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Friday, April 19, 1996

Speaker: The Honourable Gilbert Parent

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HOUSE OF COMMONS

Friday, April 19, 1996

The House met at 10 a.m.

Prayers

GOVERNMENT ORDERS

[*Translation*]

DEPARTMENT OF HUMAN RESOURCES DEVELOPMENT ACT

The House resumed from April 18 consideration of the motion that Bill C-11, an act to establish the Department of Human Resources Development and to amend and repeal certain related acts, be read the third time and passed, and of the amendment.

Mr. Gaston Leroux (Richmond—Wolfe, BQ): Mr. Speaker, I am pleased to speak in the House this morning in support of the amendment by my colleague, the hon. member for Mercier, calling for nothing short of the withdrawal of Bill C-11.

Need I remind members that the Liberal Party of Canada, faithful to the objectives established by its guru of the last decades, Pierre Elliott Trudeau, took office in the House of Commons in October 1993 with the clear intention of giving government in Canada a more centralized structure. Right from the beginning, there was a major offensive action against the autonomy Quebec was aiming at.

During the more than two years of the present administration, we have seen countless examples of this thrust towards centralization, bill after bill. Bill C-11, creating the Department of Human Resources Development, and arising from the reform of that department in June 1993, is yet another manifestation of the centralist intent of the federal Liberal government.

Bill C-11 is but another step in the invasion, by the Liberal central government, of Quebec's jurisdictions in the area of social and economic development.

Clauses 6 and 20 of that bill are extremely revealing about the federal government's will to limit the freedom of action of the

Quebec National Assembly. Clause 6 defines the powers, duties and functions of the minister which now extend, and I quote:

—to include all matters over which Parliament has jurisdiction relating to the development of human resources of Canada—with the objective of enhancing employment.

The minister is given considerable powers and will be free to act without the approval of the provinces, I repeat, without the approval of the provinces.

In fact, this bill contains no provision on provincial jurisdiction, let alone on honouring this jurisdiction; on the contrary, it denies Quebec's exclusive jurisdiction over manpower training and development.

Consensus has just been established once again, with a unanimous statement at the latest summit held in Quebec, a consensus of all parties: employers, unions, as well as the social and political communities. But they refuse to recognize it and thus fail to respect Quebec's dominion in an area of exclusive provincial jurisdiction, that is, manpower training and development.

Clause 20 lists the organizations with which the department may enter into agreements. It reads as follows:

20. For the purpose of facilitating the formulation, co-ordination and implementation of any program or policy—the minister may enter into agreements with a province—, agencies of provinces, financial institutions and such other persons or bodies as the minister considers appropriate.

So the minister may put anyone he wants in charge of managing his department's policies and programs without having to justify himself in the House or worrying about the Quebec government's directives. And what are those directives? Nothing very complicated: the Government of Quebec has its own legislation, an act relating to the executive council of the Government of Quebec. And what does that mean? Allow me to review it for the Liberal government.

Mr. Speaker, I believe I am waking up two or three hon. members. They are awake now, fine.

The legislation on the executive council provides that only the government, through its intergovernmental affairs, can enter into agreements, make arrangements or establish programs on behalf of all agencies, municipalities, school boards and parapublic agencies.

What is the Liberal government doing systematically in its legislation? It ignores the executive council act and the exclusive

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responsibility of the Government of Quebec for agreements outside of Quebec. Now, not only does the Liberal government systematically treat Quebec lightly, but it does so explicitly in all its bills in a pernicious and vicious way and with total disregard for provincial jurisdictions.

The minister will have the power to enter into agreements with all local agencies and municipalities. And we all know there is a clear consensus among Quebec municipalities regarding a regional development strategy with the federal government and its secretary of state and bypassing the Quebec government. According to Quebec employment minister, Mrs. Louise Harel, this bill is the antithesis of the Quebec consensus on manpower policy, the antithesis of the single window concept.

This bill prevents Quebec from implementing its own integrated social policy. On the other hand, the federal government is giving itself the legal basis to encroach on provincial jurisdictions whenever it feels like it, for example in the areas of childcare and manpower.

• (1010)

As the official opposition critic for heritage and cultural industries, I cannot help but relate this bill to Bill C-53 establishing the Heritage and Cultural Industry Department. Both are extremely centralizing.

In the area of communications, for instance, the action of federal government is unequivocal. The successive rulings of the Supreme Court of Canada on broadcasting in 1931, on cable television in 1977 and on telecommunications in 1994 have given exclusive jurisdiction to Ottawa in those areas and thus have deprived Quebec of any prerogative in the area of communications.

Here are a few examples of the federal government's tendency to centralize everything in this area. On February 27, 1992, with Bill C-62, the legislation on telecommunications, Ottawa announced its intention to pass new legislation in order to put in place a consistent policy for the entire country overseen by a single regulatory body. In this, however, it totally ignored Quebec's identity and legitimate aspirations of wide reaching autonomy because of its distinct nature.

Another example of centralizing policy. On October 31, 1994, the Minister of Canadian Heritage said that the information highway should be controlled by the federal government, meet national objectives and promote Canadian culture. Quebec should be able to control the socio-economic and cultural issues relating to the information highway since the federal government did not share its strategy for the French content of the information highway.

In setting up her cabinet on June 25, 1993, and I am talking about the Conservatives here, Prime Minister Kim Campbell created the Department of Canadian Heritage in order to promote a Canadian cultural identity based on Canada's foremost characteristics: its bilingualism and its multiculturalism.

The federal government decided to combine under the authority of the Department of Canadian Heritage all areas, according to Bill C-53, which established the department, relating to Canada's identity, values, cultural development and heritage, thereby denying Quebec's true cultural identity. This department's mandate made no provision for the difference in Quebec's culture and so, as usual, Ottawa denied Quebec's cultural reality by melding it with Canada's cultural identity based on bilingualism and multiculturalism.

In fact, all legislation concerning the major policies of the Liberal Party of Canada is extremely centralizing and continues to be expressed bill after bill. The Canadian federal system is a centralized political structure, and the Liberal Party is its master builder.

Bill C-11, which establishes the Department of Human Resources Development, is nothing more than the logical conclusion of a long series of legislative measures aimed at denying the existence of Quebec and its ability to establish a legislative and institutional framework to suit its needs, its uniqueness and its aspirations.

Bill C-76, legislation implementing certain provisions of the budget of February 1995, is another example of the Liberal government's efforts to negate the state of Quebec. I would remind you that, under this legislation, the Minister of Human Resources Development is using savings realized from the reform of unemployment insurance to set up a human resource investment fund. This fund will be used for manpower training, among other things, and will therefore give the central government massive discretionary and centralizing powers over an area that is under Quebec's exclusive jurisdiction—education—thereby completely disregarding Quebec's policies in the area.

• (1015)

Let us look at other examples. Interprovincial trade is another area in which the federal government likes to impose its centralizing vision. Bill C-88 shows the federal government's determination to act as judge and jury in interprovincial trade and to give itself, through this bill, a power of enforcement through orders it issues. Thus, it can extend the application of any federal legislation to the provinces, as stated in clause 9(1)(c), in other words, to exert control over its partners by declaring itself in all disputes the sole judge and jury able to decide.

This unitary state attitude of a centralizing federal system is in contradiction with provincial identities and, as such, impedes the development of Quebec. This attitude is also reflected in Bill C-46 establishing the Department of Industry. Its clause 8 states specifically that the Minister of Industry is responsible for regional economic development in Ontario and Quebec.

This bill only goes to show that there is overlap with respect to regional economic development by confirming the federal industry

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department's right to interfere in an area of jurisdiction over which Quebec has been demanding control for a long time.

Bill C-91 to continue the Federal Business Development Bank under the name Business Development Bank of Canada is another example of centralizing federal legislation. Clauses 20 and 21 of this bill are totally unacceptable to Quebec. Clause 20 provides that the Business Development Bank "may enter into agreements with, and act as agent for, any department or agency of the government of Canada or a province, for the provision of services or programs on their behalf".

This is another example of how, bill after bill, the government is invading provincial areas of jurisdiction, and going as far as stipulating in a piece of legislation how to do it, completely ignoring the legislation on Quebec's executive council where it is said that the Quebec government alone may enter into agreements and arrangements with governments outside Quebec on behalf of its own agencies, institutions, and municipalities.

However, the federal government keeps turning a deaf ear, refusing to abide by the laws of Quebec. Bill after bill, it keeps on centralizing without any constitutional consultation. It claims it is decentralizing, it claims it is willing to talk to everybody, but quietly and slyly, one bill at a time, it is giving itself all the tools to centralize.

Moreover, government members congratulate themselves for being open, flexible, ready to talk to anyone. But talks will not go very far, since with every new bill they become judge and jury, and can impose their own policies and legislation.

Under this clause the Liberal federal government pursues its strategy of centralization, a political strategy the objective of which is, I remind you, to substantially restrict the Quebec government's ability to act in the area of economic development, ultimately preventing it from achieving political autonomy.

The demagogic approach developed by the present Minister of Intergovernmental Affairs, who claims that Canada is the most decentralized country in the world, is an insult to intelligence and reflects a bad faith which is a major impediment to finding a solution regarding Quebec's place in North America.

• (1020)

In spite of the incessant pleas of the Quebec government to develop its own economic and social policies, the Liberal Party of Canada always said no and used every available legislative means to restrict the decision making power of Quebec National Assembly.

The new Minister of Intergovernmental Affairs may very well claim that the Canadian federation is one of the most decentralized, but we are of the opinion that it is one of the most centralized in the world. This is why 2,308,266 Quebecers voted for sovereignty on October 30.

[English]

Mr. Don Boudria (Glengarry—Prescott—Russell, Lib.): Mr. Speaker, I believe you will find unanimous consent for the following motion:

That the vote previously scheduled to take place on Monday, April 22 be further deferred until Tuesday, April 23 at 5.30 p.m.

(Motion agreed to.)

[Translation]

Mr. Philippe Paré (Louis-Hébert, BQ): Mr. Speaker, I am altogether sad and happy to speak to this bill. I am happy, because I hope my speech will help to sink it into oblivion, and sad because it shows once again that the federal government has no clue how to interpret the results of the October 30 referendum.

Bill C-96, which became Bill C-11, gives the Department of Human Resources Development new powers that it did not have previously. It was already inappropriate before the referendum and it is all the more so now. However it is almost the exact opposite of what was said in the last throne speech.

Indeed, in the speech from the throne, the government was telling us very humbly: We intend to withdraw from the provinces' jurisdictions. Five or six areas were mentioned, forestry, recreation and manpower, to name but a few. We know what was behind the government's withdrawal in matters of manpower. It was probably a trick to save time.

Despite this announcement in the speech from the throne, we were also told, among other things, that the federal government had no intention of interfering in areas of provincial jurisdiction without the consent of a majority of the provinces. Of course, Quebecers are perfectly aware, in this context, that it will be relatively easy for the federal government to get the consent of a majority of the provinces and that, most of the time, Quebec will lose out as a result of this throne speech promise.

My colleague, the member for Richmond—Wolfe, has explained very capably how the federal government has intruded upon provincial jurisdictions over the last few months. He described how this bill is another example of federal intrusion in Quebec's jurisdiction.

I think it is impossible to improve this bill. That is why the member for Mercier asked that it be brought back to its starting point or at least that it be sent to the Standing Committee on Human Resources Development so that the committee can determine if anything can be done with it.

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• (1025)

I agree that we should not increase the powers of the Department of Human Resources Development because, in the past, it has abused its powers. A case in point is unemployment insurance reform.

In the throne speech, we were also told that the government would ensure the viability of social programs. So we have two commitments related to the subject at hand: first, the government will withdraw from the provincial areas of jurisdiction and they will not intrude on any others; second, it has committed to ensuring the viability of social programs.

Then, what did the government announce in the throne speech? Among other things, a \$7 billion cut in transfers to provinces. What will the impact of such a measure be? It will be remembered that the Canada health and social transfer covers health care, income security and post-secondary education. It is clear that by passing the deficit on to the provinces, the federal government will force them to make drastic and difficult decisions that will not necessarily be in the best interests of the population.

I would like, however, to highlight the impact of those measures on post-secondary education, mainly at the university level. If provinces receive less for universities, the tuition fees will almost certainly go up.

What will happen then? We have to try to find some kind of common thread in all this. If tuition fees increase, young people, in order to make ends meet, will try to get as many hours of paid work as possible.

We seem to be forgetting about the society in which young people live. We live in a consumer society. We cannot ask young teenagers and young adults to live as if they were cloistered, as recluses, excluded from all economic activity. A recent study showed that, in Quebec alone, teenagers spend \$1 billion on consumer goods.

Some paternalistic people might say that if they are short of money they should refrain from spending. However, this would be hypocritical because, really, we have chosen a consumer society as our economic model. It means that the money that young people are spending fuels the economy. Therefore we cannot—and it would be stupid to do so—tell young people: “If you do not have any money, just do not consume”.

The increase in tuition fees means that young people will increasingly be looking for work. And if they do work more, we can forecast the consequences. I am a former school principal and I know what it means for young people to work more than 15 hours a week on top of their regular school work, which is their first priority. Already, in the last year of high school, where there are

virtually no fees, almost half the students work, have paid employment to be able to fit into our consumer society and to purchase what they see advertised on TV and everywhere in the media.

• (1030)

So, young people will work more, will have a little less time to spend on their studies, and we are entitled to think that their grades will suffer and that some of them will not pass. Because they have been unable to spend as much time as they should on their studies, college and university students will have to repeat some courses. In some cases, it will no doubt be more dramatic. They will probably have to also repeat a whole year, whether in high school, college or university.

If we keep in mind that it costs about \$10,000 to live while attending university, we realize how an increase in tuition fees is a short-sighted decision. For the federal government to reduce transfers to the provinces when this will result in an increase in tuition fees shows a lack of foresight. Eventually, we will have to pay a price for such measures, in terms of social costs.

Not only will students be sometimes put in situations where they will fail some courses or have to repeat them, but we can also imagine that the need to work more hours will lead to some of them dropping out. Young people who can no longer invest enough time and energy in their studies will lose interest at some point. They will realize they are in over their head will drop out of school.

Once again, we have an example of the hypocrisy of the society we live in. There are campaigns against dropping out, but at the same time, young people are put in a situation where they are obliged to reduce the time they spend on their studies. So, some have to drop out of the school system. To a large extent, it is bad political decisions that are leading systematically to dropping out and, more often than not, even though education comes under provincial jurisdiction, the problem is created at the federal level and transferred to the provincial level, and people are left with the impression that it is the provinces that are making bad decisions.

The budget speech was pernicious, through the \$7 billion in cuts to transfers to the provinces, but as if that were not enough, the federal government went further by saying, in a very hypocritical way: “We will reform unemployment insurance”. It is not reforming unemployment insurance, it is destroying a system that workers and businesses have paid for from their own pockets, since the federal government no longer contributes in any way to the unemployment insurance fund. It has infiltrated a system put in place by employers and employees and is now busy wreaking havoc with it.

I want to address three aspects of this government’s destructive behaviour. If this reform ever sees the light of day despite all the demonstrations and protests in the maritimes, Quebec and else-

where, the government may be persuaded to soften the blow by these demonstrations, which cannot be anything but emotional because people feel affected in their daily lives, knowing the impact this reform will have on their living conditions, their children and so on. It is therefore only normal for them to demonstrate vigorously against this bill.

• (1035)

I wish to draw your attention to two measures in particular provided for in this bill. These two measures revolve around the same figure, \$900 million. As members may recall, the government told us in the throne speech about its intention to ensure the viability of social programs. As far as I know, a country that creates social programs does not necessarily do so for the wealthy. Who needs social programs? The most vulnerable in our society, those in a precarious situation. But it is precisely these vulnerable people the government is targeting.

The government tells us it will take \$900 million away from seasonal employees, part time workers and, of course, the students I referred to earlier. It is trying to sell them the illusion that perhaps one day, if the context is just right, they may qualify for unemployment insurance benefits. No one really believes this given how hard it is to receive benefits and how high the eligibility thresholds have been raised. Not many people believe those workers in a precarious situation will ever qualify for benefits.

Seasonal workers are being penalized. My colleagues on the human resources development committee have condemned this reform on numerous occasions, almost singlehandedly if I may say so, because of a lack of support from members who should have been more concerned about the rights of their constituents, be they from the NDP or the Reform Party—although it would be somewhat more surprising coming from that side. At any rate, I am convinced that, in the ridings represented by members of the Reform Party, there are workers whose jobs are not secure and who will be hurt by this bill.

Unfortunately, only Bloc Québécois members were courageous, strong and proud enough to stand up for the disadvantaged and for those whose work situation is precarious.

I would like to say a few more words about students, as they are always on my mind because I was a school principal in a previous life. Students will be particularly hard hit by this reform. Naturally, the government assures us that, in the particular case of students, contributions made by those who did not earn \$2,000 will be refunded. But we know that only in 25 per cent or so of the cases will contributions actually be refunded, because nearly 75 per cent of students will earn more than \$2,000. Just try to live on less than \$2,000 a year while attending university. It is obvious that the

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\$2,000 limit is grossly underestimated and does not reflect the financial needs of students.

As a result, businesses will see their payroll taxes increase. Last week, I treated myself to a meeting of the human resources development committee, where witnesses from Manitoba were saying exactly the same thing as what employers from my riding had told me, namely that raising payroll taxes on small business—the people giving evidence were from the restaurant industry, which, as we know, is particularly vulnerable to competition—will have immediate and dramatic consequences.

Employers required to pay higher unemployment insurance payroll taxes will necessarily be driven to consider reducing the work time they used to distribute among their part time employees.

• (1040)

Consequently, employees will undoubtedly be subjected to more pressure, they will have to give a higher performance to do the same work in fewer paid hours. So, when the government claims that the unemployment insurance reform will create part time jobs, it is indulging in wishful thinking, because it will rather do the opposite.

If the Minister of Human Resources Development really listened to what employers have to say on the matter, he would realize that his dreams do not correspond to reality. The reform will decrease the number of jobs, part time jobs in particular, and workers will be overburdened.

I will conclude now, because I realize that my time is running out. In my opinion, not only did the government wickedly impose a \$900 million cut on the most insecure and poorest workers, but it is also taking \$900 million from the poor to distribute to the rich.

This is really what the government is doing when it says: “People will stop contributing for the part of their salary exceeding \$39,000”. Previously, the maximum insurable earnings was \$42,500, so lowering it to \$39,000 will result in savings of \$900 million. This amount equals the one we mentioned before. In other words, the government takes from the poor to give to the rich. This bill is totally unfair, and we should not give more powers to a government which implements such a measure.

