn how to listen to people instead of stubbornly dictating her philosophies to them. The mistakes in the Department of the Environment have done nothing but constantly increase under her leadership. Her reputation as a brawler was normal when she was in the opposition. But now that she is in power, it is her duty to examine issues thoroughly, carry out studies when uncertain, and harmonize with the provinces, in other words forget all that stuff about sustainable development and the environment.

Let the minister show us, and prove to us, her true desire to make positive and realistic pro-environment decisions, not politically dictated ones. It is obvious that she seems determined to move this bill through at any price. We cannot support it, therefore, because we feel it lacks a large number of elements for banning MMT in Canada. In the aftermath of the American decision of October 20, we find it extremely difficult to support a bill that will no longer harmonize in the least with the US decisions.

Madam Minister, get back to your books, and you can write a makeup test later on.

[*English*]

Mr. David Chatters (Athabasca, Ref.): Madam Speaker, I rise again to take part in the debate on Bill C-94.

First I thank all the witnesses who came before the committee to discuss and make presentations on this subject. It really was unfortunate that it was apparent right from the introduction of the bill and the hearings in committee that members of the government were not really interested in hearing, listening or learning any of the facts behind the issue. They were destined to support the political agenda of the Minister of the Environment or they would face the wrath of the minister. We on this side of the House certainly know how intimidating that can be.

From the very beginning it was apparent to me that either one side or the other on this issue was distorting the facts brought before us. Therefore my staff and I spent the summer doing extensive research into the issue. The more we studied, the more convinced we became that the minister was not so much concerned about protecting the environment as she was about fulfilling a political commitment.

I will review some of the facts that led me to this conclusion. On the issue of the onboard diagnostic computer system, the contention brought out in committee was the question of whether or not MMT gums up the OBD II systems.

In December 1993 following the largest fuel additive testing program in the history of the U.S. EPA, it was concluded that the use of MMT would not cause or contribute to the failure of any emission control device or system including onboard diagnostic systems.

● (1755)

The EPA, the U.S. court and subsequently the U.S. Court of Appeal rejected concerns about the impact of MMT on OBD systems as presented by U.S. automakers. U.S. automakers have experienced significant difficulties with the certification of OBD systems in United States where MMT is not currently used in unleaded gasoline.

The U.S. EPA and the California Air Resources Board have recently changed their regulations to allow for certification of vehicles that do not comply with the OBD II requirements. The U.S. EPA stated in the federal register that automobile manufacturers have expressed and demonstrated difficulty in complying with every aspect of the OBD requirements. Such difficulty appears likely to continue into 1996 and 1997 model years.

Government Orders

In Canada, the Motor Vehicle Manufacturers' Association appears to be blaming OBD II system difficulties on MMT. MVMA members have lobbied the Canadian government threatening to disconnect OBD warning systems and pass costs on to consumers unless the government passes legislation to ban MMT. The Canadian government appears to have responded to the threats without noting that vehicle manufacturers have failed to achieve OBD II certification in the U.S. for most new car models.

Furthermore I should like to know how the minister could explain her statement that if vehicle manufacturers carry through on threats to remove OBD systems it would result in a tenfold increase in vehicle emissions. This is simply representative of the rhetoric coming from the minister and from that side of the House with no real facts to back up those statements. This false claim shows a fundamental misunderstanding of the technical issues involved and underlines the need for an independent technical assessment of the MVMA claims.

OBD systems do not reduce emissions on vehicles. OBD is a monitoring system designed to notify the driver when emission control equipment does not operate properly. Removal or more likely the disconnection of OBD systems would only serve to prevent a dashboard malfunction indicating light from illuminating, which is exactly what is happening already in the United States without MMT. No emission control equipment would be removed from the vehicle.

The issue of sparkplug failure was used by the minister with great gusto to demonstrate her reason for banning MMT. General Motors Canada has claimed that MMT is responsible for warranty claims for sparkplug failure being 17 times higher in Canada than in the U.S. It is alleged that higher claims are due to manganese deposits on sparkplugs causing the plug to arc under certain conditions from electrode to the outer shell rather than from electrode to electrode.

