



The health system

A vital link



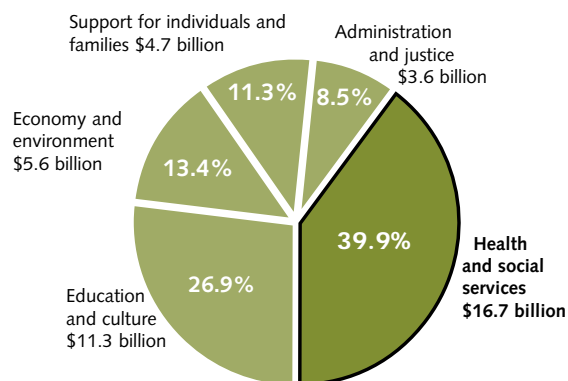
2001-2002 Budget: additional resources

Health and social services: a priority funding sector

A budget of \$16 716 million will be allocated in 2001-2002 to the health and social services sector. This amount represents nearly 40% of total program spending.

BREAKDOWN OF PROGRAM SPENDING IN 2001-2002

(in billions of dollars)



A substantial increase in the resources allocated to health and social services since 1997-1998

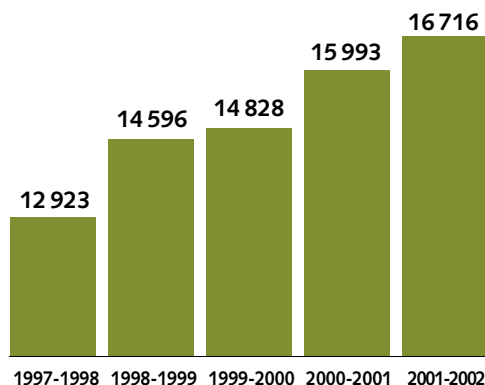
The budgets granted to the health and social services sector have risen almost 30% since 1997-1998.

On average, the budgetary increase was close to a billion dollars annually from 1997-1998 to 2001-2002:

- Average annual growth in this sector was 6.6%, higher than the 4.8% nominal GDP growth rate.

EVOLUTION IN HEALTH AND SOCIAL SERVICES SPENDING – QUÉBEC

(in millions of dollars)

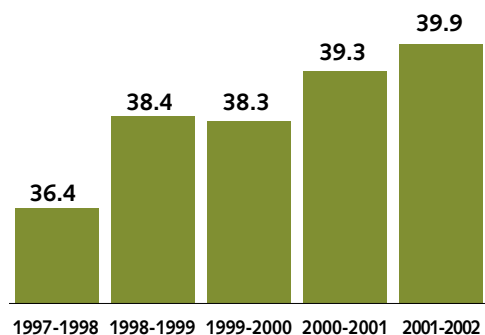


A higher percentage of program spending devoted to health and social services

Health and social services accounted for 36.4% of total program spending in 1997-1998. This percentage rose 10%—that is, to 39.9%—in 2001-2002.

EVOLUTION IN HEALTH AND SOCIAL SERVICES SPENDING SINCE 1997-1998

(as a percentage of program spending)



of \$2 billion for health and social services

Per capita health and social services spending has also increased

Since 1997-1998, the budget granted to the ministère de la Santé et des Services sociaux, in dollars per capita, has risen considerably.

In 2001-2002, the government will devote an average of \$2 260 to health care and social services for each Quebecer.

In 1997-1998, that amount was \$1 770.

Additional resources of \$2 billion for health and social services

\$1 334-million gross-up of budgetary bases.

\$600 million placed in reserve, in particular for the modernization of the network.

New initiatives:

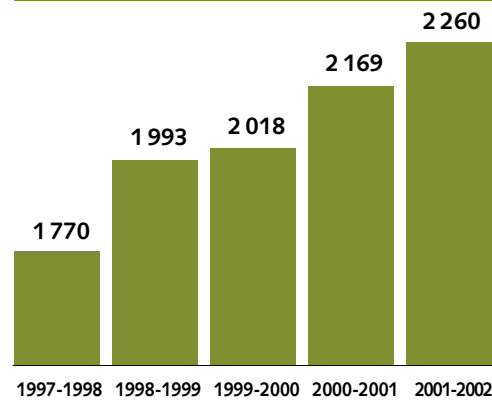
- improvement of services provided to young people and their families;
- renewal of the program under which home care services are provided by social economy businesses;
- development of services adapted to older persons losing their autonomy.

Reduction of the federal contribution

Due to repeated cuts, the federal contribution to the financing of health, education and income security spending has dropped considerably since the mid-1980s:

- federal funding of Québec's social expenditures has fallen from 23% in 1984-1985 to 11.9% in 1999-2000, and will be only 13.9% in 2005-2006.

BUDGET OF THE MINISTÈRE DE LA SANTÉ ET DES SERVICES SOCIAUX
(in dollars per capita)



BREAKDOWN OF ADDITIONAL RESOURCES
(in millions of dollars)

Increase in the budget of the ministère de la Santé et des Services sociaux in 2001-2002 over 2000-2001¹

- Indexation of salaries and wages, increase in clientele and other expenditures 1 292
- Improvement in the services provided to young people and their families 10²
- Home care services provided by social economy businesses 32

Subtotal 1 334

Reserve for health and social services 600

Development of services adapted to older persons losing their autonomy³ 30

Additional resources announced 1 964

¹ According to the Estimates tabled in March 2000.

² \$15 million in 2002-2003, and \$20 million annually in subsequent years.

³ Initiative funded with Loto-Québec revenue.

FEDERAL CHST* PAYMENTS TO QUÉBEC
(as a percentage of Québec social expenditures)



* Canada Health and Social Transfer.

¹ The three trusts created for the purposes of the CHST by the federal government since its 1999-2000 Budget.

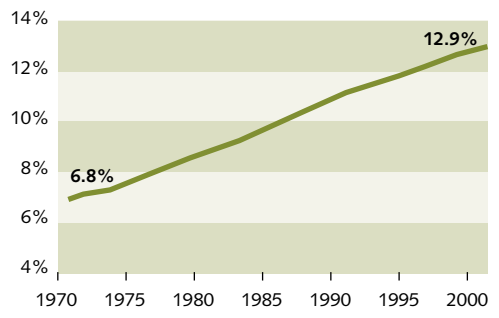
► **Some factors in the increase of health and social services spending**

The advent of more efficient, but more costly, methods of treatment.

The sharp rise in the cost of drugs.

The ageing of the Québec population, which will accelerate in the coming years and, as a result, increase the demand for services.

RATIO BETWEEN THE POPULATION AGED 65 OR OVER AND THE TOTAL POPULATION



Forging strong links