

INFANT MORTALITY RATES

Question No. 2,616—**Mr. Dinsdale:**

1. What was the infant mortality rate in Canada for each of the past ten years among (a) Indians (b) Eskimos (c) other Canadians?
2. What are the reasons for any differences which might exist between the three groups?

Hon. A. J. MacEachen (Minister of National Health and Welfare):

1. Infant mortality per 1000 live births

Year	(a) Indian	(b) Eskimo	(c) All Canadians
1956	96	238	32
1957	85	228	31
1958	86	235	30
1959	75	206	28
1960	79	210	27
1961	76	211	27
1962	75	194	28
1963	70	157	26
1964	62	94	25
1965	Not available	95	24

Data on Indian infant mortality for 1965 are not yet complete but present indications are that the downward trend has continued in 1965 and in 1966, preliminary figures suggesting the rates may now be around 60. Although still two and a half times the national infant mortality rate, Indian infant mortality has been reduced in the past decade by 36 per cent to less than two-thirds of what it was in 1956.

Eskimo infant mortality, originally fairly consistently some seven to eight times the comparable national rate has, since 1961, been reduced by 61 per cent to 39 per cent of what it was in 1956 and is now less than four times the current national rate.

In the same period the national infant mortality rate has declined by 23 per cent to 77 per cent of what it was in 1956. The decline in both Indian and Eskimo infant mortality has, therefore, been more rapid, in the case of the Eskimos almost three times as rapid.

2. The Indian infant mortality rate is high compared to the rate for all Canadians largely due to the fact that some 25 per cent to 30 per cent of pregnant Indian women still do not take advantage of available medical services and a further 30 per cent only report late in pregnancy and reap relatively little benefit. The infant mortality rate amongst children of Indian mothers who do make adequate use of the services available to them is around 30 per 1000 live births or very little in excess of the national

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rate. Some 12 per cent of Indian mothers, usually older women, still seem to prefer to be delivered in their own homes by untrained native midwives and the infant mortality amongst the children of these mothers is around 17 per cent as against 3 per cent among women making proper use of available medical and nursing care.

The reasons for the continuing higher infant mortality amongst Eskimos, the total number of actual deaths involved in 1965 being 50 deaths of children under one year of age out of 524 born that year, are mainly associated with the special hardships inherent in their traditional way of life to which Eskimos expose their children. The principal causes of Eskimo infant mortality are outstandingly pneumonia and accidents. The severity of the climate, the types of dwellings they use, ignorance of safe domestic hygiene and good feeding practices, often inability to apply what knowledge they have when travelling or camping for lack of facilities, all play a part. Remoteness and inaccessibility frequently feature as contributory factors, resulting in delay in getting medical aid. This affects some Indian groups also but to a lesser extent than Eskimos where climatic conditions more often complicate communication and transport difficulties. Some Indians and Eskimos, also, still show some reluctance in seeking medical aid promptly, tending to delay until the situation is critical before calling for help.

WAR ON POVERTY EXPENDITURES

Question No. 2,617—**Mr. Peters:**

1. What is the total amount of federal funds that have been spent, as of December 31, 1966, on all the programs comprising the government's "war on poverty" since its inception?
2. How do these expenditures break down by major program categories?

Mr. John R. Matheson (Parliamentary Secretary to Prime Minister): 1. and 2. While a large number of continuing programs form a part of the federal anti-poverty and opportunity program, there were seven major programs between April 1965 and December 31, 1966: (a) Expanded ARDA programs, \$33,006,577. (b) Area development agency: grants for industry, \$1,000,000. (c) Manpower programs: (i) Manpower mobility program, \$1,000,000; (ii) Technical and vocational training agreement, \$275,575,386; (iii) Older workers program vocational rehabilitation, \$1,713,000; Total manpower, \$278,288,386. (d) Canada Assistance Plan: Claims not yet