Arcing leads to sparkplug misfire which can contribute to drivability problems. The Minister of the Environment has cited these claims to help justify her proposed legislation to remove MMT. However she failed to point out that automakers' claims related to one type of platinum tipped sparkplug used primarily in a one-engine version used in GM automobiles. The sparkplug in question was discontinued by GM indicating the problems were related to the design of the plug, not MMT. No casual link was ever established between MMT and sparkplug problems and no warranty data have ever been made public.

To further assess the validity of GM's concerns independent testing was conducted by the Southwest Research Institute in San Antonio, Texas, using the platinum tipped long life plugs used in all 1994 2.2 Chevrolet Cavaliers. The goal of the study initiated with General Motors Corporation in the U.S. was to

determine the differences between new sparkplug failures and the plugs were provided by GM.

The sparkplugs were fired under a power supply that increased output to the plugs in a ramped manner. Current leakage until the plugs fired was measured and movies were taken to document whether arcing occurs between electrodes or from electrode to shell.

* * *

**AGREEMENT ON INTERNAL TRADE
IMPLEMENTATION ACT**

The House resumed from November 2 consideration of the motion that Bill C-88, an act to implement the agreement on internal trade, be read the second time and referred to a committee.

The Acting Speaker (Mrs. Maheu): It being six o'clock, pursuant to Standing Order 45, the House will now proceed to the taking of the deferred division at second reading of Bill C-88.

Call in the members.

[*Translation*]

(The House divided on the motion, which was agreed to on the following division:)

(*Division No. 365*)

YEAS

Members

Adams	Alcock
Allmand	Anawak
Anderson	Assadourian
Augustine	Baker
Bakopanos	Barnes
Bélair	Bélanger
Bellemare	Bertrand
Bethel	Bhaduria
Bodnar	Bonin
Boudria	Brown (Oakville—Milton)
Brushett	Bryden
Caccia	Calder
Catterall	Cauchon
Chamberlain	Clancy
Cohen	Collenette
Cowling	Culbert
DeVillers	Dingwall
Discepolo	Dromisky
Duhamel	Dupuy
Easter	English
Fewchuk	Finlay
Flis	Fontana
Fry	Gaffney
Gagliano	Gagnon (Bonaventure—Îles-de-la-Madeleine)
Galloway	Gerrard
Godfrey	Goodale
Gray (Windsor West/Ouest)	Guarmieri
Harper (Churchill)	Harvard
Hopkins	Hubbard
Ianno	Irwin
Jackson	Keyes
Kirkby	Knutson
Kraft Sloan	Lastewka
Lavigne (Verdun—Saint-Paul)	LeBlanc (Cape/Cap-Breton Highlands—Canso)
Lee	Loney
MacAulay	MacDonald
Maloney	Marchi
Massé	McCormick
McGuire	McKinnon

Government Orders

McLellan (Edmonton Northwest/Nord-Ouest)
Mifflin
Mills (Broadview—Greenwood)
Mitchell
Murray
O'Brien
Ouellet
Payne
Phinney
Proud
Regan
Robichaud
Rock
Sheridan
St. Denis
Szabo
Tobin
Ur
Vanclief
Walker
Whelan
Young—121

McTeague
Milliken
Minna
Murphy
Nault
O'Reilly
Paradis
Peric
Pickard (Essex—Kent)
Reed
Ringuette—Maltais
Robillard
Shepherd
Simmons
Stewart (Brant)
Terrana
Torsney
Valeri
Verran
Wells
Wood

Leroux (Shefford)
Maclaren
Malhi
Marleau
Ménard
Paré
Pomerleau
Scott (Fredericton—York—Sunbury)
Stewart (Northumberland)
Tremblay (Rimouski—Témiscouata)
Venne

Lincoln
MacLellan (Cape/Cap-Breton—The Sydneys)
Manley
McWhinney
O'Brien
Peters
Rideout
St-Laurent
Thalheimer
Tremblay (Rosemont)
Verran

The Acting Speaker (Mrs. Maheu): I declare the motion carried. The bill is therefore referred to the Standing Committee on Industry.

(Bill read the second time and referred to a committee.)

* * *

[English]

NATIONAL HOUSING ACT

The House resumed from November 3 consideration of the motion that Bill C-108, an act to amend the National Housing Act, be read the second time and referred to a committee; and of the amendment.

