Supply-Health and Welfare

of bringing it about. It is something which should completely transcend any division on political party lines.

I should like to see in this House of Commons at this session, before this item carries, a clear mandate given from all sides to the Minister of National Health and Welfare to go to that dominion-provincial conference this fall and say, as far as the federal government is concerned the time is now. Let us get on with the job and let none of these smaller considerations stand in the way of the full realization of proper health opportunities for all the citizens of Canada, regardless of whether they live in one province or another, and regardless of whether they have to travel from one province to another.

I happen to live in an area where the majority of the residents have a fairly complete type of health insurance coverage. One aspect of it is provided under the provincial hospital insurance set-up. Another is provided under a medical scheme which is called voluntary, yet as far as I can see now the essential principle that is in operation there is exactly one that could be operated under government auspices. Certainly I have never heard any complaint from any of the local doctors about the operation of that scheme in the particular area in which I live. As a matter of fact, I think largely because of the almost complete coverage of the residents of that particular area under that scheme, we probably have one of the highest per capita rations of doctors of any area in Canada. It is an area in which we have physicians and surgeons of long experience. It is also an area to which younger medical men who are beginning their careers are quite happy to come, either independently or in association with more experienced practitioners.

As I see it, this is not something which any medical man need fear; nor need anyone fear his right of choice of a doctor. I find that inside that little area we have a fairly complete coverage under what could be considered a health insurance plan. There is certainly no regimentation and there is a great deal less fear and anxiety on the part of individual people than was evident before that type of coverage came into being. Therefore, Mr. Chairman, I hope the minister will be able to rise in his place before this item passes and give us some indication of the kind of approach he for one will take when this conference meets, and hope he may tell us what will be brought in at the next session of parliament in this connection.

Mr. McIvor: Mr. Chairman, just to keep the record straight, this matter was brought [Mr. Barnett.] into the house in 1937 not by the C.C.F. but by a member on this side of the house, when he proposed a resolution. That resolution was supported by the former member for Provencher, our family doctor, Dr. Howden. The minister of health at that time was that fine big Scotsman from Vancouver, the late Hon. Ian Mackenzie. As a result of that full-dress debate a committee was formed and specialists were heard from all over the world. A bill was drawn up. We were two years at it. It has not been put into force because there were certain difficulties in the way.

We must co-operate with the provinces. I am sure the difficulty the minister sees is that we have not enough doctors; we have not enough hospitals; we have not enough nurses. I am convinced that just as soon as the Minister of National Health and Welfare thinks it is possible, we shall have a health insurance plan that will be the best in the world.

Mr. Drew: Mr. Chairman, I propose to refer only to the problem that is presented by the fact that this is a country with a federal constitution. The hon. member who has just spoken expressed confidence in the Minister of National Health and Welfare. That is appropriate from his point of view. However, I have no intention of dealing with this on the basis of any question of confidence, personal or otherwise. It is not within the authority of the Minister of National Health and Welfare alone to solve this problem.

Mr. Martin: Hear, hear.

Mr. Drew: I must take issue with the statement that was made a few minutes ago, that no petty considerations of constitutional jurisdiction must be permitted to affect the solution of this problem. Our constitution is not a petty matter. Our constitution is the structure within which the people of this country agreed to live together as one people. It may raise difficulties at times. Unquestionably it does.

There are, of course, differences in the approach to this problem. The very words "health insurance" raise questions. Some people have one idea, others have another, as to what the words "health insurance" mean. I think we can all agree on one basic proposition. I doubt if there is any hon. member of this house who is not in agreement with the proposition that health along with education constitute the two fundamenta. requirements of society. Perhaps without health it may be difficult to acquire education, and without education health may give very little satisfaction. We all know the old maxim: a healthy mind and a healthy body.