Mrs. Suzanne Tremblay (Rimouski—Témiscouata, BQ): Mr. Speaker, my speech today—

The Deputy Speaker: Speeches cannot exceed a maximum of ten minutes and there are no questions or comments.

Mrs. Tremblay: My speech today deals with third reading of Bill C-11, an act to establish the Department of Human Resources Development and to amend and repeal certain related acts, and with the amendment proposed by the hon. member for Mercier to withdraw this legislation.

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For the benefit of our listeners, let me point out that this bill was debated at second reading during the first session of this 35th Parliament. We resume the debate where we left it before the Prime Minister decided to prorogue Parliament, last January.

First, a general comment must be made regarding this legislation. The government wants to change its administration and reduce its size and costs. This in itself is a laudable goal. Consequently, it merges, eliminates or creates new departments, which means that legislation is required to legalize the situation of several ministers and departments. Indeed, several ministers were sworn in under the former names of their department, not the new ones.

I did an intellectual exercise which was meant to be objective, even though objectivity is always subjective. I examined certain documents dealing with this bill, I reread several speeches made in this House at second reading, when the bill was known as Bill C-96, and I took a look at a few letters and memos released by colleagues, organizations and ministers.

What I noticed was a great deal of consistency. With his bill, the minister has managed, as have many ministers in this government, to unite everyone against him. Let us take a closer look at what some have said or written about this legislation.

• (1045)

First and foremost, Quebec's employment minister who, on October 4, 1995, issued a communique indicating that the Government of Quebec was associating itself "with its labour market partners to oppose the designs of Ottawa on the issue of manpower". The minister was echoing the position taken by the board of directors of the Société québécoise de développement de la main-d'oeuvre, which includes major employer associations and unions, as well as representatives of the co-operative, community and academic world. That same morning, the corporation had issued a statement indicating its unanimous rejection of this piece of legislation. At that time, Mrs. Harel, the minister, wrote: "This bill is the very opposite of the consensus on manpower in Quebec, the opposite of the single window principle. This proves that Ottawa is committed to continuing and even increasing its costly duplication and overlap in the area of manpower in Quebec".

The next day, October 5, 1995, the Canadian Institute of Adult Education also issued a press release, entitled: "Bill C-96: Minister Axworthy's Blueprint for Society or How to Manage Without the Provinces". Today, six months later, the institute could issue the same release except for two things: the bill has changed numbers and is now called Bill C-11, and the minister responsible now is the one who was then the transport minister, before the Prime Minister did a major cabinet shuffle last January.

Here are a few excerpts from this press release which is still relevant today: "This bill seriously undermines the equity principle governing the social security system in Canada and denies the exclusive jurisdiction of provinces over manpower training and development. With this bill, the federal government has demonstrated a blatant lack of respect for the aspirations of the provinces.—Clauses 6, 20 and 21 leave no doubt as to the centralizing designs of the federal government".

Two days later, on October 7, 1995, Henri Massé, then secretary general of the FTQ, a labour confederation representing nearly half a million workers in Quebec, signed a press release describing the dangers of federalism and urging the government to refrain from intruding into the field of manpower training in Quebec. The FTQ cautioned the federal government about any attempt to intervene in areas of provincial jurisdiction and to set up parallel structures.

He went on to say: "There is a strong consensus favouring Quebec's becoming solely responsible for policies on manpower adjustment and occupational training within its borders.—The Conseil du patronat itself agrees with the unions on this.—Even Robert Bourassa's Liberal government opposed a similar move by Ottawa in 1991".

Mr. Massé then pointed out that the bill will confer extensive powers to the minister who could always bypass the provinces. Finally, Mr. Massé concluded that: "This bill leaves the door wide open for privatization and contracting-out of certain programs, including the unemployment insurance plan".

On November 28, the very same day that Bill C-96 was to be voted on in this House, the Minister of State for Joint Action, Minister of Employment and Minister of Immigration and Cultural Communities in the Parizeau government sent out yet another press release saying, and I quote: "Bill C-96—now Bill C-11—is a fraud and it confirms the federal government's intentions to systematically bypass Quebec's jurisdiction and institutions to maintain, and even increase, duplication regarding manpower related measures in our province, under the guise of decentralization".

• (1050)

It goes on to say: "Bill C-96 amounts to a flat rejection of the unanimous Quebec consensus to the effect that the federal government must completely withdraw from the manpower sector and give related budgets back to the province.—Ottawa's tactic was formally condemned by all labour market partners. Ottawa has confirmed it intends to pursue its centralist manpower policy and ignore the specific needs of the Quebec labour market, thus dismissing the consensus in Quebec on manpower issues which stresses the need to fight unemployment effectively by allowing for the differences in the various labour markets across Quebec and

promoting the involvement of the socio-economic players in every region and community”.

So, based on these brief reactions and comments and since I do not have much time, I have come to the conclusion that, with this bill, the federal government is far from withdrawing from the manpower sector. On the contrary, it is getting more involved. And what worries me is that the minister in inconspicuously using this bill to give himself even greater powers at the expense of the provinces.

The basic points of the bill are reflected in certain clauses. The powers, duties and functions of the minister are defined in clause 6, which stipulates:

6. The powers, duties and functions of the Minister extend to and include all matters over which Parliament has jurisdiction relating to the development of the human resources of Canada not by law assigned to another Minister, department, board or agency of the Government of Canada, and are to be exercised with the objective of enhancing employment, encouraging equality and promoting social security.

Under legislation now in force, the powers of the minister deal with the creation, implementation and organization of human resources in Canada, placement services, unemployment insurance and immigration.

Since these parameters have been left out of the bill now before us, the phrase “all matters over which Parliament has jurisdiction” is most disquieting.

Certain clauses give the minister the authority to entrust whom-ever he wants with the management of his department’s policies and programs without having to discuss this with anybody, including Parliament.

To conclude, this bill is a sinister manoeuvre but the official opposition has not been taken in. With this bill, Ottawa wants to gain full control over the labour market policy and human resources development in Quebec. We say no to this bill, which is one more reason for Quebec to separate.

The Deputy Speaker: Is the House ready for the question?

Some hon. members: Question.

The Deputy Speaker: The question is on the amendment. Is it the pleasure of the House to adopt the amendment?

Some hon. members: Agreed.

Some hon. members: No.

The Deputy Speaker: All those in favour will please say yea.

Some hon. members: Yea.

The Deputy Speaker: All those opposed will please say nay.

Some hon. members: Nay.

The Deputy Speaker: In my opinion the nays have it.

Government Orders

And more than five members having risen:

The Deputy Speaker: Pursuant to Standing Order 45, a recorded division stands deferred until Monday, April 22, at the ordinary time of the adjournment.

Pursuant to the agreement reached earlier today, a recorded division is deferred until Tuesday, at the end of the period provided for the consideration of government orders.

* * *

[English]

DEPARTMENT OF HEALTH ACT

Hon. Fred Mifflin (for the Minister of Health) moved that Bill C-18, an act to establish the Department of Health and to amend and repeal certain acts, be read the third time and passed.

• (1055)

Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.): Mr. Speaker, I am delighted to speak today in support of Bill C-18.

Health is one of the most fundamental areas of government activity in our time. It is as much a basis of our economic success as it is a basis for our social strength.

Canadians have come to see Canada’s approach to health issues as a valued example of the country’s greatness. This bill will put the legal framework in place for us to keep moving forward as a modern department in a time of challenge.

You will forgive me if I read like this. I guess I have reached the age where health is very important to me. I do not mean to make light of this but my arms are no longer long enough to read my notes. My pride nonetheless has not been just a product of vanity, but it is a product of Canada’s record of accomplishment and achievement in the broad health domain.

We have a health system that some of my colleagues opposite will recognize as the envy of the world. Yet we are at a time when people recognize the strains on the system and they are worried about the capacity of governments to meet the challenges these strains produce. Nonetheless what we have accomplished in this field shows the strength of the Canadian federation to address challenges. It shows the Constitution of Canada allows all governments to do what is right for the people of this land.

I will spend a few minutes reflecting on the leadership role the Government of Canada has played in the development and evolution of health and health issues. After all it, is the actions of the federal government, together with the provincial and territorial governments, that have built the system. Each has had a role to play that has been tested as constitutionally sound, and each still has such a role.

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Speculating on what the Fathers of Confederation would have done if they could have looked into the future, it is kind of a parlour game currently in Ottawa. Would the Fathers of Confederation have drafted a constitution different from the one we currently have if they could have imagined today's health system and its costs?

The Fathers of Confederation assigned responsibilities as best they could and set out some principles to guide them. Almost from the time the constitutional ink was dry governments, courts and citizens have been interpreting those responsibilities based on contemporary context, and that is the genius of our Constitution. It is not simple a document, words on paper, or a historical curiosity from an another era. It is a living part of the fabric of Canadian society.

During the course of this debate some hon. members have cited various powers over health that our Constitution has assigned to provincial legislatures. They point to these and then claim the government has no right to work toward better health for Canadians. Can one imagine the absurdity of such a claim that the government has no right to take a leadership role? Can one expect an abandonment of responsibility? Obviously I disagree, as I think many of my colleagues on this of the House would.

The Constitution does not assign health as a complete and distinct subject to either the provinces or to the Parliament of Canada. It is much broader and farseeing.

It is certainly correct to note, though, there are provincial powers that relate to health. This is beyond debate. Sections 92(7), 92(13) and 92(16) of the Constitution deal mostly with hospitals, properties, civil rights and local matters. Section 92(2), which deals with local taxation and spending, would have extensions also for health implications.

The Deputy Speaker: The hon. parliamentary secretary can continue his intervention after question period.

STATEMENTS BY MEMBERS

[English]

HURON—BRUCE

Mr. Paul Steckle (Huron—Bruce, Lib.): Mr. Speaker, my riding of Huron—Bruce abounds with an overwhelming amount of tourism features. Huron—Bruce follows the shores of Lake Huron, the land of sights and sounds that captivate the enthusiasm of visitors of all ages. Lakeside communities bring the Huron shoreline to life. Sauble Beach, Port Elgin, Southampton, Kincardine, Goderich and Grand Bend all feature excellent marinas, shopping, dining, festivals, theatres and playhouses, accommodation and

camping. Inland communities such as Blyth offer the renowned Blyth Festival, agricultural heritage and a picturesque village nestled in the quiet stretches of endless farmland.

• (1100)

Huron—Bruce is a patchwork quilt of rural Canadian towns, farm landscapes, parks and Lake Huron shoreline. My riding is hometown proud and I extend to my colleagues, their families and friends an invitation to visit Huron—Bruce and experience the charm, culture and the boundless possibilities of a vacation destination.

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[Translation]

NUCLEAR FUSION

Mr. Réal Ménard (Hochelaga—Maisonneuve, BQ): Mr. Speaker, the Minister of Natural Resources has announced the elimination of the \$7.5 million grant that was paid annually to the tokamak project at the Canadian centre for magnetic fusion located in Varennes.

By killing this research project on a new form of clean energy that creates jobs, the minister sacrifices 20 years of development work in the area of fusion, \$70 million in infrastructure and about 100 specialized jobs.

The minister had the audacity to say in this House that about 25 per cent of her department's investments in research and development were in Quebec. However, the union of professional scientists at the Institut de recherche en énergie du Québec tells us that, at the present time, the federal Department of Natural Resources and Atomic Energy of Canada Limited spend only 8 per cent of their energy research and development budget in Quebec. With the elimination of the tokamak project, this would fall to 6 per cent.

Once again Quebec is the big loser as a result of cuts made without any consideration for the future.

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[English]

THE GAKHAL FAMILY

Mr. Darrel Stinson (Okanagan—Shuswap, Ref.): Mr. Speaker, today is my first opportunity for a private member's statement after a terrible tragedy struck the city of Vernon, B.C. where my constituency office is located.

On Easter weekend the Gakhal family was gathering for what was to have been a joyful occasion as one of their six children was getting married. Instead, the estranged husband of one daughter arrived at the home of his in-laws and proceeded to kill nine of his former relatives before he returned to his motel room and took his own life.

This Canadian family was such a long term part of the community that most other Vernon families knew one or more members of the Gakhal family. Their children were friends with children of my office staff.

As the member for Okanagan—Shuswap, I want to express both my personal sorrow and the appreciation of the people of Vernon and the Gakhal family for the moment of silence observed on April 15 by this House as requested by the member for Vancouver South. The funeral Saturday with all those open caskets was one of the saddest days in my life and in the history of Canada.

* * *

[Translation]

CANADIAN BROADCASTING CORPORATION

Mr. Gaston Leroux (Richmond—Wolfe, BQ): Mr. Speaker, “the need to unite Canadians is at the heart of the CBC’s mandate” according to Mr. Perrin Beatty, president—

An hon. member: Order.

The Deputy Speaker: As the hon. member knows, we have certain restrictions in terms of our dress code.

Mr. Leroux (Richmond—Wolfe): I will put my jacket back on, Mr. Speaker.

The Deputy Speaker: I am afraid that will not be enough.

* * *

[English]

EASTERN KINGS MEMORIAL HOSPITAL

Mr. John Murphy (Annapolis Valley—Hants, Lib.): Mr. Speaker, on March 30 I had the honour of attending the official opening of the Eastern Kings Memorial Community Health Centre in my riding of Annapolis Valley—Hants.

This hospital has worked hard to ensure that its doors remained open during the province’s health care reform exercise. Due to the tenacity and the strong will of the people of Wolfville and the surrounding area, this centre will stay open. In fact, it has become the first community health centre to open under Nova Scotia’s reformed health system. It will continue to deliver first class primary health care to the people of Eastern Kings county.

I would like all members of Parliament to join me in congratulating all of the volunteers and the staff who have worked so hard to make this happen. They have truly made their community a better place.

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NANCY SWEETNAM

Mr. John O’Reilly (Victoria—Haliburton, Lib.): Mr. Speaker, as the 1996 summer Olympics are quickly approaching I would

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like to congratulate Nancy Sweetnam of Lindsay, Ontario in qualifying for the games in Atlanta.

Nancy recently qualified for the 400 individual medley event in swimming at the time trials in Montreal. She had an excellent year at the World Cup swim meets in Europe where she grabbed four gold medals and a silver. This will mark the second time she has been to the Olympics as she competed in the 1992 Barcelona summer games. Due to her recent success at the World Cup swim meets, it appears Nancy is peaking at the right time, heading into the Olympics.

• (1105)

Congratulations and good luck, Nancy. The people of Victoria—Haliburton and the rest of Canada wish you all the best in your quest for gold.

* * *

YOUTH

Mr. Walt Lastewka (St. Catharines, Lib.): Mr. Speaker, I want to tell the House about a great youth project in my riding of St. Catharines. It is a Youth Services Canada project sponsored by the Niagara Regional Police Service.

Fifteen young people worked with the Niagara police to promote community safety and crime prevention while learning work related skills. These young people worked in classroom and community settings. They visited malls, schools and seniors’ homes to promote community safety with projects like Neighbourhood Watch, Lock It or Lose it and Combat Auto Theft.

They also improved their life and work skills through education in first aid, problem solving, team building, budgeting, writing résumés, job interviews and more.

The young people say they have gained greater self-esteem, self-confidence, people skills and an opportunity to succeed. This project is a great example of government, police and young Canadians working together to make their communities better and giving youth vital skills for the future.

Congratulations to Chief Waddell, project co-ordinator Constable Tim Whittle, everyone at the Niagara Regional Police Service and the 15 young people on a job well done.

* * *

NATIONAL SOIL CONSERVATION WEEK

Mrs. Marlene Cowling (Dauphin—Swan River, Lib.): Mr. Speaker, this week we are celebrating National Soil Conservation Week. Healthy soil is an essential component of a healthy environment and is a foundation on which sustainable agriculture is built.

The Soil Conservation Council of Canada was formed 10 years ago to promote the preservation and enrichment of Canada’s soil and water resources for the benefit of present and future generations. Half of its current board members are farmers, including newly elected president, Gerry Willerth of Indian Head, Saskatche-

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wan. They form a coalition of producer driven, soil and water conservation organizations in each province with all stakeholders contributing funding toward public education, research and program evaluation.

The Government of Canada, through Agriculture and Agri-Food Canada, conducts research and actively supports initiatives for soil conservation. Much progress has been made in halting and reversing soil degradation.

National Soil Conservation Week helps to focus attention on this important issue which affects us all.

* * *

WEST COAST FISHERY

Mr. Nelson Riis (Kamloops, NDP): Mr. Speaker, there is a seething rage developing in the province of British Columbia as once again British Columbians feel that the Government of Canada is ignoring their concerns.

Today representatives of over 500,000 people living in coastal communities say that the Mifflin plan fails to address the serious concerns of the west coast fishery.

I ask particularly the parliamentary secretary to the minister of fisheries and Liberal members from British Columbia to stand up for the concerns of British Columbians and not be a sop of the government in British Columbia. Your job here is to represent B.C.

* * *

[Translation]

FÉDÉRATION DES CAISSES POPULAIRES DE L'ONTARIO

Mr. Mauril Bélanger (Ottawa—Vanier, Lib.): Mr. Speaker, 1996 marks the 50th anniversary of the Fédération des caisses populaires de l'Ontario. Over the years, the francophone community of Ontario has built its own network of credit unions. Today, the federation has 42 branches and 65 outlets to serve its members. Some 200,000 Franco-Ontarians have joined the co-operative movement and the network as a whole administers total assets of \$1.6 billion.

The members of the caisse populaires have obviously created a powerful development tool that reflects their dreams and aspirations. Throughout the year, several cultural, co-operative and community activities organized in partnership with local organizations will mark the federation's 50th anniversary. This is a fine example of the vitality of Ontario's many francophone communities.

[English]

SOCIAL PROGRAM TRANSFERS

Mr. Herb Grubel (Capilano—Howe Sound, Ref.): Mr. Speaker, the Minister of Finance recently stated in the House that the Reform budget "had reductions in transfer payments to the provinces that made ours look like a peanut hill. They were enormous". This statement is false.

The Reform Party had proposed a cut of \$3.5 billion in provincial transfers for health, welfare and higher education and \$3 billion in equalization payments. The Liberal budget projects a cut of \$7 billion on social program transfers. The Liberal budget exceeds the Reform cuts by \$500 million.

• (1110)

I ask the minister: where is the peanut hill? Why these misrepresentations? Is it lack of information, carelessness or a deliberate political tactic?