The Acting Speaker (Mrs. Maheu): Pursuant to Standing Order 45, the House will now proceed to the taking of a deferred division on the amendment to Bill C-108, an act to amend the National Housing Act.

The question is on the amendment.

Mr. Boudria: Madam Speaker, if you were to seek it I believe you would find unanimous consent that those members who were present for the vote on the previous motion be recorded as having voted on the motion now before the House, with Liberal members voting nay on the amendment to second reading of Bill C-108.

[Translation]

Mr. Duceppe: Members of the Bloc Québécois also oppose this amendment.

[English]

Mr. Ringma: All real Reformers will vote yes to the amendment, Madam Speaker.

Mr. Blaikie: Madam Speaker, all real New Democrats will vote no.

Mr. Bhaduria: Madam Speaker, I will be voting against this amendment.

(The House divided on the amendment, which was negated on the following division:)

(Division No. 366)

YEAS

Members

Beaumier
Bergeron
Blondin—Andrew
Campbell
Canuel
Chan
Crawford
Dalphond—Guiral
Dhaliwal
Dumas
Gauthier
Grose
Jacob
Langlois
Lebel
Lefebvre

Bélisle
Bernier (Mégantic—Compton—Stanstead)
Bouchard
Cannis
Caron
Collins
Crête
Debien
Dubé
Finestone
Godfrey
Harb
Jordan
Laurin
Leblanc (Longueuil)
Leroux (Richmond—Wolfe)

Ablonczy
Breitkreuz (Yorkton—Melville)
Chatters
Epp
Gilmour
Grey (Beaver River)
Hanrahan
Hart

Benoit
Bridgman
Cummins
Frazer
Gouk
Hanger
Harper (Simcoe Centre)
Hill (Prince George—Peace River)

NAYS

Members

Ablonczy
Asselin
Bellehumeur
Bernier (Gaspé)
Breitkreuz (Yorkton—Melville)
Brien
Chrétien (Frontenac)
de Savoye
Duceppe
Fillion
Gagnon (Québec)
Gouk
Guay
Hanger
Harper (Simcoe Centre)
Hill (Prince George—Peace River)
Johnston
Landry
Marchand
Mercier
Morrison
Penson
Ramsay
Robinson
Sauvageau
Silye
Speaker
Thompson
Williams—57

Althouse
Bachand
Benoit
Blaikie
Bridgman
Chatters
Cummins
Deshaies
Epp
Frazer
Gilmour
Grey (Beaver River)
Guimond
Hanrahan
Hart
Jennings
Lalonde
Lavigne (Beauharnois—Salaberry)
McClelland (Edmonton Southwest/Sud-Ouest)
Meredith
Nunez
Picard (Drummond)
Ringma
Rocheleau
Schmidt
Solberg
Stinson
White (Fraser Valley West/Ouest)

PAIRED MEMBERS

Government Orders

Jennings	Johnston
McClelland (Edmonton Southwest/Sud-Ouest)	Meredith
Morrison	Penson
Ramsay	Ringma
Schmidt	Silye
Solberg	Speaker
Stinson	Thompson
White (Fraser Valley West/Ouest)	Williams—32

