

it give some thought to using it for training purposes. I did not receive a reply to my letter.

I simply say that in my opinion co-operation in this country is a two-way street and I trust the minister will have a satisfactory answer.

Mr. Norman A. Cafik (Parliamentary Secretary to Minister of National Health and Welfare): Mr. Speaker, when this question was raised originally by the hon. member on March 21, I responded indicating that I would bring the question to the attention of the minister. In the passage of time this question has been discussed. I would like to point out that the feasibility of permanent sites for the moment is unlikely because of the difficulty of assembling athletes in any one site for any length of time, and the adaptability of such sites to facilitate the conditions for an Olympic program of some 20 sports.

Up until now our program has used the hosting of multiple sports events such as the PanAmerican Games and the Canada Games to develop facilities of international standards to be used afterwards for training purposes. I should like to point out to the hon. member who suggests Clinton, Ontario, be the site that this is a rather involved question. The decision is not to be taken by the Minister of National Health and Welfare (Mr. Lalonde), but rather by officials of Game Plan '76.

On February 22, 1973, the Minister of National Health and Welfare agreed to the establishment of the co-ordinating committee of Game Plan '76. This committee consists of the Canadian Olympic Association, the Olympic Trust, Sport Canada and some of the provinces and represents the financing agencies concerned with the development of sport and the co-ordination of 1976 Olympic plans. The whole purpose of Game Plan is to give specific thrust to the technical development of sport such as training camps, additional competitive experience, talent identification programs, coaches' training opportunities, sponsorship of national youth teams, sponsoring technical coaches and technical co-ordinators, eventually sport research and two other projects of vital importance.

Game Plan '76 will be seriously exploring for the two winters preceding the Olympics the development of a national multisport training camp. The camp would have access to Olympic class facilities giving our coaches, athletes, sport-medicine and other support people ideal opportunities for working together toward their goal. The decision of Game Plan '76 will be difficult and must take into consideration many things such as the facilities required and climate, to name only two.

PENITENTIARIES—GOVERNMENT ACTION TO ALLEVIATE SHORTAGE OF PSYCHIATRISTS

Mr. Derek Blackburn (Brant): Mr. Speaker, I rise this evening to speak briefly on a topic, one might say a critical issue, which concerns not only me but most Canadians. I am referring to the very serious lack of psychiatric treatment available to inmates of federal penitentiaries.

● (2210)

In reply to a question by me to the Solicitor General (Mr. Allmand) on March 21 and again on March 29, the

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minister admitted that the penitentiary service was not able to attract qualified psychiatrists. I find this to be a deplorable state of affairs in this enlightened age in which we are supposed to be living when one considers three basic points: one, that most inmates suffer from some kind of mental or emotional stress; two, that our federal prisons are the most dehumanizing institutions in the country; and three, that most inmates must some day be released into society without proper treatment and rehabilitation.

No wonder society is outraged when convicted criminals are paroled or released at termination of sentence and commit other heinous crimes such as rape, child molesting or vicious assault, all of which are triggered by deep-rooted personality and psychological defects. What good is it to release these persons if they have not been properly treated while incarcerated? Or, one may also ask, what rehabilitative purpose is served on society's behalf to lock up these convicts if they cannot receive proper medical treatment and their term in prison only serves to make them worse?

It is no excuse for the Solicitor General to simply admit, and I quote him from *Hansard* of March 29, 1974, at page 986, that—

It is difficult to attract psychiatrists away from very large, lucrative practices in the private sector.

Surely he and his officials can come up with a better answer than that. Perhaps they should concern themselves with the reasons it is difficult to attract these highly skilled practitioners from the private sector. I consider the answer which the Solicitor General gave to me in the House as a non-answer.

It is true that some inmates are so seriously ill mentally that they should never be released into society. It is also true that psychiatry in the field of criminal psychopathology is sadly lacking in effective treatment due mainly to the reluctance of governments to spend adequate funds for research, and the reluctance of psychiatrists to practice medicine in such gloomy, anti-professional and dehumanizing environments as prisons. This latter reluctance is understandable; the former is inexcusable.

We have only 14 full-time psychiatrists in our federal penitentiary service, and about 45 psychologists, to serve the mental and emotional needs of over 9,000 inmates. This is an utter disgrace. If a son or daughter of a rich father needs psychiatric help, they usually get that help in what the minister terms "the private sector" because money buys that help. The taxpayers of Canada, most of whom are not rich and cannot afford psychiatric help for their own children, pay over \$10,000 a year per inmate in taxes to keep our inmates behind bars, only to see them released before they are mentally or emotionally stable enough to be released. This situation is deplorable and society is more than justified in demanding both protection and reform.

I do not accept the faint, half-hearted excuses of the Solicitor General when he says he cannot attract adequate numbers of psychiatrists and psychologists to cope with the problem of proper medical treatment of inmates which has been almost totally neglected for far too long. At the same time, I pay tribute to the few physicians who have the dedication to work under such difficult and demanding circumstances caused by the penitentiary services. It