* * *

[Translation]

CANADIAN BROADCASTING CORPORATION

Mr. Jean H. Leroux (Shefford, BQ): Mr. Speaker, the need to unite Canadians is at the heart of the CBC's mandate. The president of the CBC, Perrin Beatty, said so himself.

The sole mandate of the CBC is to reflect as faithfully as possible the reality of Canada and Quebec. The CBC acts as a witness who sees, hears and reports on what is happening.

Turning this witness into one that manipulates reality to bring communities closer together is a serious departure from the mandate of the CBC and has reduced this institution to a propaganda tool serving a single ideology, namely Canadian unity.

The Bloc Québécois objects to such a change in mandate and would like the president and chief executive officer of the CBC to either clarify his remarks or take them back. The CBC is made up of two independent networks, each responding to the needs of its audience. It is unacceptable for their mandate to be subject to the dictates of the ruling party.

* * *

LEBANON

Mrs. Madeleine Dalphond-Guiral (Laval Centre, BQ): Mr. Speaker, on behalf of the Bloc Québécois, I wish to express our profound indignation about and strong disapproval of the massacre at Qana, in southern Lebanon, in which some 100 civilians were killed and another 100 wounded.

This slaughter of civilians in a refugee camp under UN protection, which resulted from the Israeli army's actions, is more massive than the one that resulted from the February 1994 attack on the Sarajevo market.

Israel must immediately stop the bloodshed, which seriously sullies its honour and undermines the credibility of its cause.

There was another exchange of fire last night between Israel and Hezbollah. The toll of the Israeli operation is reported to have reached more than 151 dead, most of them civilians, and close to 300 wounded. This massacre must end. We urge both sides to respond to the international community's call for an immediate ceasefire.

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[English]

TRANSPORT CANADA

Mr. Cliff Breitkreuz (Yellowhead, Ref.): Mr. Speaker, since February, western Canadians have been given the opportunity to fly at bargain basement prices. While West Jet fights the competition in the skies, this Liberal government has launched an attack from the ground.

On March 22 the fledgling West Jet was forced, at great expense, to comply to a so-called Transport Canada safety rule written years ago. All airlines operating in western Canada were forced to give safety instructions in both languages.

Three air carriers asked for one-year extensions. Transport Canada refused. "If you do not have flight attendants with French language capabilities, hire them or get sound equipment," came the edict.

If the urgency was all about safety, why was it not important enough to be implemented when it was first drafted six years ago? Did the flying public request the second language rule? No, it came from the police of official languages here in Ottawa.

A pilot from Transport Canada informed me this week the edict had nothing to do with safety.

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[Translation]

NATIONAL UNITY

Mr. Robert Bertrand (Pontiac—Gatineau—Labelle, Lib.): Mr. Speaker, over 600 federalist residents of the Outaouais met last night in the small town of Low to reiterate their deep attachment to Quebec and Canada.

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Many such rallies have been held across Canada since the October 30 referendum. Citizens from all over the country are mobilizing to help resolve the constitutional crisis fuelled by Quebec separatists.

All these groups are sending a clear message. They want a united Canada and fervently hope that Quebec will remain part of it.

I commend the initiative taken by all these people seeking peaceful, unifying solutions and I can assure them that my government will do all it can to meet their legitimate expectations.

* * *

QUEBEC WEEK FOR RETAIL SALE

Mr. Nick Discepola (Vaudreuil, Lib.): Mr. Speaker, I want to take this opportunity to point out that this is Quebec week for retail trade.

The retail industry is a key player in Quebec's economic development. It is currently estimated that over 500,000 Quebecers work in that very aggressive and competitive sector.

● (1115)

Annual sales in the wholesale and retail sector exceed \$50 billion, or slightly more than 12 per cent of Quebec's GDP.

Over the last few days, various activities and events took place throughout the province to celebrate the week for retail trade. I join promoters, participants and customers in congratulating entrepreneurs who constantly strive to provide quality products to enhance the well-being of consumers.

* * *

RAW MILK CHEESE

Mr. Bob Ringma (Nanaimo—Cowichan, Ref.): Mr. Speaker, on March 30, the Minister of Health announced that a study would be conducted on raw milk cheese to see if these products should be banned. The decision is based on the fact that bacteria caused the death of a Swiss citizen 60 years ago.

Milk producers are going through tough times. They just lost their federal subsidies and, in addition to that, they must fight with the Americans over import tariffs.

What the Liberals are proposing will make the transition even harder, particularly in Quebec, the principal homeland of cheese.

This measure makes no sense at all. What is next? Will the minister propose that cheese be registered, just like firearms?

*Oral Questions***ORAL QUESTION PERIOD***[Translation]***SOMALIA INQUIRY**

Mrs. Suzanne Tremblay (Rimouski—Témiscouata, BQ): Mr. Speaker, my question is for the Minister of National Defence.

Despite the latest ultimatum given the Department of National Defence Monday by counsel for the Somalia inquiry, frustrated at having to beg for documents that never appear, we learn this morning that a number of essential documents have still not been produced, including the registers for the first and third commandos.

How does the minister explain the fact that, despite the 12 boxes that arrived five minutes before the deadline, key registers have still not been supplied at the request of the inquiry?

[English]

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, two issues have to be addressed on the documentation question and one on the public affairs issue.

A counsel for the commission this morning said that they were satisfied that the department had produced all the relevant documents and that the subset of hearings within the general commission mandate can start on Wednesday.

With respect to the specific question of the hon. member on the Somalia related documents, there has been some considerable progress made on the logs and other documentation that came forward as a result of the search that was conducted under the auspices of the chief of defence staff.

The Somalia liaison team of the department is cataloguing that and will report to the commission. The commission is satisfied that the report, combined with testimony that will be given in subsequent hearings, will get to the bottom of the documentation issue.

[Translation]

Mrs. Suzanne Tremblay (Rimouski—Témiscouata, BQ): Mr. Speaker, it is high time the minister stopped mocking everyone. He has been sweet talking the House for the past two and a half years. Nobody believes him anymore. Enough is enough.

Counsel made it clear this morning that gaps remained and documents were still missing. Would the minister explain why it takes so much effort and time and so many warnings and ultimatums for the department to deliver, bit by bit, some of the documents the commission of inquiry has repeatedly asked for?

When exactly is the minister finally going to assume his responsibilities, for once?

[English]

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, this minister and the government took its responsibility by setting up the Somalia commission specifically to deal with issues such as documentation.

There were documents altered. There were documents destroyed. Was there a cover-up? These are the matters on which the inquiry will get to the bottom.

What the commission asked us earlier in the week was to produce a cataloguing of the documents themselves. It said that they were dissatisfied at that point in time with the explanations of the department.

● (1120)

I think some real progress has been made. It has been reflected in what the commission counsel has said this morning. I understand the commission counsel has said that the documents which have come forward and which are now being catalogued in the report by the Somalia liaison team together with testimony under the auspices of the mandate of the commission will get to the bottom of it and will address the specific question of the hon. member.

[Translation]

Mrs. Suzanne Tremblay (Rimouski—Témiscouata, BQ): Mr. Speaker, we were reminded this morning that the military police were told last fall by a second officer, who confirmed the statement of Colonel Haswell, that the army chief of staff along with other officers developed a plan to change the name of documents requested under the Access to Information Act.

As this new information considerably undermines the credibility of the minister and the chief of staff, why is the minister refusing to relieve General Boyle temporarily of his duties, at least for as long as it takes the commission of inquiry to thoroughly examine this whole sad affair and people to regain their trust in the army and the government?

[English]

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, the answers to that specific question were given earlier this week in replies to questions put forward by members of the Reform Party. I will not take very much time of the House to go into that except to say that we in this country believe in due process. Due process means that people have a right to give their views, their side of a story to defend themselves against accusations.

On Wednesday the Somalia commission will start hearings on the specific issue. I would ask for patience because I think Canadians understand that all the answers will be forthcoming at the commission, not here in the House of Commons.

* * *

[Translation]

GOODS AND SERVICES TAX

Mr. Yvan Loubier (Saint-Hyacinthe—Bagot, BQ): Mr. Speaker, yesterday the Minister of Finance confirmed that up to a billion dollars will be paid to the governments of the maritime provinces as compensation for their potential loss of tax receipts due to the process of harmonizing the GST and provincial taxes.

My question is for the Minister of Finance. Why does negotiating the harmonization of the GST with the sales tax in the maritime provinces require all Quebecers and all Canadians to foot the bill for a portion of the consumer taxes currently assumed by the people of the maritimes?

Hon. Paul Martin (Minister of Finance, Lib.): Mr. Speaker, as I said yesterday in response to the hon. member's question, there is no announcement yet. We are currently negotiating. I shall be pleased, if the negotiations are successful, to answer specific questions on the agreement, if one is reached.

Nevertheless, the hon. member will understand that I am going to defend the principle that the regions of this country must help each other. Otherwise, this would be a denial of such things as equalization, where three of this country's provinces help out the other seven.

Mr. Yvan Loubier (Saint-Hyacinthe—Bagot, BQ): Mr. Speaker, the minister is mixing apples and oranges. If he wants to have an equalization formula with his new GST reform, let him say so. We are talking of two totally different things.

The GST and the provincial sales tax have already been harmonized in Quebec. There was no negotiation on compensation. Do you know what kind of a message that sends to Quebec? That any time you co-operate with the federal government, you end up paying for it. If there is a \$1 billion compensation payment to the maritime provinces, that means Quebecers will be paying \$250 million to the governments of the maritime provinces, to their treasuries, as compensation for those governments' lower tax receipts. Where is the logic in that?

Hon. Paul Martin (Minister of Finance, Lib.): Mr. Speaker, the hon. member's position is totally ridiculous, perhaps because of his lack of understanding of Canada. Canada is a country in which the regions help each other out.

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For example, if Canada decides to help out the aeronautical industry, Montreal will reap the benefit, not Saskatchewan or New Brunswick. Or, another example, if it decides to help out the pharmaceutical industry, as in fact it has, Montreal will reap the benefit, not Alberta or Prince Edward Island.

• (1125)

That is the principle of what a country is. We have enormous assets and should place those assets at the service of the country as a whole.

* * *

[English]

SOMALIA INQUIRY

Mr. Jim Hart (Okanagan—Similkameen—Merritt, Ref.): Mr. Speaker, my question is for the Minister of National Defence.

The minister desperately wants Canadians to believe that the military brass did not try to cover up the Somalia scandal. He desperately wants us to believe that missing and altered documents were simply the result of computer error or clerical error. Twelve boxes of documents. That is what senior defence officials were forced to grudgingly turn over to the Somalia inquiry.

The commission counsel announced this morning that there are still gaps. How much more evidence does the minister need before he takes some action, any action, on the Somalia cover-up?

Hon. David M. Collette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, the hon. member again continues to make very serious allegations which do not reflect what was said this morning by the commission.

I answered his specific questions which were posed a little earlier with respect to the documentation, but I will briefly repeat them.

On the public affairs issue, those documents will be the subject of discussions and hearings beginning on Wednesday. The commission is satisfied that all the documents that have come forward, together with testimony, should enable the commission to reach the goal of its mandate, which is to get to the bottom of the entire—

The Deputy Speaker: The hon. member for Okanagan—Similkameen—Merritt.

Mr. Jim Hart (Okanagan—Similkameen—Merritt, Ref.): Mr. Speaker, the minister tries to make us believe that this was a timely delivery of documents when he knows full well that these documents should have been delivered a year ago to the Somalia commission.

Along with the 12 boxes of information turned over to the inquiry, we also learned from Roberto Gonzales, a former director general of public affairs at DND, that General Boyle approved of a

Oral Questions

plan to hide important Somalia documents. This confirms earlier allegations made by Colonel Haswell who said that Boyle, de Chastelain and Mr. Robert Fowler knew of the planned cover-up.

Can the minister confirm today that General Boyle had nothing whatsoever to do with the cover-up?

Hon. David M. Collenette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, I really should refuse to answer such innuendo. The hon. member has made selective accusations every day in the House. He has maligned a public servant, who is the chief of defence staff.

All of these matters will be dealt with by the commission starting next Wednesday. That is the place where all the evidence should be submitted. That is the place where people should be heard. That is the place where conclusions should be drawn.

Mr. Jim Hart (Okanagan—Similkameen—Merritt, Ref.): Mr. Speaker, why will the minister not show some leadership and take the bull by the horns instead of dragging the bull into the House each and every day?

General Boyle said he had no knowledge of a plan to alter, rename and destroy documents related to the Somalia affair. Colonel Haswell and Roberto Gonzales say that is not true. They say that all Somalia information requests had to be approved by General Boyle. Boyle's signature even appears—

The Deputy Speaker: The member will please put his question directly.

Mr. Hart: Why is the minister allowing Boyle to stay in charge when all of the evidence indicates that Boyle is involved in this cover-up?

Hon. David M. Collenette (Minister of National Defence and Minister of Veterans Affairs, Lib.): Mr. Speaker, the hon. member can be assured that I certainly have taken the bull by the horns. I have done that by answering his questions all week.

The hon. member has gone through a number of contortions. I have pointed them out on the utility of the inquiry.

The hon. member has gone from the position that the chief of defence staff should never have been appointed, to the chief of defence staff should resign, to the suggestion that he should step aside, and to the fact yesterday that he does not blame him. Today he is back to the earlier accusations.

The member and his party have no credibility on the issue. Canadians understand that the inquiry will deal with the matter and will get to the bottom of it with all the answers.

[Translation]

NUCLEAR FUSION

Mr. Stéphane Bergeron (Verchères, BQ): Mr. Speaker, my question is for the Acting Prime Minister.

I listened with interest to the finance minister saying a moment ago that Canada was willing to help Quebec. I do hope that his good intentions will materialize with respect to the issue of nuclear fusion.

• (1130)

Since we started asking the natural resources minister questions on the tokamak project, she has been giving us rubbish for answers. For instance, she said that in Quebec the loss of this project would be balanced by the manufacturing and sale of Candu reactors, which is false, since this will benefit mainly New Brunswick and Ontario.

Moreover she told us that Quebec is getting 25 per cent of her department's expenditures. We checked, the actual figure is 8 per cent, and it will fall below 6 per cent with the cancellation of the tokamak project.

Can the federal government bring its Minister of Natural Resources back to her right mind and make sure that Quebec is no longer penalized in such a way, starting with re-establishing its \$7.5 million contribution to the tokamak project, the product of 20 years of efforts, research, investment and world level expertise?

[English]

Mrs. Marlene Cowling (Parliamentary Secretary to Minister of Natural Resources, Lib.): Mr. Speaker, contrary to what the hon. member says, fusion research was not only cut in Quebec, it was also cut in Ontario. The Quebec component cut was \$4.4 million; the Ontario component cut was \$7.2 million, nearly twice as much.

We are not abandoning Quebec. Natural Resources Canada R and D initiatives in Quebec are, and I will read them: Energy Diversification Research Laboratory in Varennes; Quebec Geoscience; Candu; Val-D'Or laboratory; Canada Centre for Geomatics—

The Deputy Speaker: The hon. member on a supplementary.

[Translation]

Mr. Stéphane Bergeron (Verchères, BQ): Mr. Speaker, I hope that one of these days someone in this government is going to rise and give intelligent answers to our questions. The parliamentary secretary should know that the amount the federal government is withdrawing from the tokamak project is \$7.5 million.

Oral Questions

Is the federal government finally going to decide to answer, on behalf of the Minister of Natural Resources, a letter dated April 2 and signed by the deputy premier of Quebec—

The Deputy Speaker: I would ask the member to put his question immediately.

Mr. Bergeron: I will repeat my question, Mr. Speaker. Is the government finally going to decide to answer, on behalf of the Minister of Natural Resources, a letter dated April 2 and signed by the deputy premier of Quebec, minister of state for natural resources and minister responsible for industry and trade?

The Deputy Speaker: The parliamentary secretary.

[*English*]

Mrs. Marlene Cowling (Parliamentary Secretary to Minister of Natural Resources, Lib.): Mr. Speaker, let me remind the member it is not only the federal Liberal government that is making difficult choices. He should look in his own backyard.

The PQ government has cut \$350 million from hospitals, from the sick; \$65 million from Cégeps, junior colleges; \$300 million from primary—

The Deputy Speaker: The hon. member for Calgary Centre.

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GOODS AND SERVICES TAX

Mr. Jim Silye (Calgary Centre, Ref.): Mr. Speaker, yesterday the finance minister had a little problem with his throat. I hope it has cleared up today. My question is directed to him.

He said yesterday that harmonization will lead to a better tax for consumers and for small business. How can that be, given that the combined tax increases taxes by 8 per cent on goods and services in areas that were untaxed before, areas like children's textbooks, wheelchairs and medical supplies, just to name a few?

The finance minister is willing to spend a billion dollars from the federal coffers to compensate three Liberal provinces for any lost revenues. Who will compensate the taxpayers of these provinces for their extra personal costs?

Hon. Paul Martin (Minister of Finance, Lib.): Mr. Speaker, the hon. member ought to know that the fundamental problem with most of the provincial sales taxes is that they are embedded in the price at each successive stage. Therefore the consumer pays a great deal more in tax under most provincial sales taxes than under the GST. The net result of this will be a lowering of the tax on all of those items that are currently taxed under provincial taxes.

• (1135)

Mr. Jim Silye (Calgary Centre, Ref.): Mr. Speaker, if that is the case, then why are all the provinces saying there are lost revenues?

The finance minister is wreaking havoc in the Atlantic provinces with his bad harmonization tax. It is putting Prince Edward Island at a competitive disadvantage. Conservative provincial governments have said no. NDP provincial governments have said no. Only three Liberal provincial governments have said yes, thanks to a billion dollar bribe just to keep the deputy minister around a little longer.

Why does the finance minister not do the right thing and for the sake of all Canadians get rid of, abolish, kill, eliminate, scrap and agree to quit if he does not, this monster he is creating called harmonization with compensation?

Hon. Paul Martin (Minister of Finance, Lib.): Mr. Speaker, one of the principles upon which this country has been built is that one region of the country helps another whether it be through equalization, the social transfer or the way in which stabilization payments are made by the federal government to help provincial governments that have had difficulty.

I find it very difficult to hear members of the opposition, whether they be from the Bloc Québécois or the Reform Party, essentially say that certain regions of the country should not help the others when there is a process of adjustment. I do not share that view. This is one country and one country in a multitude of others. We are going to stand up to the rest of the world because we will stand together. We will not be divided.

