

Health and Welfare

told that a long waiting list is depriving many young people from taking advantage of the benefits of Chrisholme and other institutions. I further understand that an average of 20 referrals a week is adding to the waiting list. It is estimated that 10 per cent to 35 per cent of these children will qualify for enrolment at Chrisholme, if facilities were available.

This sincere dedication to the welfare of fellowmen is most admirable and one cannot leave the Chrisholme premises without a feeling that much is still to be done to correct disparity and create a just society within the boundaries of Canada, in so far as retarded children are concerned. The provincial government finances the food and clothing, but all capital expenditures are raised by the board of directors of the school. I sincerely urge, Mr. Speaker, that the time to give serious consideration to national assistance for similar projects is now. We must recognize the human rights of the retarded child and find a proper place in the scheme of things for his attention and care.

The Canadian Psychiatric Association reported as follows in their submission to the royal commission on health service in 1962:

When the problems of child development and behaviour disorders are uncovered they are legion—juvenile delinquency, the physically handicapped, the mentally retarded, the emotionally disturbed, etc., are areas of grave responsibility for the

medical profession, for social agencies, for school authorities and for government. This responsibility falls to a large extent on the child psychiatrist.

I emphasize that this report was made in 1962, and the following paragraph is found therein:

A child psychiatrist is a qualified specialist psychiatrist who has had an additional two years of training in children's work. In Canada approximately 60 psychiatrists work actively with children and of these less than half have received specialized training in child psychiatry. Most of the available children's services are thinly spread in densely populated areas.

Most provinces have some outpatient services for children but few have residential facilities; services for disturbed adolescents are sparse and facilities for psychiatric approach for delinquency are minimal. The number of child psychiatrists devoted to the field of mental retardation—

The Acting Speaker (Mr. Béchard): Order, please. The hour for the consideration of private members business has now expired.

BUSINESS OF THE HOUSE

Mr. Macdonald (Rosedale): Mr. Speaker, may I just confirm to hon. members that tomorrow we will again be in committee of supply and take the estimates of the Department of Agriculture.

At six o'clock the house adjourned, without question put, pursuant to standing order.
