

to log jam and paying him his pension increase, it will be too late to do him any good.

**Mr. Muir:** Which has happened in some cases.

**Mrs. MacInnis (Vancouver Kingsway):** Yes, it has happened in many cases. I am worried that this old gentleman may go to his death taking with him a burning sense of injustice over the fact that he could not get the pension to which he was entitled, and which I am sure he will get when finally the authorities get around to authorizing it. He is in his eighties now, so his case is urgent.

I wish similar action could be taken in regard to so many pioneers of this country before it is too late. It is true that owing to poverty, in some cases, disabilities do worsen with age. Also, we have been collectively ignorant as a society in regard to diet and other aspects of keeping people fit and healthy. We have not known how to handle psychiatric troubles and similar problems. We do not know very much about many other diseases, though we know a lot more than we knew half a century ago when these people were relatively young. This is why the elderly people of today cannot wait. They have been pre-aged by a number of factors over which we are just now beginning to have some control. One of these days we will have even more control over disease, nervous disorders, cancer, and so on; but this will be too late for the elderly people of today.

I suggest that all we can do for these people is try to relieve their suffering. A lot of elderly people today are suffering because they cannot afford to buy drugs. Pharmacists have told me that elderly people come in with prescriptions, timidly inquire what the prescription costs to fill, and then sadly turn away because they do not have sufficient money. In many cases these are people who have been suffering miserably for want of the drugs.

I do not think there is any other subject that is discussed in this House that could bring us closer together than the question of trying to get free drugs for elderly people. But we cannot wait until all the angles have been examined by the federal government and the provinces. Although discussions must continue, in the meantime let us see if the federal government cannot produce some kind of plan for co-operative action which it could take to the provinces to bring free drugs to our elderly people.

All of us occasionally go to meetings where we indulge in conversation, discuss an agenda, and do not get very far. But if someone at that meeting has a well thought-out plan and can put forward dollars and cents figures, we can get much further. Therefore I urge the Minister of National Health and Welfare (Mr. Lalonde) to do just this. Let him take the advice of the best people in his department as well as those outside it who know all about drugs and drug prices, and present to the next meeting of premiers a ready-made plan, which will of course be subject to discussion and modification, so we can introduce a program of drug care for the elderly people of this country. Let us make drugs freely available to everyone over 65 years of age, and use the income tax system to retrieve the cost of those drugs from those who do not need the financial help.

● (1650)

**Mr. Robert C. Coates (Cumberland-Colchester North):** Mr. Speaker, since other members may wish to participate in this debate I shall take only a few moments to indicate support for the very worth-while resolution which has been moved by the hon. member for Cape Breton-The Sydneys (Mr. Muir). I think it is very appropriate that the hon. member has placed his motion on the order paper and has had it debated today, because he and the hon. member for Vancouver Kingsway (Mrs. MacInnis) know something about personal problems associated with drugs and medical care. Drugs and medical care brought them back along the long road from disability to the point where they can stand in the House and appear to be very hale and hearty and contribute in a very worth-while way.

For members who are not aware of it, may I say that the hon. member for Cape Breton-The Sydneys was involved in two very serious mining accidents. In one accident he had a broken back which required spinal fusion. Before that was done he had been confined to a wheelchair. One would not know this today. Today the hon. member appears to be a very hale and hearty fellow. Much of that probably is due to the fact that he was able to obtain the necessary drugs at the time of his disability. On another occasion he was involved in a very bad fire and explosion in a coal mine. Almost all his body was burnt. I am sure the hon. member for Welland (Mr. Railton) will appreciate the importance of drugs to treat the type of burns from which the hon. member for Cape Breton-The Sydneys must have suffered.

I know the hon. member for Vancouver Kingsway, who has always had great concern for the poor and unfortunate people in this country, has herself suffered in a very extreme way from disability but has regained her health. Also I am sure a great deal of that is due to the fact that she received proper drug care.

It is therefore very appropriate that these hon. members have participated in this debate. I think it is also very appropriate that the hon. member for Welland, a member of the medical profession, should participate in this debate because I am sure he sees in his doctor's office the type of people who suffer from the problems we are discussing. He is a very fortunate man in that he is a resident of the province of Ontario. I listened to him talking about the ways and means available to our elderly citizens in need of drugs in order to maintain their health. I must tell him that the welfare system in the province of Ontario is a devil of a lot better than the one which exists in the province of Nova Scotia, because the Canada Assistance Plan does not look after people in Nova Scotia.

If people in Nova Scotia wish to obtain drugs, they must dig into their own pockets and use the money they receive through old age security payments or from the supplement. It is seldom that a welfare officer has time for a person seeking help to purchase drugs if that person qualifies for assistance under those two programs. We have in the province of Nova Scotia the lousiest welfare program in the country. It is a national scandal so far as I am concerned, and I have said this before. I realize that the hon. member, coming from Ontario, would not appreciate what I am saying because his province has a very realistic and helpful welfare program at the present time.