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[*Translation*]

KREVER COMMISSION

Mrs. Madeleine Dalphond-Guiral (Laval Centre, BQ): Mr. Speaker, my question is for the Minister of Health.

The Commission of inquiry into our national blood supply is caught in a legal tangle, because of all the confusion surrounding the mandate of the commission. There is no agreement over the authority of the Krever commission to issue notices of possible misconduct, hence the court proceedings. The opposition reminds the government that its priority should go to the victims of tainted blood and not this legal battle.

For everyone's benefit and because this is a federal inquiry and a public health issue—

The Deputy Speaker: Was the question put?

Mrs. Dalphond-Guiral: Mr. Speaker, at the time the people across the way were calling for my question, I was putting it. What more do you want?

Oral Questions

Again, here is my question: For everyone's benefit and because this is a federal inquiry and a public health issue, can the minister dispel the confusion surrounding the mandate of the commission by clearly stating his position on this matter?

[English]

Hon. David Dingwall (Minister of Health, Lib.): Mr. Speaker, the Krever inquiry was set up to inquire into the problems that were faced with the blood supply. It is the desire of the government and all provincial governments to see that the report is finalized and brought forward.

The member will note that the interim recommendations have been acted upon by the federal government. An extension has been granted to Mr. Justice Krever and the commission to allow their work to be completed. The reason for the court proceedings is to ensure that the rules of natural justice and procedural fairness are applied throughout the proceedings. We are also hoping for a finalized report as soon as possible.

[Translation]

Mrs. Madeleine Dalphond-Guiral (Laval Centre, BQ): Mr. Speaker, can the minister tell us if the commission will in fact be entitled to issue notices of possible misconduct?

[English]

Hon. David Dingwall (Minister of Health, Lib.): Mr. Speaker, with respect to the matters that are now before the court, it would be inappropriate to comment on the matter. However, it is the desire of this government and all parties involved to ensure that the rules of procedural fairness and natural justice are applied throughout the proceedings from start to finish.

We look forward to the decision of the court and ultimately to the report of Mr. Justice Krever.

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FISHERIES

Mr. Mike Scott (Skeena, Ref.): Mr. Speaker, my question is for the Minister of Fisheries and Oceans.

The west coast fishery is being assaulted by the minister. Fishermen are being told to sell their licences back before the government discloses what the fish harvest quota will be.

● (1140)

Fishermen cannot possibly make a rational decision about whether to get out of business when they are not being told how many fish they will be able to catch. This is more than absurd, it is an insult.

On behalf of fishermen whose livelihoods are at stake, will the minister delay the buy back until the fishermen know the future of fish quotas in British Columbia?

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I could give a short answer but I know the hon. member is sensitive to the needs and concerns of commercial fishermen.

This program is designed to address the very sad state of the salmon fishery in British Columbia. I know he is aware of that. It is also designed in such a manner that although it is tough medicine and a bold program, it has to address in a very specific manner the reduction of the capacity, which everybody agrees is the problem in the industry.

Nobody has been told to return their licences. This is a voluntary program which has been championed by the industry. We believe the program will work. I certainly would appreciate the hon. member's support.

Mr. Mike Scott (Skeena, Ref.): Mr. Speaker, perhaps the minister is not aware that there was a delegation of people here from British Columbia yesterday representing half a million commercial fishermen, people in small communities who do not agree with his plan.

When I asked him the other day if he would set quotas before implementing the buy back he said "regrettably not." What is regrettable is the total disregard the government and the minister continually show for the fishermen on the west coast.

The minister has the power to delay the buy back until the quotas are set. Why he is refusing to do so I do not know. Why is he refusing to ensure the stability of the industry and the stable income of families that depend on the fishery?

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, not to set a fine point on this, I want to make sure the hon. member knows and the House realizes that it is 500,000 people in the communities. The number of commercial fishermen, including workers in the plants, is 20,000. I am sure he would not want to leave that impression.

The parliamentary secretary met with these concerned groups yesterday. It is my intention to meet with them after question period to hear their concerns.

I also remind the hon. member there are many groups in his area that support the fishermen. I quote one British Columbia fisherman: "Fleet reduction is too important to the survival of the west coast salmon industry not to be implemented".

I will stick tough with this program and it will continue.

* * *

[Translation]

MAURICE LAMONTAGNE INSTITUTE

Mr. René Canuel (Matapédia—Matane, BQ): Mr. Speaker, my question is for the Minister of Fisheries and Oceans.

Oral Questions

The reputation of the Maurice Lamontagne Institute is firmly established. This institute employs 280 people at the present time and offers, among other things, a fish stock evaluation program as well as hydrographic services. Yet, its future is threatened.

The Maurice Lamontagne Institute's hydrographic service is one of its main components. Can the minister confirm to us that his department is about to shut down this service and transfer the activities to Cornwall, Ontario, which would mean the loss of dozens of jobs in Quebec?

[English]

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I appreciate the hon. member's question and the courtesy he has afforded me by discussing this beforehand.

The institute is a well respected one which essentially looks after research in the St. Lawrence River and the St. Lawrence estuary. It is an institute that regrettably has come under the program review and there have been program reductions.

The work continuing in the valuable research in his institute will continue despite the cuts. We will have to cut back in certain areas. However, I assure the hon. member and the House this valuable institute, so highly respected, will continue to exist.

[Translation]

Mr. René Canuel (Matapédia—Matane, BQ): Mr. Speaker, the Maurice Lamontagne Institute has to continue to exist, but it is getting smaller and smaller each year, and Quebecers are really concerned about that.

Is the minister telling us that, just like in Varennes, the federal government is reducing even more its financial participation in advanced research in Quebec?

[English]

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I assure the hon. member this is not the case.

• (1145)

There have been similar institutes oriented in areas other than marine science. For example, we had the same program at the freshwater institute and the Great Lakes experimental stations.

It is all part of the requirement of my department to reduce our operation by 40 per cent. It applies from one coast to the other.

* * *

FISHERIES

Mr. Gerry Byrne (Humber—St. Barbe—Baie Verte, Lib.): Mr. Speaker, the sentinel fishing program has been a valuable tool in the monitoring of groundfish stocks currently under moratoria.

The program has also helped to foster a positive relationship between scientists and fishermen.

Will the minister assure the House the sentinel fishing program will continue?

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I thank the hon. member and congratulate him on his first question in the House. The question is important. As everybody in the House knows, the state of the cod stocks in Atlantic Canada is dangerously low, particularly the northern cod stocks.

The purpose of this program is to have commercial fishermen who are properly trained to measure, under controlled circumstances, the inshore fishery by actually setting nets and counting fish. This is a valuable complement to the scientific surveys carried out offshore and in other community areas.

The real purpose is to measure the abundance and the migration pattern, to have real biological data which complement scientific data and to work in harmony with scientists in close consultation for the systematic betterment of—

The Deputy Speaker: The hon. member for Crowfoot.

* * *

YOUNG OFFENDERS

Mr. Jack Ramsay (Crowfoot, Ref.): Mr. Speaker, this week the justice committee has heard heartbreaking testimony about how the Young Offenders Act has failed Canadians. The chiefs of police association said yesterday that the YOA has done more to undermine faith—

The Deputy Speaker: Would the hon. member please not refer to matters in committee and put the question directly. Rephrase the question.

Mr. Ramsay: Mr. Speaker, my question for the justice officials is why has the government ignored victims' pleas by refusing to publish the names of violent young offenders, abolish the minimum age of 12 for young offenders and hold parents financially responsible for children's criminal actions when appropriate?

Mr. Gordon Kirkby (Parliamentary Secretary to Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, I thank the hon. member for his question. As the hon. member is aware, the government has acted in relation to the Young Offenders Act already, increasing penalties for the most serious crimes and reversing the onus as to whether a youth case should be tried in adult court.

We are now engaged in a process in the justice committee to hear input on further possible changes. He is part of that committee and will sit with us as we—

The Deputy Speaker: The member for Crowfoot.

Oral Questions

Mr. Jack Ramsay (Crowfoot, Ref.): Mr. Speaker, the jury is in on many of the obvious reforms to the Young Offenders Act. Can the Parliamentary Secretary to Minister of Justice explain to the parents of victims why the minister under Bill C-37 reduced the parole eligibility of a young offender convicted of second degree murder from a maximum of 10 years to 7 years?

Mr. Gordon Kirkby (Parliamentary Secretary to Minister of Justice and Attorney General of Canada, Lib.): Mr. Speaker, as the hon. member is aware, we have implemented changes to the Young Offenders Act to stiffen the penalties in the most serious cases.

We continue to review the matter through the justice committee and we look forward to hearing the results of that report.

* * *

[Translation]

COAST GUARD

Mr. Yvan Bernier (Gaspé, BQ): Mr. Speaker, yesterday morning in Quebec City, all stakeholders in Quebec's marine sector expressed a clear consensus against the new fee structure the minister of fisheries is about to impose.

Quebec's Minister of Transportation and the seven mayors of the cities with the biggest ports in Quebec, together with representatives of the aluminum industry and all stakeholders in the marine sector, stated very clearly that the minister's new fee structure would likely have a disastrous impact on the Quebec economy.

• (1150)

Can the minister of fisheries tell us if his government intends to respect this Quebec consensus against a new fee structure that could have disastrous consequences on the Quebec economy and on all ports along the St. Lawrence?

[English]

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I thank the hon. member for his question. He is aware we have been through this procedure since January. We have consulted with the industry. We have taken recommendations from the Marine Advisory Board.

The hon. member is involved in the final report of the fisheries committee on this very important subject. I appreciate his co-operation and the contribution he is making.

One more time, I assure the House and the hon. member that in this project as we ratchet up from \$20 million, \$40 million, \$60 million over a period of four years, we will put together a system that is the most fair and equitable to all parts of Canada.

[Translation]

Mr. Yvan Bernier (Gaspé, BQ): Mr. Speaker, apart from the problem with the figures the minister just quoted, the consensus I referred to in my first question also reflects that problem.

Does the minister of fisheries admit he is duty bound to respect such a broad consensus against his proposal as drafted, which affects not only Quebec but also Ontario and many stakeholders in the maritimes, including Newfoundland's Oceanex and the port of Halifax?

[English]

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I may have missed the intonation of the last part of the hon. member's question but I do not think it is important to the answer.

All these aspects have been taken into consideration. Nobody wants to pay any more for anything. The regrettable part of this is we have to go forward with it. It has been passed by this very Parliament.

If the hon. member is trying to derail this issue and defer it for another time, it will cost the industry more money. I am sure he would not want to be part of something to do that.

* * *

AUTO LEASING

Mr. Herb Grubel (Capilano—Howe Sound, Ref.): Mr. Speaker, the Reform Party wants deregulation for the benefit of consumers, but letting banks into car leasing will not be good for consumers. Without more competition among banks, it will only fatten their already fat wallets.

Will the minister assure the House banks will not be allowed to expand their business until they are also forced to face more competition?

Hon. Douglas Peters (Secretary of State (International Financial Institutions), Lib.): Mr. Speaker, the hon. member is well aware there will be a policy paper put out by the government in a little while which will treat many of these issues.

Mr. Herb Grubel (Capilano—Howe Sound, Ref.): Mr. Speaker, all the minister's recent announcements are about demands from the banks for more business.

The demands by others for more freedom to compete with the banks are never mentioned. I am sure this has nothing to do with the banks' generous financial support for the Liberal Party and the government's \$105,000 grant to the Canadian Bankers Association.

Will the minister assure the House that the up-coming white paper will level the regulatory playing field between banks and their competitors?

Oral Questions

Hon. Douglas Peters (Secretary of State (International Financial Institutions), Lib.): Mr. Speaker, he will have to wait for the white paper to see what it says.

* * *

LEBANON

Mr. Mark Assad (Gatineau—La Lièvre, Lib.): Mr. Speaker, my question is for the Minister of Foreign Affairs.

For over two years now the people of Lebanon have made immense sacrifices to rebuild their beleaguered country, which has been laid waste by foreign invaders.

The reopening of the Canadian embassy inspired great hope for the Lebanese people, but an excessive military reprisal by Israel destroyed all that and the mounting debt toll is a disgrace. The decisive attack on an electrical power plant in the populous city of Beirut is an example of the excess.

• (1155)

I ask the minister what the Canadian government intends to do to come to the aid of hundreds of thousands displaced Lebanese people. In particular, what influence can it bring to the United Nations to assure that resolution 425 will be respected once and for all?

Hon. Christine Stewart (Secretary of State (Latin America and Africa), Lib.): Mr. Speaker, the Government of Canada deplores the attacks against the civil population of Lebanon and the peacekeeping base within Lebanon in recent days.

We have received a request from the International Red Cross for assistance to the people of Lebanon and we are at his moment considering what we can do to come to their aid. It is something we intend to do.

Canada is not a member of the security council of the United Nations. Yesterday we did support its resolution deploring the attacks against Lebanon and we have asked for an immediate ceasefire on the part of all parties. We want to see negotiations bring about a peaceful resolution to the situation there.

Canada does support the integrity of Lebanon's territory through resolution 425. We will do everything we can to assure that integrity is achieved through ongoing negotiated peace accords in the area.

* * *

[Translation]

QUEBEC BRIDGE

Mr. Antoine Dubé (Lévis, BQ): Mr. Speaker, on December 20, 1993, the Clerk of the Privy Council, Jocelyne Bourgon, wrote to Quebec's Deputy Minister of Transportation, Georges Lalande, that the Government of Canada's title over railway property would be

transferred over a five year period. This seems to indicate that complete ownership will be transferred to CN by 1998.

Based on the foregoing, does the Minister of Transport recognize the facts stated in the letter written by the Clerk of the Privy Council and could he at the same time recognize that, until the property transfer has been completed, the federal government is still fully responsible for restoring the Quebec bridge?

[English]

Mr. Stan Keyes (Parliamentary Secretary to Minister of Transport, Lib.): Mr. Speaker, I thank the hon. member for his question. He has shown great interest in the pont de Québec. We have to realize this is a magnificent structure. I have seen it from a boat underneath, et cetera.

However, CN is the owner of the pont de Québec and CN is responsible for it and charged with paying for the renovations to the bridge. It fully intends to, with \$1.5 million to \$2 million in bridge repairs this summer. More could be had if the hon. member can impress upon the minister of transport in the province of Quebec to talk to CN to get more funding to maintain that wonderful, beautiful structure, the pont de Québec.

* * *

PEARSON AIRPORT

Mr. Jim Gouk (Kootenay West—Revelstoke, Ref.): Mr. Speaker, the government has announced it intends to reintroduce Bill C-22, a bill which cancelled the Pearson development contract retroactively so as to say no contract existed.

The Supreme Court of Ontario has already ruled the contract was valid and that the government was in breach of that contract. Subsequent government appeals have been lost by the government.

Can the minister explain how he can justify reintroducing this unconstitutional bill so that history can be rewritten to suit the Liberal Party?

Mr. Stan Keyes (Parliamentary Secretary to Minister of Transport, Lib.): Mr. Speaker, in a few minutes it is the intention of the federal government to reintroduce on behalf of the Minister of Transport the so-called Pearson bill in its original form and at the stage it was at prior to prorogation. It then will move on immediately to the Senate for first reading.

It was a bad deal then and it is still a bad deal. Maybe it is more in the interest of the member to support what is important to the Canadian taxpayer than to support the interests of his friends the lobbyists.

* * *

FISHERIES

Mr. Nelson Riis (Kamloops, NDP): Mr. Speaker, my question is to the minister of fisheries. As a member for British Columbia, I feel obligated to say there is a sense of rage and British Columbians

Oral Questions

are feeling betrayed by the minister of fisheries in imposing the so-called Mifflin plan as a solution.

There were 500,000 coastal representatives on Parliament Hill yesterday, saying his plan is wrong. Will the minister listen to the people of British Columbia this time and pull back from implementing his plan? This would allow British Columbians to have proper input into the decision on how to deal with the fishery crisis.

• (1200)

Hon. Fred Mifflin (Minister of Fisheries and Oceans, Lib.): Mr. Speaker, I have made it clear that I will be meeting with a group from British Columbia. I have great sensitivity to their concerns but I have to tell the member that in this matter the fish come first, the fishermen and then the politics.

* * *

THE ENVIRONMENT

Mr. John Finlay (Oxford, Lib.): Mr. Speaker, during the last week of March, Canada hosted Globe '96 in Vancouver, an international trade fair and conference on developing the business of the environment.

What are the direct benefits to Canada from the money we spent to host this conference?

Hon. Sergio Marchi (Minister of the Environment, Lib.): Mr. Speaker, I thank the member not only for his question but for the interest he has consistently displayed since being elected to this Chamber on the whole question and file of the environment.

The Globe conference was probably the premier conference anywhere in the world that very eloquently showcased environmental technologies. There were representatives from 60 different countries and 123 officials just from China. It says that there are 4,500 small and medium size Canadian firms employing 200,000 Canadians in good jobs, jobs for the economy. It also underscores that it is not a question of a good environment or jobs; we can, we should and we will have both.

* * *

[Translation]

RAW MILK CHEESE

Mr. Bob Ringma (Nanaimo—Cowichan, Ref.): Mr. Speaker, my question is for the Minister of Health, who seems to be a little lonesome today, as no questions have been put to him so far. Dairy producers are going through very rough times. After losing federal subsidies, they now have to battle American dairy producers on import tariffs.

Why does the minister want to make the lives of dairy producers, and those who make cheese from raw milk in particular, even more difficult with a study aimed at banning cheese made from raw milk?

[English]

Hon. David Dingwall (Minister of Health, Lib.): Mr. Speaker, I am tempted to respond in a way which is somewhat repugnant of the kind of question the hon. member has put forward. Is the hon. member suggesting that the Minister of Health, federally or provincially, when they become aware of scientific evidence which suggests that the risk will be increased that we not share that information with Canadians?

The purposes of gazetting the information is to consult with the industry to make sure there will be no ill effects in terms of health for any Canadian.

I hope the hon. member who is a reasonable individual most of the time would want to support that kind of approach.

* * *

[Translation]

FOREIGN AFFAIRS

Mr. Philippe Paré (Louis-Hébert, BQ): Mr. Speaker, my question is for the Minister of Foreign Affairs.

Stephan Zbikowski, a Canadian citizen from the riding of Verchères, who was arrested in Venezuela in December 1994 for cocaine trafficking, has been held in Carabobo maximum security penitentiary ever since. Note that no charges have yet been laid against Mr. Zbikowski by Venezuelan authorities and that, while awaiting trial, he is being held with inmates considered to be dangerous offenders.