NAYS

Members

Adams	Alcock
Allmand	Althouse
Anawak	Anderson
Assadourian	Asselin
Augustine	Bachand
Baker	Bakopanos
Barnes	Bélaire
Bélangier	Bellehumeur
Bellemare	Bernier (Gaspé)
Bertrand	Bethel
Bhaduria	Blaikie
Bodnar	Bonin
Boudria	Brien
Brown (Oakville—Milton)	Brushett
Bryden	Caccia
Calder	Catterall
Cauchon	Chamberlain
Chrétien (Frontenac)	Clancy
Cohen	Collenette
Cowling	Culbert
de Savoye	Deshaies
DeVillers	Dingwall
Discepolo	Dromisky
Duceppe	Duhamel
Dupuy	Easter
English	Fewchuk
Fillion	Finlay
Flis	Fontana
Fry	Gaffney
Gagliano	Gagnon (Bonaventure—Îles-de-la-Madeleine)
Gagnon (Québec)	Galloway
Gerrard	Godfrey
Goodale	Gray (Windsor West/Ouest)
Guarnieri	Guay
Guimond	Harper (Churchill)
Harvard	Hopkins
Hubbard	Ianno
Irwin	Jackson
Keys	Kirkby
Knutson	Kraft Sloan
Lalonde	Landry
Lastewka	Lavigne (Beauharnois—Salaberry)
Lavigne (Verdun—Saint-Paul)	LeBlanc (Cape/Cap-Breton Highlands—Canso)
Lee	Loney
MacAulay	MacDonald
Maloney	Marchand
Marchi	Massé
McCormick	McGuire
McKinnon	McLellan (Edmonton Northwest/Nord-Ouest)
McTeague	Mercier
Mifflin	Milliken
Mills (Broadview—Greenwood)	Minna
Mitchell	Murphy
Murray	Nault
Nunez	O'Brien
O'Reilly	Ouellet
Paradis	Payne
Peric	Phinney
Picard (Drummond)	Pickard (Essex—Kent)
Proud	Reed
Regan	Ringuette—Maltais
Robichaud	Robillard
Robinson	Rocheleau
Rock	Sauvageau
Shepherd	Sheridan
Simmons	St. Denis
Stewart (Brant)	Szabo
Terrana	Tobin
Torsney	Ur
Valeri	Vanclief
Verran	Walker
Wells	Whelan
Wood	Young—146

PAIRED MEMBERS

Beaumier	Bélisle
Bergeron	Bernier (Mégantic—Compton—Stanstead)
Blondin—Andrew	Bouchard
Campbell	Cannis
Canuel	Caron
Chan	Collins
Crawford	Crête
Dalphoné—Guiral	Debien
Dhaliwal	Dubé
Dumas	Finestone
Gauthier	Godfrey
Grose	Harb
Jacob	Jordan
Langlois	Laurin
Lebel	Leblanc (Longueuil)
Lefebvre	Leroux (Richmond—Wolfe)
Leroux (Shefford)	Lincoln
Maclaren	MacLellan (Cape/Cap-Breton—The Sydneys)
Malhi	Manley
Marleau	McWhinney
Ménard	O'Brien
Paré	Peters
Pomerleau	Rideout
Scott (Fredericton—York—Sunbury)	St-Laurent
Stewart (Northumberland)	Thalheimer
Tremblay (Rimouski—Témiscouata)	Tremblay (Rosemont)
Venne	Verran

[Translation]

The Acting Speaker (Mrs. Maheu): I declare the amendment negatived.

* * *

DEPARTMENT OF HEALTH ACT

The House resumed consideration of the motion that Bill C-95, an Act to establish the Department of Health and to amend and repeal certain acts, be read the second time and referred to a committee; and of the amendment.

The Acting Speaker (Mrs. Maheu): Pursuant to Standing Order 45, the House will now proceed to the taking of the deferred division on the amendment of Mrs. Picard to Bill C-95, an act to establish the Department of Health and to amend and repeal certain acts.

Mr. Boudria: Madam Speaker, if you were to seek it, I think you would find that the House agrees that all members who voted on the motion previously before the House be deemed to have voted on the motion now before the House. Liberal members will be voting nay on the amendment to Bill C-95.

Mr. Duceppe: Bloc Quebecois members will vote yea on the amendment.

[English]

Mr. Ringma: Madam Speaker, those Reformers who want to will vote yes and those who want to vote no can vote no.

Mr. Blaikie: New Democrats present in the House will vote against the amendment, Madam Speaker.

Mr. Bhaduria: Madam Speaker, I am voting against this amendment.

(The House divided on the amendment, which was negatived on the following division:)

(Division No. 367)

YEAS

Members

Ablonczy	Asselin
Bachand	Bellehumeur
Benoit	Bernier (Gaspé)
Breitkreuz (Yorkton—Melville)	Bridgman
Brien	Chatters
Chrétien (Frontenac)	Cummins
de Savoye	Deshaies
Duceppe	Epp
Fillion	Frazer
Gagnon (Québec)	Gilmour
Gouk	Grey (Beaver River)
Guay	Guimond
Hanger	Hanrahan
Harper (Simcoe Centre)	Hart
Hill (Prince George—Peace River)	Jennings
Johnston	Lalonde
Landry	Lavigne (Beauharnois—Salaberry)
Marchand	McClelland (Edmonton Southwest/Sud-Ouest)
Mercier	Meredith
Morrison	Nunez
Penson	Picard (Drummond)
Ramsay	Ringma
Rocheleau	Sauvageau
Schmidt	Silye
Solberg	Speaker
Stinson	Thompson
White (Fraser Valley West/Ouest)	Williams —54

