

*Health and Welfare*

what we say makes no sense. Those people are not free to speak their mind. What did they say when they went to Bonn? What was dictated by American finance, and the Canadian Minister of Finance said there exactly and textually what American finance told him to say, and nothing else.

Mr. Chairman, I heard earlier a Liberal member speak about the family corporations transferred from father to son and inheritances which he found useless, thereupon a Conservative member immediately added a remark. But what has the right hon. Prime Minister (Mr. Trudeau) done to earn the money he has? Everyone knows that he inherited the wealth of his parents and nobody objects to that. But what about the young, the children who usually inherit from their parents? Some heirs may be heartless and dilapidate the estate that was left to them, but the younger generation will generally have enough initiative to improve the industry or inheritance they received. Then, the inheritance represents an asset, a potential, a reason for the existence of taxes that must be imposed on estates left by the father to his son, or by one family to another.

Mr. Chairman, a distributive justice is what the Cr ditistes ask for. It is not with new taxes that the increase of pensions—

**The Deputy Chairman:** Order. It being five o'clock, it is now my duty to leave the chair, report progress and ask permission to sit again at the next sitting of the house.

Progress reported.

[English]

**The Deputy Chairman:** It being five o'clock the house will now proceed to the consideration of private members business as listed on today's order paper, namely notices of motion and public bills.

**HEALTH AND WELFARE****INCLUSION OF MENTAL AND T.B.  
INSTITUTIONS IN INSURANCE  
PROGRAM**

**Mr. David Orlikow (Winnipeg North)** moved:

That, in the opinion of this House, the government should consider the advisability of including mental hospitals and T.B. sanatoria in the federal hospital insurance program (Hospital Insurance and Diagnostic Services Act) so that the provinces will have available sufficient funds to provide for adequate treatment of the mentally ill, those people suffering from T.B. and the care and training of mentally retarded children.

[Mr. Caouette.]

**The Acting Speaker (Mr. B chard):** This notice of motion was called a second time on Monday, December 2.

• (5:00 p.m.)

**Mr. Orlikow:** Mr. Speaker, the problem of mental illness is one of the serious health problems facing the people of Canada at the present time. Today almost 70,000 hospital beds are being used to treat people who are ill as a result of mental or emotional disorders. This is almost half of the number of hospital beds available in Canada. More than 75,000 patients are under the care of Canadian mental hospitals. This year, Mr. Speaker, mental illness accounts for 41 per cent of hospital patient days. It has been estimated that one person out of ten in Canada is or will be mentally or emotionally ill during his lifetime.

We have not had in Canada a really scientific estimate made of the cost of mental illness to Canadians, but experts who have done a good deal of work for the Canadian Mental Health Association have estimated that the cost of mental illness to Canada, in the form of medical and social services, lost time and production, amounts to \$500 million per year. This is a very substantial amount of money even in the inflationary year of 1968. Some studies made in Great Britain indicate that the cost of mental illness runs between 1.6 and 1.9 per cent of the gross national product. Applying that figure to Canada, Mr. Speaker, the cost is more than \$600 million a year.

I doubt, Mr. Speaker, that any person in this house would disagree with me when I say that the hospital programs initiated just after the end of world war II, as a result of which we now have government financed hospital plans in every province in Canada and covering all of the people of Canada, have been of tremendous benefit in meeting the health standards of the public of this country.

The basic and major fault in the legislation originally proposed, the Hospital Insurance and Diagnostic Services Act, was that mental hospitals and t.b. sanatoria were excluded from the federal hospital insurance program. Every professional organization that has studied the question—for example, the Canadian Medical Association, the Canadian Psychiatric Association, the Canadian Mental Health Association and their provincial divisions—have called upon federal governments both Liberal and Conservative to amend this legislation so as to include under its provisions mental hospitals and t.b. sanatoria. This is