In light of the fact that Mr. Zbikowski has been detained for 16 months without trial and that the actions taken by Canadian officials were unsuccessful, does the minister plan to exert diplomatic pressure to speed things up so that this Canadian citizen can finally be tried?

[English]

Hon. Christine Stewart (Secretary of State (Latin America and Africa), Lib.): Mr. Speaker, our Department of Foreign Affairs provides very good consular services to Canadians in trouble abroad.

I am not familiar with the details of this particular case but I would be very happy to put our department in contact with the hon. member so that he can receive some answers about this case.

• (1205)

[Translation]

POINT OF ORDER

TABLING OF DOCUMENTS

Mr. Stéphane Bergeron (Verchères, BQ): Mr. Speaker, over the last few weeks I have noticed that some members of this House know very little about the tokamak issue. For their benefit, I am seeking the unanimous consent of the House to table the letter which was signed by the three Quebec ministers and which provides the real figures, the real facts and the real issues relating to tokamak.

The Deputy Speaker: Is there unanimous consent?

Some hon. members: No.

ROUTINE PROCEEDINGS

[English]

GOVERNMENT RESPONSE TO PETITIONS

Mr. Morris Bodnar (Parliamentary Secretary to Minister of Industry, Minister for the Atlantic Canada Opportunities Agency and Minister of Western Economic Diversification, Lib.): Mr. Speaker, pursuant to Standing Order 38(6), I have the honour to table, in both official languages, the government's responses to 14 petitions.

* * *

INTERPARLIAMENTARY DELEGATIONS

Mr. Francis G. LeBlanc (Parliamentary Secretary to Minister of Foreign Affairs, Lib.): Mr. Speaker, pursuant to Standing Order 34(1), I have the honour to present to the House, in both official languages, the reports of the Canada-Europe Parliamentary Association to the monitoring of Russian elections for the OSCE parliamentary assembly held in Russia from December 13 to 19, 1995, and to the meetings of the bureau and the standing committee of the Parliamentary Assembly of the OSCE held in Vienna on January 10 and 11, 1996.

* * *

PEARSON INTERNATIONAL AIRPORT AGREEMENTS ACT

Hon. Douglas Young (for the Minister of Transport, Lib.) moved for leave to introduce Bill C-28, an act respecting certain agreements concerning the redevelopment and operation of Terminals 1 and 2 at Lester B. Pearson International Airport.

He said: Mr. Speaker, on a point of order, I wish to state that this bill is in the same form as Bill C-22 of the first session of the 35th

Routine Proceedings

Parliament at the time of prorogation. I therefore request that it be reinstated as provided in the special order adopted on March 4, 1996.

(Motions deemed adopted, bill read the first time and printed.)

The Deputy Speaker: The Chair is satisfied that the bill is in the same form as Bill C-22 was at the time of prorogation of the first session of this Parliament.

[Translation]

Consequently, pursuant to order adopted Monday, March 4, 1996, the bill is deemed to have been passed at all stages in the House.

[English]

Mr. Gouk: Mr. Speaker, I would like to seek unanimous consent of the House for permission to ask the minister who just introduced the bill if in the name of democracy he would permit a single question on this subject.

The Deputy Speaker: Is there unanimous consent for that request?

Some hon. members: No.

* * *

DEPARTMENT OF AGRICULTURE AND AGRI-FOOD ACT

Mr. Peter Milliken (Kingston and the Islands, Lib.) moved for leave to introduce Bill C-268, an act to amend the Department of Agriculture and Agri-Food Act.

He said: Mr. Speaker, the purpose of this bill is to delete the section of the agriculture act which permits the governor in council to assign powers or duties to the minister of agriculture. These powers are currently used to create new agricultural programs.

The reports of the Auditor General of Canada tabled in the House in 1989 and in 1992 recommended that this power be deleted from the act. This bill carries out that purpose and will require the minister to come to the House if he seeks to establish a new agricultural program rather than create it on his own without the proper authority.

That is the purpose of the amendment to the act. It is a short and very simple act and I hope it will commend itself to all hon. members.

(Motions deemed adopted, bill read the first time and printed.)

* * *

CANADA ELECTIONS ACT

Mr. Peter Milliken (Kingston and the Islands, Lib.) moved for leave to introduce Bill C-269, an act to amend the Canada Elections Act and the Parliament of Canada Act.

Routine Proceedings

• (1210)

He said: Mr. Speaker, the purpose of this bill is to ensure that when a vacancy occurs in the representation, a byelection shall be held within 80 days after the Speaker sends his warrant to the Chief Electoral Officer for the issue of a writ.

(Motions deemed adopted, bill read the first time and printed.)

* * *

FINANCIAL ADMINISTRATION ACT

Mr. Peter Milliken (Kingston and the Islands, Lib.) moved for leave to introduce Bill C-270, an act to amend the Financial Administration Act (session of Parliament).

He said: Mr. Speaker, the purpose of this amendment to the Financial Administration Act is to prevent the kind of abuse this House suffered under the previous Tory government when in 1989 special warrants of the Governor General were used and the regular supply proceedings were thereby avoided.

The purpose of this act is to stop that kind of abuse of Parliament. It will ensure that Governor General warrants may not be used between sessions of Parliament but only after a dissolution of Parliament and before the recall of a new Parliament.

(Motions deemed adopted, bill read the first time and printed.)

* * *

PUBLIC SERVICE EMPLOYMENT ACT

Mr. Peter Milliken (Kingston and the Islands, Lib.) moved for leave to introduce Bill C-271, an act to amend the Public Service Employment Act (appeal procedures).

He said: Mr. Speaker, in 1988 the Standing Joint Committee for Regulatory Scrutiny adopted a report which recommended changes in the regulations dealing with the way the Public Service Commission deals with appeals.

The report of the committee was apparently adopted by the House and a response was required from the government. The response came in the dying days of the session before the election in 1988 and the commission which reports to Parliament decided not to proceed with any of the recommendations.

Subsequently, the act has been amended in some areas but some other changes are contained in this bill. In view of the intransigence of the commission and in view of the other changes that were not adopted, I have proceeded with this bill again, as I had done so in the previous Parliament, in order to make it mandatory in the act that certain procedural safeguards recommended by the committee in that old Parliament be incorporated as part of the rules of the Public Service Commission.

(Motions deemed adopted, bill read the first time and printed.)

* * *

[Translation]

PETITIONS

TRAN TRIEU QUAN

Mr. Philippe Paré (Louis-Hébert, BQ): Mr. Speaker, since the issue was raised on several occasions in this House over the last two years, you are aware of the plight of a constituent of mine, Tran Trieu Quan, who has been imprisoned in Vietnam for over two years now.

What Mr. Tran has been going through has generated sympathy and compassion in the Quebec City region and throughout the province. The 4,540 petitioners who signed this second petition are asking Parliament to ensure the safety and release of Mr. Tran at the earliest opportunity.

[English]

HUMAN RIGHTS

Mr. Ed Harper (Simcoe Centre, Ref.): Mr. Speaker, I have two petitions to present today.

The first petition requests that the Government of Canada not amend the human rights act to include the phrase sexual orientation. The petitioners fear that such an inclusion would indicate societal approval of homosexual behaviour. The petitioners believe that government should not legitimize this behaviour against the clear wishes of the majority.

GOVERNMENT SPENDING

Mr. Ed Harper (Simcoe Centre, Ref.): Mr. Speaker, my second petition contains the signatures of 236 constituents.

These petitioners point out that this government is currently spending \$90 million a day more than it is bringing in. The petitioners request that the government cuts spending in order to balance the budget by December 31, 1998, without any new taxes or tax increases.

* * *

• (1215)

QUESTIONS ON THE ORDER PAPER

Mr. Morris Bodnar (Parliamentary Secretary to Minister of Industry, Minister for the Atlantic Canada Opportunities Agency and Minister of Western Economic Diversification, Lib.): Mr. Speaker, I ask that all questions be allowed to stand.

The Deputy Speaker: Is it agreed?

Some hon. members: Agreed.

GOVERNMENT ORDERS

[English]

DEPARTMENT OF HEALTH ACT

The House resumed consideration of the motion that C-18, an act to establish the Department of Health and to amend and repeal certain acts, be read the third time and passed.

The Deputy Speaker: The hon. parliamentary secretary had the floor and if he wishes he is entitled to speak for another 36 minutes.

Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.): Mr. Speaker, I do not know why you would want to limit me. We are talking about something that is fundamental to the Canadian health system. We are talking about responsibility, jurisdiction and accountability.

To reframe everything for everyone's edification, when the debate was interrupted by question period I was talking about jurisdiction in the Constitution of Canada. I was looking at why and how it was flexible and why and how the role of the federal government has evolved and continues to evolve under those jurisdictions.

When interrupted I was making reference to section 92. Canada's Constitution does not begin and end with section 92. That is most particularly true in the field of health. Very briefly, let me describe what that means.

I see my esteemed colleague has joined the ranks of the House. He is listening very attentively so that I make all of the appropriate references under the Constitution. I refer to the Minister of Intergovernmental Affairs who is a constitutional expert. I look forward to his applauding my references.

Section 91(27) gives the Parliament of Canada exclusive jurisdiction over criminal law, the basis for a number of laws protecting public health and safety. Section 91(2) assigns responsibilities to the federal government for international and interprovincial trade. This forms the basis for federal regulations on drugs and medical devices, as an example.

Section 91(11) gives the federal Parliament explicit power over quarantine and marine hospitals, which I would add, reveals a good deal of the thinking back in 1867 about where matters cease to be local and begin to take on national significance.

Government Orders

Section 91(7) concerns military and veterans. Section 91(8) has to do with the federal public service and section 91(4) concerns aboriginals and lands reserved to aboriginals.

Every one of these powers establishes or implies a clear federal role in health issues. They account for the considerable array of the duties and responsibilities set out in clause 4 of Bill C-18.

Moreover, they account for the vast majority of Health Canada's operating expenses. Health, when viewed from a perspective of federal constitutional responsibilities, is clearly a good deal broader than the health care delivered. It is a comprehensive view and has been for many years.

This is where other federal powers have come into play. Much has been made in the course of debate of the federal spending power. That is specified in section 91(1A) of the Constitution. Much has been made of the power to raise money by any mode of taxation for which there is provision in section 91(3).

However, do these powers broaden the sphere of federal regulation? Do they offer the opportunity for jurisdiction by stealth, as it were? The reality is that nothing in the Constitution gives the federal Parliament the means to regulate provincial matters in the guise of spending powers. I think my hon. colleague would agree. 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 provinces accept those funds.

• (1220)

Clause 12 of Bill C-18 makes this limitation clear. It continues a point that was made in the existing Department of National Health and Welfare Act:

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.

This is why the Canada Health Act does not forbid user fees, if I can conjure up the term, nor does it require provincial legislatures to forbid them. I ask members to take careful note of the language being used. It simply makes it clear that any province that decides to finance medically necessary health services with user fees can expect a corresponding reduction in federal funding. They cannot have it both ways. The government is not obliged as a federal entity to spend money where it has a fundamental objection. This brings me to another myth, that is, the federal government is intruding in provincial jurisdiction.

It has been a constant theme in opposition commentary at almost every stage of the debate so far. Both opposition parties have made common cause in their belief that the best government in Ottawa is no government in Ottawa.

Government Orders

That is difficult to understand from members who get themselves elected to come to Parliament to represent the national interest. The motivation for the federal government's involvement in health financing does not derive from any desire to centralize powers. No one here has a wish to invade a field of purely provincial jurisdiction.

The federal role in health has been an exercise of leadership. There are those who would hold that leadership is not a word that is acceptable. Some of my colleagues opposite might think it is even a dirty word today. Some believe it to be a power grab. We should never apologize for saying that federal leadership in health is a commitment that Canadians expect and want exercised. I dare say that examples of that leadership abound.

We based our commitments on health to Canadians during the 1993 election campaign in a belief that when there are national needs, we need national action. It was part of our platform as a party and part of our platform as a government. It was the basis of programs outlined in the red book commitments. It continues to be the basis of action since. I would like to cite an example.

The Minister of Health has announced a leadership initiative in the blood system. A question came up today in question period. The government understands that the blood system needs to be restructured. Rebuilding the system is appropriate and right for the government to pursue in partnership with other systems.

When we recognize that, we give ample evidence of the kind of leadership role that the government has been exercising. A restructured system can only enhance the government's current efforts as a regulator to ensure safety and quality of the blood supply.

It is essential, I might add, as the minister underscored in question period, to act now and to begin the process before Justice Krever and his inquiry makes the final recommendations. There is no need to wait. The final report will not be ignored. It will be looked at as a building block of the new system.

Let me offer another example, if I may, of the kind of leadership Canadians want and support. In July 1994, some 18 months ago, the then Minister of Health, announced the Canada prenatal nutrition program. The program is helping to support other programs for pregnant women who have a high risk of delivering low birth weight babies. Members probably want to know why that is important. These programs provide food supplementation, nutrition, lifestyle counselling and information to such women.

The government designed this program to dovetail with existing provincial initiatives to encourage them where they do not now exist. Much of the program in the red book was based on building partnerships, not stimulating competition, at least in the area of government services. It was not designed to duplicate good programs that were already in place or to override them.

• (1225)

It should be noted that it could cost up to \$60,000 to meet the health needs of just one low birth weight baby. That is just the immediate financial cost. The price in developmental delays that can echo through the lifetime of such an individual, family and society are incalculable. These children start life well behind others. Many, unfortunately never catch up.

When you realize that 21,000 such babies are born each year, you begin to get an appreciation of the sheer magnitude of the problems being addressed by that program.

To hear some during the course of this debate, the federal government should just stick to its knitting and stay out of issues such as this. They seem to suggest that if there is no need for leadership, perhaps some provincial government may take action. If less affluent provinces cannot afford to take action, it is just one of those things, *c'est la vie*, as they say *en français*. That is their stand. It is not ours.

We have looked at the facts and the needs and we have taken action. Canadians will not buy limp excuses for inaction from my colleagues opposite, not for one second. They know that leadership does not involve the use of the word perhaps or the word may. They recognize that leadership is about seeing what needs to be done and finding the best way to do it.

Of course, the defining example of federal leadership in health has been our staunch defence of the principles of the Canada Health Act. The Minister of Health has been clear in his stand. He has said that he will debate the principles of the Canada Health Act with anyone, anywhere, at any time. One thing should be clear to all colleagues. Although the five principles may be debatable, they are not negotiable.

The government has never claimed that it wants to tell the provinces how to run their health systems. However, it does claim a nation building role of setting values that Canadians share no matter where they live.

It is equally clear that Canadians trust the government to defend those values. Canadians will not support the whittling away of the principles of medicare which some provinces have attempted. Canadians are clearly supportive of the federal government in its resolve to stand by those principles. Clearly, they do not accept such thin rationale, including the ones trotted out here by the opposition parties which pretend to support the principles of medicare while permitting their decline and erosion.

Leadership means taking a stand on fundamental issues. Medicare is one of those issues. I dare say that Canadians are happy of it.

Let us put the leadership issue into context. There is a real world of relations between the federal government and the provinces. It is not one of differences but one of co-operation. The leadership the government exercises in the field of health does not come from the

barricades. It comes from a long tradition of commitment to the health of Canadians. That commitment is shared by the provinces and the territories.

• (1230)

It is something that cannot be reflected in a written Constitution. It does not appear in the media obsession of conflict and tough talking sound bites, in five-second clips; yet it is a reality, day in and day out.

For us to achieve our health goals for Canadians, the federal government needs to work with provincial and territorial governments, and so we do. All governments need to work with health professionals and administrators, interested organizations and others with a contribution toward better health for Canadians. Once again, we do.

That co-operation takes place in so many ways. For example, we have 12 distinct but interlocking systems of health care in Canada. At a time when some are questioning the merits of federalism, it says a lot that governments have worked together so well that Canadians look at twelve systems and see only one.

They see medicare as a national program even if it consists of 12 different provincial and territorial health insurance plans. One reason for that almost seamless approach to health in Canada is the constant process of consultation and co-ordination that goes on.

One of the important vehicles we have is the conference of federal, provincial and territorial ministers of health. This forum allows governments to work together on research, policy development and practical issues.

This process of co-ordination allows governments to compare notes on the big issues that affect all of them. Consider health system renewal. We have clearly moved passed the time when the nips and tucks to the status quo will do. The issues are moving too fast for us to tinker with old approaches and the old paradigms in many cases.

Consider the broad issues. We have an aging population, which is already creating important implications for how we structure and how we deliver care. We have health inequalities that face the poor, rural dwellers, aboriginal people and women. We have a group of issues which speaks to how the health system works; cost control, the supply and distribution of physicians and the respective roles of all health professionals and need analysis.

The balance between institutional and community based care and the appropriateness and intensity of care are significant concerns. They all need good answers.

Leadership means thinking through these issues and their implications for the health of Canadians in a comprehensive and

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intelligent manner. The federal government has taken a leading role in these efforts through initiatives such as the national forum on health.

The federal government has never claimed sole ownership of this issue. We have recognized the impressive work of the provinces and the territories because they too exercise leadership. Within health care every province and territory has taken innovative reform and renewal actions. We have made clear our belief that we can learn from each other.

We can all contribute to addressing common priorities. Some are as basic, as the research into clinical practice guidelines. It is hard to believe but we have no firm idea how effective some common medical practices are in terms of either costs or results. This is an affliction for all western societies. Governments are working together to address issues such as this, but it is something governments alone can do.

For example, we worked with health professionals and other interested people in organizations. They are experts as well as users of the system with a stake in finding the answers. They continue this in many other areas of research, health, policy and program delivery.

Federal leadership in health is not about loud claims of moral power or of playing the constitutional trump cards. The legacy of leadership is not a hollow relic of the days when government coffers were bursting. It is a living tradition of looking out for the interests of all Canadians. It is a living tradition of seeing the gaps that affect the health of our citizens and in doing something to meet the need.

• (1235)

In a previous item of legislation, the old Bill C-91, there was some reaction to whether the Minister of Health would assume the responsibilities and would be held accountable for all of his responsibilities. Even though there was no question in our minds, we had a good representation by the hon. member for Fredericton—York—Sunbury who presented an amendment to eliminate all confusions. It was widely received by all members on both sides of the House and passed unanimously.

That is what we mean by looking at leadership. Leadership can mean action by this government alone but so often these days it means contributing to shared work. It is a form of leadership the government still believes to be absolutely important. It is one that Bill C-18 permits us to carry out.