NAYS

Members

Adams	Alcock
Allmand	Althouse
Anawak	Anderson
Assadourian	Augustine
Baker	Bakopanos
Barnes	Bélaïr
Bélangier	Bellemare
Bertrand	Bethel
Bhaduria	Blaikie
Bodnar	Bonin
Boudria	Brown (Oakville—Milton)
Brushett	Bryden
Caccia	Calder
Catterall	Cauchon
Chamberlain	Clancy
Cohen	Collenette
Cowling	Culbert
DeVillers	Dingwall
Discepolo	Dromisky
Duhamel	Dupuy
Easter	English
Fewchuk	Finlay
Flis	Fontana
Fry	Gaffney
Gagliano	Gagnon (Bonaventure—Îles-de-la-Madeleine)
Galloway	Gerrard
Goodale	Gray (Windsor West/Ouest)
Guarnieri	Harper (Churchill)
Harvard	Hopkins
Hubbard	Ianno
Irwin	Jackson
Karygiannis	Keys
Kirkby	Knutson
Kraft Sloan	Lastewka
Lavigne (Verdun—Saint-Paul)	LeBlanc (Cape/Cap-Breton Highlands—Canso)

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Lee	Loney
MacAulay	MacDonald
Maloney	Marchi
Massé	McCormick
McGuire	McKinnon
McLellan (Edmonton Northwest/Nord-Ouest)	McTeague
Mifflin	Milliken
Mills (Broadview—Greenwood)	Minna
Mitchell	Murphy
Murray	Nault
O'Brien	O'Reilly
Ouellet	Paradis
Payne	Peric
Phinney	Pickard (Essex—Kent)
Proud	Reed
Regan	Ringette—Maltais
Robichaud	Robillard
Robinson	Rock
Shepherd	Sheridan
Simmons	St. Denis
Stewart (Brant)	Szabo
Terrana	Tobin
Torsney	Ur
Valeri	Vanclief
Verran	Walker
Wells	Whelan
Wood	Young—124

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Beaumier	Bélisle
Bergeron	Bernier (Mégantic—Compton—Stanstead)
Blondin—Andrew	Bouchard
Campbell	Canniss
Canuel	Caron
Chan	Collins
Crawford	Crête
Dalphond—Guiral	Debien
Dhaliwal	Dubé
Dumas	Finestone
Gauthier	Godfrey
Grose	Harb
Jacob	Jordan
Langlois	Laurin
Lebel	Leblanc (Longueuil)
Lefebvre	Leroux (Richmond—Wolfe)
Leroux (Shefford)	Lincoln
Maclaren	MacLellan (Cape/Cap-Breton—The Sydneys)
Malhi	Manley
Marleau	McWhinney
Ménard	O'Brien
Paré	Peters
Pomerleau	Rideout
Scott (Fredericton—York—Sunbury)	St-Laurent
Stewart (Northumberland)	Thalheimer
Tremblay (Rimouski—Témiscouata)	Tremblay (Rosemont)
Venne	Verran

● (1830)

[Translation]

The Acting Speaker (Mrs. Maheu): I declare the amendment lost.

*Adjournment Debate***ADJOURNMENT PROCEEDINGS***[English]*

A motion to adjourn the House under Standing Order 38 deemed to have been moved.

PUBLIC WORKS

Mr. Vic Althouse (Mackenzie, NDP): Madam Speaker, on October 19, I questioned the minister of public works regarding some problems over the summer with harassment of a female engineer on the job site outside the Peace Tower.

The ministry of public works subsequent to that harassment rewarded one of the subcontractors with further work, including the whole of the Centre Block. I was wondering why the minister would allow his officials to do that. He replied that “notwithstanding the fact it is beyond the legal ramifications of the Government of Canada in terms of privity of contract, we will ensure this kind of behaviour is not tolerated”.

