was quite inadequate. But there are four provinces with at least a start on a national health plan.

I was surprised to read that the Liberal party in the province of Ontario, the province which I hoped would be the next to fall in line—though perhaps Manitoba next and then Ontario-was against a national health plan. I have always believed that if one of the two big provinces came in we would have a very good chance of having a national plan put into effect federally by the government of Canada. But I noticed that a panel discussion at the Ontario Liberal convention agreed unanimously that any form of government health insurance would be undesirable at best, dangerous at worst. The minister is an Ontario member and is a member of the Ontario Liberal party. He should do his level best to educate the Liberals of the province of Ontario to the need for a comprehensive national health plan. I read the following from the Globe and Mail:

"It is the responsibility of everyone individually to look after his own needs," declared one participant, voicing what seemed the majority opinion. "If a person has somebody else looking after his costs for health protection or anything else," he added, "it is a very dangerous thing."

I am not going to quote all of this. The moderator of the panel, of course, was Professor Marcus Long of the University of Toronto, who is chairman of the Ontario Liberal association policy committee. Somebody asked, "Who picked this panel?" Dr. Watson, not Dr. Watson of Sherlock Holmes fame but Dr. Watson of Toronto, the founder of the Physicians' Services Incorporated plan for medical care, had this to say:

Under a national scheme people are liable to stand in a line of 50 and wait all day.

Where does he get that idea? Then Mr. Livingstone referred to Britain's nationalized health services, "where protection is available on a so-called free basis." "I am emphatically opposed," he said. The report continues:

There are not the same conditions in Canada, so we don't need so drastic a scheme.

No, there are not the same conditions today in this country as in Great Britain. Only to a degree were they ever the same, because in the British Isles there was always available to the very poor the voluntary hospitals that have been in existence for over a century, and for the well to do, of course, nursing homes. As a matter of fact the people who benefit most and would benefit may know, when you go to Britain for a

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people in the middle income brackets, the people who cannot afford a serious illness. The report continues:

If government absorbed the full cost of a medical scheme, Mr. McLachlin said, it would take the initiative away from the people involved. It would just be a dictatorship.

Will anyone dare to say in this house that the British people are under a dictatorship? Well, we in Canada are free, thank God, from dictatorships; but if I wanted to make comparisons I would say no freer people exist in the world than the people of Great Britain.

So it went on. I could go on and quote other statements to the same effect. So I say to the minister it is about time the Ontario Liberal association did some work among its own members to educate them as to what such a plan would mean to the people of Canada.

I said a few moments ago that at the recent conference in Toronto many of these arguments had been exploded by doctors who in the initial stages were opposed to the national health plan in Britain. Here is one family doctor, a general practitioner, Dr. E. A. Gregg, who said he spoke for Britain's family doctors who number almost 20,000. This newspaper report reads:

"I can honestly say to you that we have kept our full clinical freedom and that we remain free from any 'parish' pump local political control".

The British family doctor has preserved his independence because, Dr. Gregg said, he has accepted wide administrative responsibility.

Then Mr. Rowland Hill, chairman of the central consultants' and specialists' committee of the British Medical Association, is reported as follows:

Mr. Hill said the British specialist, despite his early fears, today enjoys a "warm" relationship with high government administrators. "His sense "His sense of confidence has actually increased, and he hopes and anticipates that his influence in the future also will increase.'

British doctors, he said, are "not in any way downcast, but are finding present conditions defi-nitely stimulating. A note of optimism and of con-fident progress is to be heard more loudly than for many years in Britain."

That is testimony as to the national plan which was inaugurated in Britain. I have reports of statement after statement made by doctors from Britain at that conference approving of the plan in effect there. What I am suggesting to the house and the minister is that the time has come when we should be putting into effect in this country a comprehensive plan to cover all our people regardless of their economic or social status.

I have met people who have been in Britain in recent days and have had service in the hospitals there. As hon. gentlemen most in this country from such a plan are the visit and anything happens to you they