I hope all members of the House will reflect on that carefully and give it resounding unanimous support.

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[Translation]

Mr. Antoine Dubé (Lévis, BQ): Mr. Speaker, I am pleased to rise in this debate on Bill C-18, given that I am a new member of the Standing Committee on Health. I have just come from the Standing Committee on Human Resources Development where, today, discussions were continuing on the bill establishing the Department of Human Resources Development. In my first speech on health, I have to recognize that the debate is of the same type.

Unfortunately, Quebecers' health care system is not entirely the product of political decisions and choices made in Quebec. The federal government has meddled in Quebec's affairs on a number of occasions. We must remember that the Constitution establishes health as a provincial matter.

To begin with, it should be remembered that the Quebec health care system existed long before the federal government intervened. The Government of Quebec set up the system and has always ensured its smooth operation. There are those who will claim that socialized health care was developed in Ottawa, but that is not the case.

The federal government simply passed the legislation justifying and providing the means for seizure of provincial jurisdictions. Every intrusion by the federal government through its legislation has brought a reaffirmation from the Quebec government of its control over and desire to exercise its jurisdiction over health care.

In 1987, Thomas Dupéré, of the Commission d'enquête sur les services de santé et les services sociaux du Québec, wrote that the implementation of federal programs had simply moved to the federal arena a debate which had begun at the provincial level and would have led to the same results in the same time span.

Intrusions started in 1943, when the Federal Department of Health established a national action plan on medicare. In 1945, it even proposed the implementation of a national program under full federal jurisdiction. And the federal government had the resources to realize its ambitions.

I have some difficulty concentrating on my speech because of the noise around me. Now, that is better.

● (1240)

So, from 1942 to 1947, Ottawa received more than \$2 billion from Quebec which in return got only \$100 million, in other words a pittance.

It is very clear that the federal government wanted to go even further in its determination to control and to give back to the provinces, not the tax powers they had before the war, but subsidies tied to the implementation of programs set up by the Government of Canada. That is what happened.

This was the beginning of a long centralization campaign by the federal government. In reaction, the provincial government of Quebec created its own income tax, Ottawa having refused to withdraw. Thus was born dual taxation from Quebec and Ottawa.

Successive Quebec premiers—among them Maurice Duplessis, with his famous slogan "Give us back our due", Jean Lesage and Daniel Johnson Senior—constantly tried to thwart this intrusion from the federal government and this seizure of some of the provincial financial powers.

This is how the federal government took upon itself the responsibility to finance, to some extent, the cost of health care and services. In so doing, it also grabbed the power to oversee the development and administration of the health care systems established by provincial governments.

Provinces wanted to improve their systems, but they had to organize and finance them at a time when they had just been stripped of some tax fields. As a result, they had to beg money from Ottawa. It is still the same today. The federal government may launch new ideas, but the provinces must find the money to fund them.

Let us turn to constitutional powers.

The federal government has violated the Constitution of Canada and still does so today. This is why the Prime Minister does not want to discuss the Constitution. He wants to proceed without discussing it.

However, the government itself admits that health and welfare are areas of provincial jurisdiction. Consequently, the ever growing federal structures and programs in these fields constitute a form of interference which periodically sours federal-provincial relations.

More precisely, the Constitution Act of 1867 gives the provinces complete authority in matters of health, and section 92.7 gives the provinces jurisdiction over the whole field of health and welfare. It is in the Constitution.

In order to bypass what was perfectly clear in the Constitution, the federal government invented a roundabout way to interfere and called it its spending power.

The federal government cannot interfere directly in areas of exclusive provincial jurisdiction. So, it uses an indirect mechanism. It gives provincial governments grants with strings attached; the provinces must abide by certain conditions for fear of losing these contributions.

Instead of using its lawmaking power, the federal government uses its spending power in areas of provincial jurisdiction. In our opinion, it amounts to financial blackmail using our own tax money.

In addition to this manufactured power, the federal government is using some legislative powers which should be limited in scope. A case in point is legislation derived from the criminal law such as

the Food and Drugs Act, and the Narcotic Control Act. The government provides services to or pays for the medical expenses of specific clients such as military personnel, RCMP officers, inmates, natives, immigrants and refugees. The federal government tries to increase its responsibilities and to look important by passing legislation in all these minor areas.

• (1245)

Moreover, the federal government sometimes justifies its interference in areas of exclusive provincial jurisdiction, invoking an ill-defined concept interpreted in a very broad sense, that of national interest.

Managing the Department of Health and all the small programs we described earlier which come under Ottawa's responsibility uses up only a small part of the budget, but constitutes the bulk of the administrative activities of the Department of Health. Without federal interference in areas of provincial jurisdiction, the department would be small and would only manage residual federal powers.

In fact, the largest part of federal expenditures is comprised of amounts paid to provinces through transfer programs. The federal government gives back with one hand part of what it took from provinces with the other. This is an example of very costly duplication which sustains the conflictual situation with the provinces and exists only because Ottawa is proud to be the one to sign the cheques. Meanwhile, there is less money for health.

Let us see how this money is distributed to the provinces. In theory, the Canada Health Act passed adopted in 1984 establishes the conditions for the allocation of federal grants in the health area. In fact though, these contributions are paid pursuant to the Federal-Provincial Fiscal Arrangements and Federal Post-Secondary Education and Health Contributions Act, what we now call established programs financing. Transfers to provinces do not come from the health department's budget, they are made by the Department of Finance.

This creates a bizarre situation where the Department of Health establishes national objectives and standards that provinces must abide by if they want to receive transfer payments, but the finance minister is the one distributing the money and determining the amounts. That mechanism makes a financial issue out of one which concerns only federal-provincial arrangements in the health area. In reality, the health minister is virtually a minister without portfolio as for the majority of the federal health budget.

This splitting of authority between the establishment of standards and financing results in a lack of cohesion between the development of the health policy and its implementation. On the

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one hand, the health minister wants to impose higher standards and closely monitor their application, which results in cost increases for the provinces, and on the other, the finance minister wants to reduce his deficit at the expense of the provinces and thus is cutting payments.

In the Spring of 1995, the National Council of Welfare, an organization whose mandate is to advise the health minister, cautioned her to beware of such a situation by saying, and I quote: "It would be extremely hypocritical to reduce contributions to the provinces —while increasing the requirements they would have to meet".

Despite fiscal arrangements, the transfer act is a federal statute establishing payments to the provinces unilaterally and without any consultation. Since 1977, these amounts have either been reduced, frozen or de-indexed. Their evolution no longer follows the real costs of provincial programs. In that regard we can say the federal government has broken its commitment to health care.

• (1250)

For over 10 years, the federal government has paid lip service to health care while at the same time continuously reducing its spending in this area.

Through established programs financing or EPF, the federal government transfers money to the provinces for health care and post-secondary education. The amount given to the provinces through EPF is paid partly in cash and partly by transferring tax points from the federal government to the provinces.

In reality, the federal government only spends the amount in cash that is accounted for in budgetary expenditures. Under the tax point transfer, a portion of federal taxes goes to the provinces. This is a way for the government to give back to the provinces some of the taxation powers it took away from them in the 1940s. How generous.

As a result of repeated cuts, Quebec will soon stop receiving cash payments and have to make do with the tax points it already has. Paradoxically, the federal government will soon stop spending anything out of its own pocket but will continue to impose its own standards on Quebec.

Since it was put in place in 1977-78, EPF has led to a unilateral withdrawal on the part of the federal government. When EPF came into effect, federal spending on health care was based partly on the national average and partly on the provinces' actual expenditures and accounted for some 50 per cent of total health spending.

Contributions to EPF were based on spending during the 1975-76 reference year and indexed to the GNP average per capita in the three previous years. This clearly showed a commitment to

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ensure a relatively stable increase in the federal government's contribution based on the growth of the Canadian economy.

Since 1986, the federal government has made repeated cuts to EPF for health care, thus weakening, then severing the agreed upon link between the increase in federal contributions and economic growth. In fact, Liberals have continued to reduce financing, a practice they had vigorously condemned when the Tories were in power.

In 1986, the federal government announced a 2 per cent reduction in the EPF indexing factor, which meant that health transfers would follow the increase in the GNP, less 2 per cent.

In 1989, the indexing factor was once again reduced by 1 per cent, which meant that health transfers would follow the increase in the GNP, less 3 per cent.

In 1990, per capita allocations were frozen for two years supposedly. While health costs kept rising, the federal government stopped factoring in inflation. The freeze imposed by the federal government did not stop people from falling ill. This is one area where magical thinking does not work.

In 1991, this so-called temporary freeze was extended until 1995. In 1995, the current government announced a new program, the Canada social transfer, which entailed further cuts totalling \$4.5 billion over two years. There is no guarantee whatsoever that more cuts will not be made in the future.

• (1255)

As regards the calculation of the federal contribution, the National Council of Welfare had this to say in its spring 1995 report: "No formula is provided in the budget to calculate the amount payable. Based on recent events, the federal government should impose a formula or an arbitrary amount".

So, actual health care costs are not taken into account at all when calculating federal funding. The government only pays what it is willing to pay, depending on its mood and on the amount of its deficit. The national council was right in asking for a formula that would take into account the actual needs of people, instead of the best interests of the federal treasury.

As for the Canada social transfer announced in the 1995 budget and now in effect since April 1, the National Council of Welfare, which is a federal organization whose role is to give advice to the Minister of Health, said: "The main aspect of this financial tool is that federal funding for all these programs will undergo major cuts".

Prevention programs in the health sector will be the first ones to be cut by the provinces, in an effort to solve their immediate financial problems. In the long term, this will endanger the health of Canadians.

All these cuts have already had harmful consequences. It is estimated that, between 1982 and 1994, Quebec suffered a shortfall of \$8 billion because of underindexing, freezes or cuts affecting federal contributions. This is a large amount. This shortfall is partly responsible for the increase in Quebec's debt and income taxes, since the province refused to reduce its health care budget at the expense of Quebecers' health.

The proportion of Quebec's health care expenditures paid with federal transfers went down from 45.9 per cent in 1977-78 to only 33.7 per cent in 1994-95, a 12.2 per cent drop. Even though the federal withdrawal triggered a tax increase at the provincial level, the central government still maintained the same taxation level.

According to a study conducted by the C.D. Howe Institute, while transfer payment expenditures levelled off between 1988 and 1992, spending related to the other federal programs increased by 25.5 per cent. Transfers to the provinces for the health sector thus absorbed part of the federal deficit. While the federal government was spending too much, it was telling the provinces to tighten their belts.

The federal government could have found and still could find the money it needs for the social programs by eliminating or reducing its expenditures and closing some tax loopholes. This would make for a fairer tax system and would help bring in more money to maintain and improve the services and to reduce the debt. However, the federal government does not dare to cut the perks enjoyed by the good friends of the finance minister, the backers of Liberal party and the family of the Prime Minister.

Based on these figures and on the actions, and not the empty promises, of the federal government, we have to realize that the only real threat to the health of Quebecers and Canadians stems from the irresponsibility shown by the central government.

The 1984 Health Act was passed to ensure that the provinces affected by the economic recession of the 1980s would not tinker with the health system, even if, at the same time, the federal government was reducing transfer payments.

• (1300)

All of the provinces protested against this act, because the Canada Health Act contained new conditions above and beyond those already in effect. These new added responsibilities contrasted with the decrease in federal contributions resulting from the 1977 financial arrangements.

On the use of financial pressure tactics, allow me to make a few polite comments about the blackmail used by the federal government to force the provinces to totally support the federal vision. In 1983, Monique Bégin, the Liberal Minister of Health of the day, cautioned us: "The total amount of the contributions paid by the Government of Canada to the provinces for health services is very significant. Any province that constantly refuses to meet the conditions will lose the federal cash contribution and will probably be hard put to compensate for this loss. If the total contribution were to be withheld, health services in that province could have to

be suspended. This is the last thing the Government of Canada wants for Canadians. This option could create a situation worse than the problem it set out to solve”.

What this means is that the confrontation strategy and the will of the federal government to control the provinces is, in fact, harmful to the health of the citizens themselves.

The dual initiative by the federal government, that is the creation of a national forum on health care without consulting the provinces and the stricter criteria and conditions contained in Bill C-18, has drawn a lot of criticism not only from the Government of Quebec—and this may be of interest to the new Minister of Intergovernmental Affairs—but from other provincial governments as well. He may want to watch this situation closely.

Let us see what the federalists have said about that. On September 19 of last year, the Conservative health minister of Ontario, Jim Wilson, criticized the federal government’s lack of flexibility. I would like to apologize to the Speaker for my poor pronunciation in English, but I will go ahead anyway and do the best I can. I would add that I am taking courses to improve my English.

[English]

“I think it shows inflexibility on behalf of the federal government”.

[Translation]

He also stated that we should not let the federal government dictate its interpretation of medicare to the provinces.

[English]

“The federal government be fought on principle for dictating its interpretation of medicare to the provinces”.

[Translation]

The same day, Ralph Klein, Conservative premier of Alberta, also criticized the federal government’s lack of flexibility.

[English]

“Marleau does not send a good signal to Quebec. It says there is no flexibility within the confederation”.

[Translation]

The NDP health minister of British Columbia, Paul Ramsey, added that Mrs. Marleau—who held that federal portfolio at the time—had to change her approach. He stated that if medicare was threatened by the actions of the provinces, it was because of the \$7 billion cuts over two years made by the federal government in the

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areas of health, welfare and post-secondary education. I will try another quotation in English.

[English]

“Last February’s federal budget, which cut transfers to provinces for health, welfare and post-secondary education by \$7 billion dollars over two years, has forced provinces to look at unpalatable cuts that threaten medicare”.

[Translation]

In a joint communique issued at a health ministers meeting, the provinces stated that the federal government’s will to make unilateral decisions with regard to the funding of health care, the interpretation of standards or the setting of arbitrary deadlines for consultation would not help in solving the problem.

• (1305)

[English]

“It is not helpful for the federal government to engage in unilateral decisions regarding funding or interpretations and arbitrary deadlines”.

[Translation]

Concluding this section on the forum, it is obvious that reducing federal contributions causes a serious problem. Federal intervention was justified only by spending power, so any change to the federal health legislation without changes to the financial aspect runs the risk of having an absurd outcome.

Any increased provincial obligation without a corresponding increased federal contribution is tantamount, not to the exercise of federal spending power, but rather to the creation of a federal power to make the provinces spend money for it, and under its conditions.

In fact, the federal government’s main objective is to lessen its financial burden related to the huge debt it has accumulated, at the cost of the provinces’ fiscal health. In other words, the central government pushes a portion of its debt off on the provinces. By thus increasing the tax burden of the provinces, Ottawa lessens their manoeuvrability and forces them to make difficult, agonizing choices in its stead.

Because the federal government is not capable of respecting its commitments and because, all its fine words and the standards it claims to be setting unilaterally notwithstanding, it is the one threatening the health system with all these cuts. The federal government ought to decide to withdraw from the health field, one in which it ought never to have set foot to begin with. In this case, it ought to assume responsibility for its decisions and transfer tax resources to the provinces, in order to allow them to take over.

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I have attempted in these past few minutes to establish this position, which in all aspects reflects the position of the various governments of Quebec over the years and the constitutional demands of the Government of Quebec. As I pointed out just now, since the new government has been in place, I have been a member of the standing committee on human resources, and in my daily work on that committee, particularly as the critic for training and post-secondary education, I have seen the same phenomenon at work there: an attempt to interfere—more than an attempt, constant interference, ongoing, and increasing.

Despite the promises of change the Prime Minister made in the last referendum campaign, when things were getting close and it looked like the referendum might go to the yes side, in the final days, he made promises. Before he became prime minister, we heard him speak for the no committee, stating time and time again during the referendum campaign that the federal government should and would agree to change its centralizing attitude so frequently criticized by Quebecers. We thought there would be a change. No chance.

Again yesterday, I spoke on Bill C-11, the old C-96, which dragged on at length and is now being re-introduced. Although these are old bills in new clothing, there has been no change to the federal government's centralizing attitude.

An attitude based solely on the government's grasping for increased powers.

Here is a parallel. We passed a resolution on the distinct society and what happened? In all of the government's actions, in matters of health and human resources development the government went from the notion of distinct society to the simplistic recognition of Quebec as the principal homeland of French language in North America.

• (1310)

This is a widely known historical fact, but it adds nothing. I am not the only one to say it. So does the leader of the Liberal Party, who is a full-fledged partner of the no side and of the present Minister of Intergovernmental Affairs. This full-fledged partner said that this gives nothing more to Quebec since it cannot lead to a transfer of powers, increased responsibilities, further clarification nor a greater clarity.

There are some grey areas with regard to the government's residual powers. We, Quebecers, we, the official opposition, had hoped to see the federal government deal with this aspect in its new effort to decentralize. We had hoped it would clarify matters and put an end to the remaining grey areas. But on the contrary, it perpetuates them.

What is worse in the case of the bill making the department of Human Resources Development official as in this one, is that we

can see that the government has adopted a soft pedal approach, a go slow approach, a slow combustion approach. You put a little bit of wood in the stove, you let it smoulder all night, and then you add a little bit more wood, hoping that Quebec's emotions will simmer down, that Quebecers and their national feelings will cool down and, with time, journalists and the media will pay less attention to the issue, which has been so long on the front page; if there is less coverage, people will not hear about it as much. This is the soft pedal approach.

Yesterday I said Bill C-11 was the law of silence. Today being Friday, I will be kinder. I notice a silence which is probably more understandable. Yesterday, when the government was passing a bill to officialize something that has been in existence for two and a half years, a bill creating the Department of Human Resources Development, I was explaining that if you exclude the servicing of the debt, the budget of that department was the largest item in the total federal budget, with more than 40 per cent of all expenditures.

At the Department of Health, they tried to reduce the figures by every possible means. When you look at the budget allocated to the Department of Health this year, you no longer find transfer payments for health, because they are listed somewhere else. Therefore, the budget of the department is only \$1.8 billion. This is not much. But most of the spending is elsewhere, in other sections.

For example there is some in the Department of National Defence. There are many interventions. The federal government is there, but trying to hide the fact; it would have us believe it is giving way to the provinces, letting them manage their own business.

The very last amazing brainwave of the federal government is the famous Canada social transfer, which has been in existence since April 1st, although few people know it. What is it? Let us remind people. The Canada social transfer is a merging of all federal transfers for health, post-secondary education and welfare.

