The Address-Mr. Coldwell

In 1942, as I have indicated, the federal government set up an advisory committee on health insurance to make another study. That was stated in the proposals to the dominion-provincial conference. A year later that committee issued a report. It was 500 pages long. It dealt with every aspect of health insurance and, as I said, actually drafted a bill.

Further studies have been made almost continuously ever since. In fact on December 29, 1945, the government organized a special directorate of the department of health called the directorate of health insurance studies. This directorate has been functioning continuously ever since that time, a matter of seven years. Among other things, its function has been to study and analyse the health insurance legislation of other countries and the planning of legislation for our own country. In order to show that this has been an earnest effort on the part of this departmental organization, I find that the government has spent over a quarter of a million dollars on this directorate since it was set up seven years ago. In addition, the federal government has authorized the spending of approximately \$650,000 in grants for other surveys. In its proposals to the federal-provincial conference of 1945 the federal government estimated the cost of a comprehensive plan at that time at \$250 million a year.

This of course was on the basis of prices as they were at that time and with the population as it was in 1941, about 11½ millions. If we want to be fair about it, we have to increase that \$250 million in conformity with the increases in the cost of everything else in the country, and with the increase in the population. If we take the 1952 estimated population of Canada at 14,600,000 and the cost of living in 1943 as 118.4—it is now 185 -we can calculate that on that basis the \$250 million a year would have to be increased to about \$492 million a year. In a recent broadcast I said \$470 million, because I was using rather a smaller population figure than the one which I think is more accurate and which I have just seen.

When we think of the various organizations that over the last several years have asked for a national health insurance plan for this country we find that it makes a very impressive list. We have several representative organizations such as the following: The federation of agriculture and other farm organizations; both the national labour congresses; the American Federation of Labour groups and the Canadian Congress of Labour groups and the Canadian and Catholic Confederation of Labour; the railway transportation brotherhoods; the Canadian Legion; the

board of evangelism of the United Church of Canada and numerous other organizations. All have asked for a national health plan.

Quite recently a Gallup poll was taken in this country; Gallup polls have a habit of showing at least pretty closely the state of public opinion. That poll indicated that eight out of every ten Canadians wanted a national health plan on a contributory basis. That is what we suggest. I quote the words of the question:

. . . . under which they would be assured of complete medical and hospital care by the federal government.

We find more and more that the leading men in the medical profession are coming around to the need for such a plan. I noted around the middle of September that Dr. J. B. Jobin, chairman of the Canadian association of French-speaking physicians, had spoken at Laval university, and in the course of his remarks he said this—of course I am using the translation—"Socialized medicine is a must if modern medical services are to be accessible to everyone". I regarded that as a very important statement by a medical man who is so representative of some of our French-speaking Canadians in the province of Quebec.

Where we have anything in the nature of a widespread health plan we find ample support for it. I expect that some hon, gentlemen read the very interesting article in Maclean's magazine of a month or six weeks ago, which dealt with the high cost of hospitalization and the high cost of health generally in Canada. If so, they would have noticed the report that in various parts of Canada demand for a health plan was taking shape. The writer outlined what had been done, for example, in my own province of Saskatchewan, in the Swift Current area. In that district they have established a health region which takes in Swift Current and I believe something like a hundred towns, villages and municipalities comprising practically the whole of the Swift Current area. There, for several years, not only has there been in effect a hospitalization plan which gives everyone in the province coverage, but also a plan whereby medical aid is provided to the residents of that area, without individual obligation. The health of the community as well as the care of the teeth of the school children are looked after in this unit, under this plan.

I also noticed a few days ago that, again in my own province of Saskatchewan—and this indicates the demand in a province where a considerable amount of work has been done