

direction of the treasury board in this matter. We are only paying specifically for the veteran recipient of war veterans allowance in the premium provinces. I would guess from what I have seen of this operation that before long most of these premium provinces may revert to a sales tax method of administration because it is generally more satisfactory as evidenced by the British Columbia experience. If and when this comes about, the situation will be equalized. Until it does we are only paying the premium out-of-pocket expenses which are known and foreseeable. I do not know how we would try to make an adjustment where the plan is financed through a sales tax.

Mr. MONTGOMERY: This only covers the veteran himself. If he has a wife and family he has to pay that in addition?

Dr. CRAWFORD: Yes. As you know we have never taken treatment responsibility for the dependents of a war veterans allowance recipient.

Mr. MONTGOMERY: I have several letters on that. In all the municipalities in New Brunswick it really has not got going. I suppose it is due to the fact that the people do not know just yet what will happen; but where the municipality collects the premium there ought to be some way of working it out.

Dr. CRAWFORD: The way we worked it out, for example in Manitoba, is a good illustration. We notify Manitoba of the fact that from a municipality we are paying the premium on behalf of, let us say, "John Smith" who is a married man. He has the opportunity of paying the difference between the family premium and the single premium; and in this way he has his family covered. There is a good liaison.

Mr. STEARNS: Mr. Chairman, I would like to ask Dr. Crawford a question. If my question does not come in the proper place, he does not have to answer it at this time. Dr. Crawford, I have been wondering if, excluding war wounds, the general state of health of the Hong Kong survivors is remarkably different from the present state of health of the survivors of the European theatre of war?

Dr. CRAWFORD: Are you confining your definition of war wounds to that received from a bullet or a bayonet?

Mr. STEARNS: I was thinking more in terms of therapy. I am wondering about the general state of health of that force as compared to the European force.

Dr. CRAWFORD: There was a tremendous morbidity incidence rate among the Hong Kong people. It was brought about in the main by nutritional deficiencies. In many, this had the result of producing permanent changes in the central nervous system. These have been demonstrated in pathological sections. It did not affect everybody equally. I think the people who came back from Hong Kong in very bad shape are still in pretty bad shape. They have not improved as much as we hoped they might. They have not worsened very much. Those who were more fortunate and for some reason or another escaped the onslaught of this thing should get along, by and large, as well as any other group of veterans.

I get a little emotional about this every now and again, because I would hate to think Hong Kong veterans were given any preferential treatment merely because they were Hong Kong veterans. Once you begin to classify these people in a separate category as if they were lepers, I think you do them a very grave disservice. I have been very happy with the attitude of the Canadian pension commission in treating these fellows on the basis of what is wrong with them as individuals. I think they have been eminently fair in the majority of cases.

Mr. ORMISTON: I was wondering whether Dr. Crawford would care to answer—