From now on, provinces will supposedly be able to set their own priorities. However, all this comes with a \$7 billion cut. They are transferring to the provinces the cuts the federal government did not dare make. And so they should, in a way, but at the same time, the federal government is withdrawing from its financial commitment. And that is unacceptable.

• (1315)

The insult—the parliamentary secretary confirmed it this morning—is to attach to health transfers five principles, five inescapable conditions with thinly disguised threats. The government is saying to the provinces: “If you do not accept national standards, in the Canadian sense of the word, you may be penalized by cuts in funds allocated for health or post-secondary education, but especially health”.

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I heard excellent speeches in which it was said: "The health of Canadians is a concern to us". The former minister was particularly eloquent in the House; every time someone would ask her a question, she would start by saying: "Mr. Speaker, you know I am very concerned with the health of Canadians. That is why we will intervene here and there". She was asked why she had not consulted with the provinces, like she did with the health forum. She would then answer: "But you know, the health area is very important; there are stakeholders in it. We had to know their views".

Mr. Speaker, you are signalling me my time is up. I will conclude with that. I could go on and on. I will have the opportunity to come back on the matter since I will now sit on the health committee.

[*English*]

Mr. Ed Harper (Simcoe Centre, Ref.): Mr. Speaker, I am pleased to participate in the debate on Bill C-18. Before I do that, I would like to respond to some of the comments made by the member for Eglinton—Lawrence earlier in the debate.

He started by talking about the leadership this government is providing in dealing with the crisis in health care. I suggest that the problems we are facing are being magnified. Indeed there is no leadership. No direction is being provided by the government to deal with the crisis in health care.

The member was looking back in his speech, talking about the Fathers of Confederation and the Constitution. Those are just words to justify the status quo. There were no forward looking solutions to deal with the problem. Instead there was a look back to justify the status quo.

The bottom line is that the federal government, while assuming the role of a minor payer, still wants to be the major player. It is not in the cards. It is going to change whether members realize it or not.

As an Ontario MP, as I am, he has to be very aware of the crisis in our province, the long waiting lists and the bed closures. It is projected that Ontario will spend \$17 billion on health care and that the federal government will contribute \$6 billion toward it. That is a far cry from the 50:50 cost sharing that allowed the federal government originally to intrude in what is a provincial responsibility.

The province of Ontario is looking for assistance. It needs help. It is not looking for rhetoric. It has a problem and it is looking for some help from the federal government in dealing with it.

One of the most interesting things that the member said in his earlier presentation was that the five principles of health care are debatable but not negotiable. Why in the world would anybody debate them if there is to be no negotiation? What the government

is saying is: "My mind is made up. Do not in any way confuse me with the facts".

Mr. Johnston: Like the Liberal whip.

Mr. Harper (Simcoe Centre): That is right. It is debatable but it is not negotiable. I seem to recognize that same line in many issues we are dealing with in the House. Health care is a great example of the problems we are in: It is debatable but in no way is it negotiable.

One cannot cover, in our health care system, 100 per cent of the cost 100 per cent of the time. That never was a reality and it has never been more true than it is today. The member alluded to our aging population. It is putting tremendous pressure on a system that is in dire need of an overhaul. It is not just Ontario that has a health care crisis. Every province is looking for negotiation, discussion and flexibility in the role of the federal government, a flexibility that sadly is not there.

• (1320)

This is a housekeeping bill. There are really no monetary expenditures involved so we have no grounds to oppose it. I should not say there is no cost. There is always a cost when we debate a bill in the time it takes to debate it. While there is no reason to debate the reorganization, there is a very strong reason to discuss health care. Reorganization is important. Rethinking health care is critical.

Everyone agrees that we must change, that we have a serious problem. I paraphrase the Prime Minister when he spoke in an interview with CBC radio. He said that the system was put in place to protect Canadian citizens from catastrophic crises in health and the family so they would not lose their homes. He said very clearly what we have been saying, that this was never intended to cover 100 per cent of the problems 100 per cent of the time.

He also alluded to the fact that the 10 per cent of GDP spent on health care is too high. It is the second highest in the world next to the United States and must be reduced. Those are the words, but where is the plan to accomplish that? There is nothing. What we got in the debate this morning were more words and more rhetoric with no plan to deal with health care.

Medicare is our most valued social program. Part of the rhetoric from the other side is that we are out to savage and destroy medicare when the reality is that we are the only party in this House that is dedicated to saving medicare for those in our country who need it. It needs support. It needs fresh thinking.

One of the major threats to medicare, indeed to all our social programs, is Canada's deficit and debt. The overspending that has taken place over the years has put us into a tremendous debt hole. That is the real threat to health care.

The finance minister continues day after day when he gets up in the House to pat himself on the back for reaching 3 per cent of GDP. He is not eliminating the overspending, he is reducing it. He

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will have it reduced to 3 per cent of GDP. We are still living beyond our means.

In saying that, the finance minister is not telling the Canadian people what is the real danger to our social programs. While he is attempting to achieve this very low target, the debt is increasing from \$400 billion to \$500 billion to \$600 billion in the term of this government, an increase of some \$111 billion. Shame. That is what is killing health care and the social programs today.

The interest payments are going from \$30 billion to \$40 billion to \$50 billion to service the debt. That \$50 billion does not create one hospital bed. It does nothing for health care, yet the government is prepared to see that kind of overspending continue, to see that kind of debt accumulate and to see that \$50 billion go up in smoke while not creating one job, not doing one thing to save our social programs. That is the real killer and that is the real threat to health care.

If we do not change we are in danger of losing medicare. If we do not start to open up our minds and be prepared to debate and to negotiate, we will be in danger of losing health care. Those who only talk are the real threat. Action is required. We do not know how much time we have to deal with this problem although we know it is not unlimited.

We want real debate, not cheap shots or rhetoric like "we are going to save medicare and there is the heartless group that will not". We want to have debate about a real plan, a plan to deal with the problem we are facing today.

There is a plan we should be talking about which has a three-pronged approach. The first is the stability of medicare funding. Funding for medicare needs to be stabilized so the provinces know where they are at. We have to focus our existing resources and we have define what the core of our health care is going to be. We have to offer choices beyond medicare. We have to face the realities of what is out there today.

• (1325)

In affirming medicare and supporting funding stability we must return to the best health care safety net in the world. We must remove the existing funding freeze and restore the per capita transfers to 1992-93 levels which Liberals continue to cut by stealth. The remaining cash transfers should be converted to tax points because as far behind as we are falling in the original 50:50 deal, it is going to be even less of a payer in the future.

A better job has to be done in focusing our resources. Canadians need to define what constitutes core or essential health care services. There needs to be a debate among the people about what those core services should be and medicare must be reserved for those core services.

We should look at the choices and the possibility of choices beyond medicare, remove the existing restrictions in law which prohibit choices in basic health care beyond publicly funded health care. Where medicare does not meet Canadians' needs they should have the option to exercise choices beyond medicare. Where Canadians exercise choice beyond medicare they will be responsible for arranging appropriate private funding on such choices, for example, with employers through benefit plans with third party insurance and through private resources.

Let the debate begin on some real solutions to dealing with the crisis in health care. All of the provinces, not just Ontario, are looking for that.

In closing, medicare is our most valued social program. I reinforce the fallacy in saying that only the federal government has a heart, only the federal government is concerned about saving health care. It belittles the premiers of the provinces to suggest that they would in any way be heartless or not be concerned about health care in their provinces. They will answer to the voters in their provinces for the job that they do in looking after their people and not going to the federal government and get into this "I'm not at fault, they're at fault" argument which has brought us to the point we are at today.

Talk will not do it. There needs to be a plan. Debate must begin on that plan. We must act now. I believe time is limited. Future Canadians, our children and our grandchildren, are counting on us to do that and Canadians deserve nothing less.

The Deputy Speaker: Shall I call it 1.30 p.m.?

Some hon. members: Agreed.

[*Translation*]

The Deputy Speaker: It being 1.30 p.m., the House will now proceed to the consideration of private members' business as listed on today's Order Paper.

PRIVATE MEMBERS' BUSINESS

[*Translation*]

NATIONAL ORGAN DONOR DAY ACT

Mr. Dan McTeague (Ontario, Lib.) moved that Bill C-202, an act respecting a National Organ Donor Day in Canada, be read the second time and referred to a committee.

He said: Mr. Speaker, it is an honour for me to rise today to launch the debate—which I hope will be positive—that will among other things improve the health and future of many people from

coast to coast, whether they live in Quebec, Ontario, western Canada or the maritimes.

Bill C-202 would designate a national day to recognize the importance of organ donation.

[*English*]

My desire to put forward this private member's bill came as a result of a very real, very human event that took place in my riding on April 21, 1994.

A young boy by the name of Stuart Harriott of Whitby, Ontario was unfortunately involved in an accident with a vehicle. As the young boy was in the last days and hours of life, his parents, his aunt and other relatives tried to determine how best to resolve their terrible grief. The doctors had told them that the young boy would eventually pass away and he did succumb to his injuries.

Rather than seeing this tragedy for what it was, Linda Rumble and Stuart Harriott's parents decided that they would begin a campaign to initiate something that would provide, if there ever is one in this world, a silver lining to such a tragic event.

At their insistence and the insistence of many organizations I have had the privilege of speaking to over the past year, we have before us today an opportunity as Parliament to discuss and perhaps approve an action Parliament recognizes on a given day, April 21, the importance and significance that in giving of one's life we may also give life to others.

The bill is about public education and awareness. Every year in Canada from coast to coast, 2,500 people need the gift of life. However, only 300 transplants on average are given. This leaves a tremendous shortfall.

While many organizations, from the Kidney Foundation to the Multiple Organ Retrieval Exchange Group, the Canadian Association of Transplant Patients, the Canadian Cystic Fibrosis Foundation, the Canadian Liver Foundation, the Heart and Stroke and Lung Association, to the Canadian Medical Association and many others work to raise the awareness of Canadians of the need to sign their donor cards, many may do not enjoy the benefits and continue to suffer.

The House of Commons has an opportunity to put aside the traditional debate and often divisiveness that exists and provide for once an opportunity to allow people who are suffering today the hope that perhaps down the road they will be able to receive one, two or several organs. Some of these young children who received the gift of life from Stuart Harriott will also be able to enjoy their future.

Perhaps this is more important because it is not just that it affects and sounds like it is one of those motherhood issues. I think each of

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us in the House knows of constituents and families afflicted and affected by a debilitating disease or by accidents or by trauma.

I was very surprised to learn that one of our former clerks who worked on many committees for years, a well known individual, G.A. Sandy Birch, is a recipient of a heart. I saw him recently at a function held in Ottawa where 35 other individuals had been given the gift of life, many of them with our colleague in the other place presiding at the transplant, the hon. Dr. Keon.

I was quite impressed to see how important and how close to home such examples of transplants can be in our own neighbourhoods.

I believe the public awareness and education programs such a bill would bring about would address very firmly some of the misapprehensions individuals have about transplants. Some will be concerned from a religious point of view, and I will address that.

Much of this is based on what some would consider simply confusion or ignorance surrounding the religious impact on the issue of organ donation. It may surprise many colleagues to learn that virtually every major religion in the world permits, and some actually encourage, organ donation and transplants.

Hindus are not prohibited by religious law from donating organs. Muslims support organ transplants and donations as long as they are done with respect for the deceased and for the benefit of the recipient. Judaism teaches that saving a human life takes precedence over maintaining the sanctity of the human body in terms of organ donation. Direct transplantation is therefore preferred.

In Christianity, Protestants respect individual conscience and an person's right to make decisions about their body and that resurrection does not require making the physical body whole again. Catholics view organ donation as an act of charity, fraternal love and self-sacrifice.

Some are also equally concerned about the question of safety. The importance of ensuring the safety of organ transplantation is of paramount and absolute concern. Research is being conducted examining the issue of reducing the risk of a recipient's contracting diseases such as hepatitis B and C and HIV from transplants.

• (1335)

In October 1995 the national consensus conference on the safety of organs and tissues for transplantation brought together a broad range of experts in the field of transplantation. The conference was successful in achieving a consensus on accepting in principle a Canadian general standard on safety of organs and tissues for transplantation. At the same time a risk management regulatory framework was proposed.

I am confident that more attention and study will be given to the issue of improving the safety of organ transplants.

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In the intervening period since I introduced this bill under a different name in the previous session I have received a lot of correspondence from members of Parliament from across this great land.

Support for Linda Rumble and her initiatives have been received from many members, including the members for Saint John, Peterborough, Winnipeg North, London East, Vancouver Centre and Saskatoon—Humboldt.

Mr. Speaker, while we agree to the need for a day when we can pay respect to the individuals who have given life, perhaps some time down the road your good Chair and office might permit an honour role to recognize every year those who in laying down their lives have actually provided hope for many others.

It is my belief this bill does what other organizations cannot do individually. They cannot draw the attention of all Canadian people to sign their donor cards and to address the inhibitions of organ donation, for it is not something which should be done with trepidation, but with honour. When we pass on from this great planet, it is my belief there are opportunities for us to know that some of us will live in the lives of others.

I was also touched by some of the more immediate examples of what organ donation has done for many people, even among families. Glenn DeMille is a well known heart transplant recipient who helped to organize many events in the Ottawa region to draw attention to, at least from a local perspective, the need for organ donation.

Mr. DeMille received a heart transplant several years ago. However, most people do not know it is his son's heart which lives within him. Glenn DeMille did not know his son had signed a donor card. After his operation he was informed of the transplant. Mr. DeMille smiles because he feels like and has the energy of a 25-year old. Mr. DeMille will continue to be a driving force locally.

Perhaps we need a national force in which the division which often appears in the House of Commons and in committees is put aside for one day and parties will actually say there are some issues which transcend partisan considerations.

I am submitting today that Parliament can do what individual organizations cannot do. While it is true some groups and organizations designate weeks in which they recognize specific causes on a regional, local or provincial basis, we have never been able to pinpoint a specific day. In my view it should be April 21.

[*Translation*]

I ask this House to give my bill serious consideration and to support its implementation so that present and future generations can receive the gift of life.

[*English*]

Mrs. Stewart (Northumberland): Mr. Speaker, a point of order, I simply want to confirm to the House that next Tuesday will be an allotted day.

[*Translation*]

Mrs. Madeleine Dalphond-Guiral (Laval Centre, BQ): I am pleased to participate in this debate today, Mr. Speaker, on the bill put forward by the hon. member for Ontario, a bill designating April 21 National Organ Donor Day.

I will start with a real life story. The story is set in Montreal's Sainte-Justine hospital. The year is 1959. It feels almost like yesterday. I was about to graduate from nursing school. Pierrette was a patient of mine. She was 14 years old and had been suffering from kidney failure for several years. Thirty years ago, haemodialysis and kidney transplants were still in the realm of science fiction. All this to say that Pierrette was dying. All she wanted was to sleep through the night but, one night, she went to sleep never to wake up again.

● (1340)

In those days, cases like Pierrette's were hopeless and therefore went untreated. The feeling of helplessness was extremely frustrating for all of us. Why her and not me? Science has made giant strides since. Over the course of almost 30 years of professional activity entirely dedicated to paediatric care, I finally saw hope rekindled in the hearts and minds of parents and caregivers.

Today, increasingly sophisticated technologies make heart, liver, lung and pancreas transplants possible. What was a virtually impossible feat in 1960 has become, today more than ever, a challenge to take on.

In 1995, in Quebec alone, 375 persons received the invaluable gift of life because 117 healthy people like you and me agreed to give the gift of life after their own life was over. There are nevertheless more than 500 Quebecers who are still waiting for a transplant and, across Canada, only 40 per cent of those who need a transplant actually undergo the operation. Scientific progress notwithstanding, the biggest problem remains the insufficient supply of organs to meet the demand.

According to Québec-Transplant, one of the factors contributing to this shortage is undoubtedly the fact that only an infinitely small number of possible donors meet the requirements for organ donation. In 1995, among the many donors referred, only 117 could be used to meet part of the transplant needs. So, if there are more donors, there will also be more people who will benefit from a long awaited organ transplant that will improve their quality of life.

This is why this bill is so important. One way to increase the number of donors is to run public awareness campaigns on the importance of organ donation. In that field, the most sophisticated

technologies are useless if people refuse or forget to give the gift of life.

Instituting a national organ donor day would help organizations such as Québec-Transplant and the Canadian association of organ donors to intensify their campaigns to recruit organ donors and to stress the importance of volunteer work in that sector.

This issue is very dear to me, partly because for four years now, Laval, which is the second largest city in Quebec and which is where my riding is located, has been running a campaign in April to recruit organ donors. I am proud to participate in that event as honorary copresident. I can see the positive impact of such a campaign in terms of encouraging people to pledge to donate organs, but also on the volunteers working in that sector. The organ donor month in Laval also provides an opportunity for various interested parties, including volunteers, medical teams and organizations, to consult each other to promote organ donation.

Police officers are a good example. I would like to take this opportunity to express my deep appreciation to police officers in Laval, who are serving this cause by transporting organs and thus contribute to saving many lives. Since 1993, about 50 police officers have been called upon 325 times and have travelled over 39,000 kilometres to transport donor organs.

But the main goal is public awareness, so that people will sign their donor card and talk about it with their relatives and friends.

• (1345)

Organ donation is a sign of solidarity with people who need an organ transplant to stay alive or get a better quality of life. It can also give a meaning to death, because it is a gift of life.

Only through sharing and generosity can we solve the shortage of organs for transplants. Sooner or later, we all have to come to grips with the reality of death, our own or that of a loved one. The loss of our loved ones is always a cause for grief, but organ donation is a gift of life that can bring hope and peace.

However, some elements like the lack of knowledge about the organ shortage or the emotional drive to keep the body of the deceased intact all hinder an increase in transplants and make it crucial, at least for the people waiting for a transplant, that information and awareness campaigns be launched.

This is why I intend to submit to the health committee an amendment to Bill C-202, asking Parliament to recognize April as organ donor month, as is the tradition in Laval.

I think that, because of the extent of the organ shortage and the importance of this issue, we need to set aside a whole month to educate the public. Health is not only about science and technology. It is also a question of awareness and reflection and caring.

Private Members' Business

Since life gives us all kinds of opportunities, I think we should also give life a chance.

[English]

Mr. Dale Johnston (Wetaskiwin, Ref.): Mr. Speaker, I am pleased to speak today in support of Bill C-202 which seeks to designate every April 21 as national organ donation day.

Oftentimes we are reminded there are only two certainties in this life, death and taxes. We can count on this government to ensure that we pay more than our fair share of taxes and at the same time we have learned that we can postpone death. While we cannot put it off indefinitely, it is possible to postpone it.

