

Health Insurance

under this measure. We are providing for the assistance of these people in so far as they are hospitalized in general hospitals.

In further confirmation of the position we have taken is the report of the government of Nova Scotia examining this matter. It recommended that the Nova Scotia government should accept the proposal made by the federal government and there they said, as I indicated I think the other night, that in the matter of mental health and tuberculosis these illnesses should not, they thought, be included in the proposal which is embodied in this bill.

Therefore, I do not think we should go on giving the impression that we are seeking to draw a distinction between those who suffer from these two forms of illness and those who suffer from other illnesses. What we are seeking to do, let me repeat, is to help individuals in Canada in meeting their individual hospital costs. If an individual has hospital expenses as a result of mental illness or tuberculosis he will be taken care of under this bill, but if he is in a provincial institution where the province pays for it out of the consolidated fund it cannot be seriously arguable that the provision in the bill should be otherwise than it is, with the exclusions provided.

Mr. Zaplitny: Would the Minister of National Health and Welfare permit a question at this point. I refer to the statement that to the extent an individual pays his own costs he would be provided for under this legislation. In the province of Manitoba, as the minister may know, an individual does pay part of the cost in the mental institution. Does the minister feel that that part of the cost should be covered by this legislation?

Mr. Martin: The figures in Manitoba show that about 90 per cent of the cost is borne by the province and 10 per cent, roughly, by the individual. Those are the figures given to us by the province and we had this whole thing thrashed out with the provinces a year ago. The hon. member can get these figures and he will see that they are correct. I think that in the case of tuberculosis it is higher than that but in the case of mental illness I think it is around 90 per cent, although I am speaking roughly.

Mr. Knowles: I would like to just be sure that the figures include the municipalities.

Mr. Martin: Yes, my hon. friend is quite right. I think there is nothing further for me to say on this bill, except that the wide measure of discussion in this house indicates the value of this proposal. It represents a very important step in Canada for us to embark on this particular kind of program;

it is a program that arises out of the efforts, not of any one group but it is the product of many people of this country. I think, for instance, at the moment, of Dr. Fred Jackson an officer in my department who at this time is very ill, and one of the great men of this country. Dr. Jackson has had so much to do with this proposal, as have many others throughout the country. It is the result of co-operation between the provinces and the federal government and it is a proposal which I think will rank as the foremost of the steps taken by this house in the field of health and welfare. I am grateful for the strong measure of support given in principle to this bill, a bill which I know will mean much to the welfare and good health of the people of this country.

Some hon. Members: Hear, hear.

At six o'clock the house took recess.

AFTER RECESS

The house resumed at eight o'clock.

Mr. J. G. Diefenbaker (Leader of the Opposition): Mr. Speaker, I rise for the purpose of saying but a few concluding words on behalf of this party with regard to the bill which we hope will soon be implemented and become of the law of the land. Indeed, one cannot but feel on this occasion that in the legislation now before the house we have come to the end of a long road that began in 1919 when the Liberal convention of that year promised health insurance legislation, and in successive elections Canadians have heard of the possibility of its introduction should the Liberal party be successful.

We have come now to the end of the road so far as the general skeleton of the legislation is concerned but there still remain various sectors of the community that should be included in the provisions of the legislation which are as yet untouched. Naturally we are very pleased with the legislation. I think a word of tribute is due to the premier of Ontario the Hon. Leslie Frost, who, at the last dominion-provincial conference, demanded that this subject be placed on the agenda and ever since has applied pressure in order to achieve the legislation now before us, although not being entirely satisfied that all hospitals which ought to be included are included within the ambit of the legislation.

Our desire while giving full support to the legislation as we have throughout, and in the amendment moved by the hon. member for Eglinton (Mr. Fleming), is to do our part even at this late hour to improve the legislation in order to make it more effective. I am