Supply-Health and Welfare

The main point made by the Leader of the Opposition was that the time had come when, in view of all the studies that had been made—and I looked up his exact words during the dinner recess—there should be no delay in getting some understanding between the provinces and the federal government in respect of a scheme—a scheme, incidentally, which the hon. member did not detail. I agree and the government agrees that there should not be in these and other matters unnecessary delay.

He mentioned the fact that the provinces had all made surveys of their existing health facilities. He did not mention the fact that it was the federal government that paid entirely for these surveys. The 10 provincial governments were put in funds by the federal government in 1948 for the purpose of making a complete assessment of their health facilities, their personnel needs, the cost of any kind of scheme, medical or hospital insurance which they might care to see implemented. The last of these surveys reached us some time ago. In the month of April we received the last survey, from the province of Newfoundland.

Now, what did all these surveys indicate in so far as government policy and the wish of the provinces in this matter are concerned? It is idle to talk about health insurance unless the provinces are in agreement. Unless they are in agreement it is not possible to have a scheme, and anyone who ignores that fact I do not think is being fair to the Canadian people. I am not suggesting that the Leader of the Opposition did not note that fact. He did.

These surveys were all reported to us. As I said, the last one came a few months ago. Only one province, Saskatchewan, urged the government, in the light of the survey of its province, to enact a national health insurance scheme to be jointly contributed to financially by the federal and provincial governments. It is true that the survey for Alberta recommended health insurance on a national scale, contributed to by the provincial and federal governments and administered by the provincial governments. But the province of Alberta entered a caveat and said that this particular recommendation did not carry the sanction of the government of Alberta.

The province of British Columbia, in its survey, said it was in favour of a hospital insurance scheme. No province other than these three gave any support to a national scheme—

Mr. Trainor: Will the minister state what Manitoba said in the survey?

[Mr. Martin.]

The main point made by the Leader of the Opposition was that the time had come when, in view of all the studies that had been made—and I looked up his exact words during the Mr. Martin: The province of Manitoba did not commit itself. The only province that committed itself was the one I have mentioned.

This is the background. I do not say that will be their continuing attitude, but that is the background of provincial attitudes. Since that time I have had 14 meetings with all the provincial departments of health, and nothing has taken place at these meetings as far as they are concerned which would reverse the positions I have already described. Therefore, it is not right to suggest that there has been any delay so far as the federal government is concerned.

I am not criticizing the provincial governments. I believe that in the matter of intergovernmental relationships it is important to respect the policies and decisions of other governments. That is what I am seeking to do tonight, but I am stating the facts. In the face of that, to go on suggesting that the federal administration is at fault, or is needlessly delaying, is not to give a true picture of the situation, and is not giving expression to the kind of view that is likely to further the cause which basically all the political parties in this house support in their platforms.

Shortly after the dominion-provincial conference in April of this year, the Minister of Finance arranged for his deputy minister, the two deputy ministers in my own department and other officials in the federal government service and their opposite numbers in the provinces to meet. They met, I think, almost within two weeks of the last meeting with the provinces for the purpose of preparing the necessary material for the conference that will take place beginning next October 3. Material has been and is being prepared for that conference in respect of all of the items enumerated for discussion, or that we anticipate might possibly be discussed at that conference.

Among the enumerated items on the agenda is the matter of health and welfare services. Therefore so far as we are concerned there is no delay whatsoever in trying to meet this problem, in the light of our over-all obligations, as responsibly as we can.

I want to make another observation. Several times during the course of the debate the hon. member for Saskatoon, the hon. member for Kootenay West today, and I think the hon. member for Rosetown-Biggar, all acknowledged interjections I made about the fact that Canada was a federal state. They recited the instances of health insurance programs in many countries. All of these countries, but one, were unitary states. That is not our position in Canada; we are a federal