Advances in medical technology have allowed some people to do just exactly that through organ transplant surgery. It has given Canadians from all walks of life from all across the country a second chance at life.

Organ donation operations are no longer an experimental procedure. They have become so successful that the number of people on waiting lists in Canada far exceeds the supply of available organs. I commend my friend from Ontario for introducing this bill. It increases the awareness of this problem in Canada. As has been pointed out by my colleague from the Bloc, it is to give the gift of life even though the person is no longer there to see that gift being given.

Since organ transplants began in Canada, some 18,000 operations have been performed. In 1984 there were 500 transplant operations while 10 years later in 1994 over 1,400 such operations took place. That is the good news. The not so good news is that in 1992 there were over 2,000 people on lists waiting to receive organs and by 1995 the number had grown to 2,600.

As members of Parliament we should take the initiative to promote the benefits of organ donation. There are common misconceptions with regard to organ donation which I think we have a duty to dispel.

For instance, there are those who believe it does little to save lives and restore health but the facts indicate the contrary. Organ donation is a proven life saver with success rates ranging from 85 to 95 per cent. That is a pretty good gamble for somebody who requires a kidney. It is not what one would call routine surgery but it is certainly not experimental either.

• (1350)

Another common misconception is that organ donations and transplants are a financial burden on health care, that they are costly. Organ donations and transplant operations not only save lives but they save dollars as well. The issue of health care dollars, as was evidenced by our previous debate, certainly is a timely topic

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at the moment. Health care dollars are becoming more and more scarce all the time.

As an example, for those suffering from kidney disease, a transplant operation would cost in the neighbourhood of \$20,000 plus about \$5,000 a year for follow-up treatment, whereas renal or kidney dialysis for the same person would cost around \$50,000 a year. Coupled with that, if the person has a functioning kidney their quality of life and their productivity is certainly a lot better than it would be if they had to rely on a kidney dialysis machine.

Another reason I encourage members to support this bill is that it will increase public awareness. The government will have to get the public thinking about organ donation if the gap between availability and demand is to be filled.

One of the biggest obstacles is the lack of communication between family members. Not that I want to do a commercial for Mutual Life Assurance Company of Canada but it did conduct a survey which found that only about half of Canadian families have ever discussed the issue and the circumstances surrounding organ donation. That is to say that only about half of them even discussed the matter and very few of those actually took the action of filling out a donor card, which is the first step.

Even though an individual may have signed the donor card, the family of a person who has just expired may express concerns and objections about the donation of a loved one's organs. As a matter of professional practice, the doctor will defer to the family's expressed concern. The result is that the organs will not be donated. They will not be used to benefit a waiting recipient.

One solution to this quandary is to have both spouses, the guardians or people who are indicated as next of kin in the event of death sign the organ donation card so that there will be agreement on whether or not the organs are to be donated. This will increase the timeliness and of course with organ donations timeliness is very important.

Perhaps there is a need for a national registry of potential organ donors. In case of fatal traffic accidents for instance, the personal effects including the driver's licence may be separated from the victim. If a person has filled out the organ donor card on the back of their licence, it does not really solve the problem if the driver's licence is in one place and the body is in another. Often too much time elapses before this is realized and by that time the organs may not be suitable for donation.

Another option is to have prospective organ donors registered with the Canadian Police Information Centre. There is access to the Canadian Police Information Centre all day every day. It is registered across the country. All that is needed is the authorization of the solicitor general and the police authorities in order to carry out this step.

• (1355)

Such measures would address waiting lists which continue to grow and lives that are needlessly lost as a result. In 1995 alone 1,114 Canadians died because they had not received a suitable organ for transplantation, an organ that would have restored their health.

I was astonished to learn that Canada has one of the lowest organ donation rates in the world. In Canada there are only 14 donors per million whereas in other countries the average ratio is between 20 and 30 donors per million. There is a lot of work to be done. As I have said before, that is the goal of my colleague from Ontario who would like to raise awareness of this problem and increase those numbers to make available more and more organs for donation.

Earlier I mentioned new initiatives the government should consider. In the interim Canadians should be made aware that they can do more than sign their driver's licences and register as donors.

Mutual Life Assurance Company of Canada sponsored an organ donation campaign called "By Mutual Consent: Breaking Barriers to Organ Donation". A number of non-profit organizations such as the British Columbia Transplant Society, the Kidney Foundation of Canada, the Canadian Transplant Society, Organ Donors Canada in Alberta and the Canadian Association of Transplantation are active in promoting and co-ordinating organ donation efforts.

Bill C-202 is an example of an effort to do more. It is a reasonable and worthy initiative which could complement other efforts designed to motivate people to give the gift of life. Along with national donor week which we celebrate at this time each year, which apparently is not exactly a national donor week but an Ontario donor week, the member for Ontario's initiative would promote and encourage discussion on the issue surrounding organ donation.

Reformers are pleased to support this bill as it would contribute to efforts to address this need proactively. In doing so it would save lives and improve the health and the quality of life of many Canadians. It would conserve precious health care dollars and encourage the public's awareness and discussion. I urge all members to support the bill, consider the issue themselves and discuss it in their constituencies.

After all, healthy Canadians are more productive Canadians. We are very concerned about the quality of life in Canada. If we as individuals or as a group want to ensure people will not be on waiting lists for organ donation transplants, we should be proactive in our approach.

Mr. Joseph Volpe (Parliamentary Secretary to Minister of Health, Lib.): Mr. Speaker, I am pleased to be a part of this debate. I compliment my colleague from Ontario riding for making not

only a very persuasive and compelling dissertation but one that was moving as well.

It is most unfortunate we have to make reference to such personal tragedies as that suffered by the Rumble family. We will try to take a positive view, as my colleague from Ontario did, and say that perhaps from one human tragedy we can do something that is worthwhile for the rest of us.

On the question of transplants and organ donations, the House may be aware that the kidney transplant is the oldest of the solid organ transplant procedures. The first successful kidney transplant between identical twins in Boston in 1954 ushered in the new era of transplantation.

Improved surgical techniques and new drugs to fight rejection enabled Montreal surgeons to transplant kidneys between unrelated persons in 1963. I mention this because I would hope that all those who are interested in the issue, not only from the political realm but also in society as a whole, would keep an appreciation of the activity of Health Canada and all Canadians working in this area.

• (1400)

This first transplant was followed in 1967 by a heart transplant performed by Dr. Christiaan Barnard of South Africa. A year later, in 1968, the first heart transplant was performed at the Montreal Heart Institute.

The use of the anti-rejection drug cyclosporin in the 1980s greatly improved the success of transplantation and contributed significantly to the growth of this procedure. Today transplantation of both organs and tissues has become an important part of health care and has contributed to improving the life expectancy and quality of life of thousands of Canadians.

One of the key barriers to transplantation remains the availability of suitable donor organs and tissues, as other speakers have noted. In fact, about 2,200 Canadians are currently waiting to receive an organ transplant. Waiting times vary depending on the specific organ and tissue required for a transplant.

The overall rate of organ donation in Canada is regrettably low: about 14.7 per million population as of 1994. Yet that represents roughly a 20 per cent increase from the 12.1 per million population in 1992.

Still, by international standards, as others have indicated, Canada could and should do better. While our rates are comparable to those of Australia, the United States has a donation rate which is about 50 per cent higher and Austria's rate is double that of Canada's.

According to a 1994 public opinion survey conducted by the Angus Reid group, 77 per cent of Canadians indicated a willingness

to donate organs. Unfortunately, only 58 per cent reported having signed a donor card. Still this did represent an increase over the 1993 and 1992 levels, which were 56 per cent and 53 per cent respectively.

There is a considerable opportunity gap between those expressing a willingness and those who actually act on that willingness. However, what is very encouraging is that of those who had not signed a donor card, 54 per cent indicated they would do so if offered the chance and the opportunity to so sign.

That survey, by the way, pointed out some misconceptions about organ donations which may be impeding behaviour in this regard. I will cite a few examples.

Forty-three per cent of Canadians reported assuming that only those in excellent health would be able to donate. Thirty-eight per cent thought that organ transplants were more costly than keeping a patient alive through other means, such as kidney dialysis or drug therapy. Twenty-eight per cent thought that the organ donation would result in changes to funeral arrangements. Seventeen per cent thought that organ transplantation was not the most effective medical treatment for organ failure.

Despite these misconceptions, concerted efforts are and have been under way for some time in Canada to improve the public's awareness of and willingness to become organ donors. Among those taking a leadership role in this regard have been national and non-governmental organizations, such as the Kidney Foundation, as my colleague from Ontario pointed out, the Heart and Stroke Foundation, the Liver Foundation, the Lung Association and the Cystic Fibrosis Association. In addition, several national associations, including the Canadian Medical Association and the Canadian Nurses Association, promote organ and tissue donor awareness through their professional journals.

These and other national organizations, including Health Canada, are members of the Canadian Coalition for Organ Donor Awareness, also known as CCODA.

Together, national and provincial governments and non-government organizations currently organize various public awareness and education seminars during national organ donor awareness week, which is the last full week of April.

My colleagues on both sides of the House have rightly pointed out that so far there has not been the rate of donation that we could expect to make such programs completely successful. That having been said, local hospitals and community groups have organized campaigns to heighten understanding and awareness of the importance of organ donation. If the House will permit, I will take the opportunity to give an indication of one such organization in the immediate vicinity.

Private Members' Business

• (1405)

The Ottawa-Carleton chapter of the Canadian Liver Foundation will host its seventh annual celebration of life service in appreciation of organ donors and their families this Sunday, April 21, at Christ Church Cathedral on Sparks Street. One should note that the church is wheelchair accessible from Queen Street. All are welcome.

It is organizations like this, activities like this, that give us a better appreciation of needs everywhere.

Within Canada the public and stakeholders in the organ donation programs have accepted the need for specific focus each year on efforts to promote public education about organ donation. This is an important health care issue for all Canadians and one that many national and provincial organizations are actively pursuing. It is one that Health Canada has been pursuing for a long time. We will continue to pursue it with the support of colleagues on both sides of the House and from organizations, provincial, municipal and non-governmental, everywhere throughout the land.

I thank the House for its attention on this most worthwhile topic.

Mr. Leon E. Benoit (Vegreville, Ref.): Mr. Speaker, I rise today to speak on private member's bill C-202, an act respecting national organ donor day in Canada.

I would like to thank the hon. member for Ontario riding for bringing this private member's bill to the House. I believe it is a very worthwhile bill for several reasons.

First, there is merit in having recognition of something as important as donating an organ. The public becomes more aware of the issue, of the shortage of organs and of the long lists of people who are waiting to receive an organ so they can have their life improved or prolonged. Therefore I would like to congratulate the hon. member for Ontario for bringing this motion forward.

Any kind of media attention that can be brought to an issue like this will help. I seldom would wish this for a Liberal member of Parliament, but I wish him all kinds of extremely positive coverage on this issue. It can only help to make people aware. Perhaps it will encourage some people within their families to talk about the possibility of organ donation should one of them die prematurely.

As I was coming here on the little green bus from the Confederation Building I was thinking about how I would feel. I have five children, three boys and two girls. I have identical twin sons and also a twin son and daughter. The identical twin sons came to mind. If they were, God forbid, in a serious car accident—they are 17 years old so I cannot help thinking about that possibility—if they were both critically injured and one of them died and could through

donating an organ prolong the life of the other, I could not help thinking what a terrible loss it would be if the arrangements had not been made so that the people who arrived on the scene did not know immediately that the intent was that my sons wanted this to happen.

As well, I could not help thinking of the good feeling and possibly the way that this could make it a little easier to suffer through the loss of this child, knowing that a part of this child who had died could remain alive in the life of the other.

Therefore, I congratulate the hon. member opposite for bringing this motion forward. I wish him all the media attention that he can get on this. Any kind of education and awareness that we can help promote on this issue is extremely valuable and will save lives.

• (1410)

While I congratulate the member for bringing this bill forward, I do not think it is enough. What we should do in the House is actually draft a bill that will in a far more substantive way allow, provide for and encourage more people to donate organs so that there is not this long waiting list we have in Canada now.

It is important on an issue like this, if we are to debate it in the House, that it be done in a non-partisan way. I am talking about a bill which will become law and which will provide for a much better organ donation system than we have now. It is important for that to be done in a non-partisan way.

In legislation the Liberal government brought forward in 1994 there were some changes made to chapter IX of the standing orders. One change allows the government to put a bill before committee before second reading. This legislation has been used. A change to Standing Order 68(4)(b), a provision which has not yet been used, allows a private member's motion to be put before committee before second reading so that legislation can actually be drafted by committee.

I am in the process right now of presenting a private member's motion to Journals which will ask the House to send a motion dealing with organ donations to committee before second reading so that the appropriate parliamentary committee can actually draft the legislation, which will help take some of the partisanship out of the process. This will enable the committee to draft the legislation which will help in a very substantive way to make the organs needed readily available.

I will read this section of the standing orders:

A motion by a private member to appoint or instruct a standing, special or legislative committee to prepare and bring in a bill, pursuant to section (1) of this standing order, shall be considered as a motion under Private Members' Business and shall be subject to the procedures in that regard set down in Standing Orders 86 to 99, inclusive. A motion by a member other than a minister of the crown to concur in the report of a committee pursuant to this section or to section 4(a) of this

standing order shall also be taken up as a motion under Private Members' Business pursuant to the aforementioned standing orders in that regard.

This section will allow this process. I hope my private member's motion, should it come before the House, will add something even more substantive to the bill presented by the hon. member for Ontario. I am in the process of presenting this motion to Journals. I hope it will be unanimously supported when it comes to the House.

I will shorten my comments because many people before me have talked about statistics and have expressed very well the need for an improvement in the mechanism. They have talked about the long waiting lists. They have talked about people who have died waiting for an organ donation. I believe all of us know someone who has died unnecessarily because organs were not available.

● (1415)

I have 295 organ donor cards which have been provided by the Kidney Foundation of Canada. I ask for unanimous consent of the House to have these organ donor cards transferred to the table so that all members of Parliament can show by example the importance of everyone who is willing to sign an organ donation card. In that way the list of people waiting for organs will be shortened substantially and fewer people will while die waiting for organs.

The Deputy Speaker: Colleagues, is there unanimous consent to allow the member to do as proposed?

Some hon. members: Agreed.

The Deputy Speaker: So ordered. The cards will be transferred to the table.

Mr. John Murphy (Annapolis Valley—Hants, Lib.): Mr. Speaker, I am pleased to have the opportunity to speak on this important issue. I thank my hon. colleague for bringing this important issue forward in the House of Commons.

Organ donation and transplantation is an essential part of health care in Canada. While there have been improvements in the rates of organ donation in Canada, we still lag behind other industrialized countries including Austria, Spain, Belgium, the United States and France.

Health professionals are keenly aware of the importance of organ transplantation both to save lives and often to reduce ongoing expensive treatment costs. Nevertheless, converting potential donors into actual donors is a difficult issue for many professionals. In some cases medical and surgical residents have difficulty in identifying potential donors. As well, a recent Canadian study indicated that only 35 per cent of nurses and 55.4 per cent of physicians knew how to refer organ donors.

An important issue for physicians and nurses is the difficulty and stress of discussing organ donation with family members. In the same Canadian study it was noted that 83 per cent of nurses and 75 per cent of physicians reported reluctance in approaching relatives

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of potential organ donors. Professional attitudes toward organ donation however are generally positive.

Co-operation from health care professionals does not require more education but rather more emphasis on the social and interpersonal issues. At the same time more efforts with regard to professional knowledge and involvement would no doubt be very helpful.

It is interesting to note that consent to organ donation among health professionals themselves does not rank much higher than among the general population. As a matter of interest, I, as a past health professional for 30 years have made the commitment to organ donation.

In 1994 a survey of physicians and nurses found that over 90 per cent of the nurses and 95 per cent of the physicians supported organ donation in principle. However only 61 per cent of the nurses and 63 per cent of physicians had completed a donor card. This compares to a 1994 public opinion survey which indicated that 58 per cent of Canadians surveyed reported having signed an organ donor card.

Further many Canadians do not discuss their personal views and intentions in this regard with their family members. This is a shame because in 1994 only 63 per cent of Canadians reported ever having discussed organ donation with a family member and 51 per cent indicated that they did not know what the wishes of their family members were with respect to organ donations. This adds to the difficulty experienced by health professionals in approaching family members and potential organ donors. Not only is it emotionally stressful to approach the subject but often family members are left in a quandary of simply not knowing whether their loved ones would want them to consent to organ donation.

Furthermore many Canadians know little about the actual process of organ donation. For example, 43 per cent still think only those in excellent health could do this. A few Canadians report fear, mistrust or uncertainty about the extraction process and 13 per cent fear AIDS or other infections. Moreover the study showed that 16 per cent of those not willing to donate expressed fear of maybe not receiving the best medical care by signing one of the cards.

Also, there may be few incentives for hospitals to become involved in organ and tissue procurement. In many provinces no funding is offered to hospitals for this procurement and hospitals must commit their own funds and resources to maintain potential donors until the organs can be recovered. The lack of financial compensation for physicians and the amount of time their involvement requires may also be further barriers.

Cultural barriers as well may be an issue here. And there may be an increasing number of important and difficult ethical issues

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regarding the sanctity of the human body, including the extent to which medical technology should be used to delay death.

Thus public awareness and education while extremely important is only one dimension associated with improving organ donation in Canada. Several national and provincial governments and non-governmental organizations are already undertaking a variety of efforts to improve the level of knowledge of Canadians and of health professionals on various aspects of this issue.

Federal and provincial ministers of health are currently assessing the problems and barriers and we need to work with them. The ultimate goal of course is to promote a more concerted, collective effort in order to improve overall organ donation rates and enhance our ability to respond to the needs of Canadians.

All members of Parliament and the government have a responsibility in this. In closing I thank my hon. colleague for bringing this

subject to the floor of the House of Commons. I wish it every success.

The Deputy Speaker: Is the House ready for the question?

Some hon. members: Question.

The Deputy Speaker: Is it the pleasure of the House to adopt the motion?

Some hon. members: Agreed.

The Deputy Speaker: I declare the motion carried. Accordingly, the bill stands referred to the Standing Committee on Health.

Motion agreed to, bill read the second time and referred to a committee.

The Deputy Speaker: The House stands adjourned until Monday, April 22 at 11 a.m.

(The House adjourned at 2.24 p.m.)

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