Since that time it has come to my attention that officials at public works have been closing their eyes to this sort of behaviour for some time. In fact, this same company, Colonial Builders, and Mr. Karmash who is the perpetrator on this site, have been active on other sites in previous summers, including the Kingston military college and the Kingston penitentiary. Harassment of another female engineer took place to the point where her supervisor took over because it was virtually impossible to work with the subcontractor on the site. He would simply have nothing to do with a female on his job site.

Public works should have been aware of this pattern of behaviour, yet it has continued to permit the company and this individual to do work of very great importance since that time, including work on the Parliament Buildings.

Public Works officials have not shown much competence or judgment, not only in this matter but in other matters related to it. The minister is aware that the female engineer’s crew walked off in sympathy with her plight and were left being owed approximately \$165,000. Public works officials have not acted there either.

In order to receive pay for work completed, the contractor and subcontractor have to fill out statutory declarations. They swear that all work they are billing the government for has been completed and that all payments have been made. The statutory declarations could not have been very accurate on the Peace Tower project because if the declarations were true, the group of workers who were with Ann Raney and who are still owed some \$165,000 would have been paid. Yet the statutory declaration

stating that all accounts are paid and up to date have been submitted and paid by Public Works Canada.

That they are owed the money is not in dispute. The court has in fact found in their favour and has permitted a lien to be placed against the Peace Tower project. Surely that should tell officials at the department of public works that something is wrong. The minister should be aware and should be making certain that he finds out why his officials are so lax in their duties. Not only does public works appear to support and justify the harassment of women on the worksite, but it appears to be ignoring the basic management and accounting procedures that are its role as well.

I call on the minister to assure us that his department will act honourably and see to it that justice is done in this case. These workers who had the strength of character to do the right thing in resisting the unfairness of the harassment against their female engineer must not be the only Canadians who resist harassment of females on the worksite.

The public and this House expect nothing less than fair treatment and justice from our government departments and from their officials. The minister must act now.

Mr. Réginald Bélair (Parliamentary Secretary to Minister of Public Works and Government Services, Lib.): Madam Speaker, I thank the hon. member for Mackenzie for giving the government a chance to respond to this matter because it is a very important subject.

[Translation]

First it is a matter of taking stock. Public Works and Government Services Canada concluded a contract with Fuller Construction, the principal contractor in the Peace Tower restoration project. Therefore, this department must ensure the quality of the work being done on the Peace Tower and that the work done by Fuller Construction, the general contractor, meets very high standards.

[English]

The issue raised by the member for Mackenzie concerns a dispute between two subcontractors working on the project, Pro-Tech Building Restoration and Colonial Building Restoration. The dispute, based on the non-payment of wages and harassment, has resulted in Pro-Tech being removed from the job by Colonial. An employee of Pro-Tech, Ms. Ann Raney, has made allegations of gender discrimination.

[Translation]

In this matter, the government has a contractual link with Fuller Construction only, whereas the dispute involves the two subcontractors: Pro-Tech and Colonial. Public Works therefore

Adjournment Debate

has no direct involvement with the subcontractors working on the project.

[*English*]

However, the contract with Fuller Construction, like any other major work contract, includes an anti-discrimination clause. As I said before, Public Works Canada's contract specifications do not permit discrimination in hiring in the workplace.

[*Translation*]

As the general contractor, Fuller is responsible for settling this dispute.

[*English*]

I am pleased to inform the House that progress is being made and that the general contractor has taken steps to ensure that a solution is reached in the very near future. Both parties have agreed in principle to resolve the alleged discrimination issue through a third party independent arbitrator. Until the issue is resolved, the party alleged to have harassed has been removed from the job by Fuller.

[*Translation*]

The member for Mackenzie also raised the question about ownership of the tools. I would like to take this opportunity to set the record straight. On August 18, 1995, tools worth \$5,000 were taken from the site. These tools remain in the hands of the Ottawa-Carleton police.

[*English*]

I would like to assure members of the House that complaints of the nature raised by Ms. Raney are taken very seriously by the minister of public works. His department does not tolerate harassment or discrimination.

[*Translation*]

The Acting Speaker (Mrs. Maheu): Pursuant to Standing Order 38(5), the motion to adjourn the House is now deemed adopted. Accordingly, this House stands adjourned until tomorrow at 10 a.m., pursuant to Standing Order 24(1).

(The House adjourned at 6.39 p.m.)

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