

of signing fifteen death certificates for Indian children in one week, and not one need have died.

Mr. MACNICOL: I met a teacher at one reserve and she recommended that teachers be sent to some place where they could be taught all the simple things about nursing and medicine.

Dr. MOORE: Yes, first aid etc.; and be in a position to make use of the facilities—

Mr. MACNICOL: And she should be paid accordingly.

Dr. MOORE: I agree with Mr. Hoey's suggestion with regard to these welfare officers. Give them some training and give them the assistance of the visiting nurse going to the reserve and spending time there.

I think there is room for welfare workers among the Indian women and children. I believe that such problems cost the people of Canada millions of dollars because of venereal disease and illegitimacy which could be avoided if we had welfare workers. The provinces have the organization and would be only too willing to cooperate with us in the way of giving some supervision. I have discussed this matter with welfare workers in the provinces and if we could provide these officers who could be trained to work among the Indians the provinces would co-operate with us in supervision, etc. I have covered that matter here.

And now with regard to departmental hospitals. We operate about fifteen hospitals at the present time. It is our experience that these are by far the most adequate and economical hospitals for Indians. Our chief problem, as I said before, has to do with tuberculosis among Indians. At the present time we have almost 1,000 Indians under treatment for tuberculosis, and according to figures that were prepared by the Canadian Tuberculosis Association that figure should be nearer 3,000. We have adequate facilities for treatment of only about 250 Indians in our hospitals although we actually are treating 500. I have seen these criticized in the press, and I was not in a position to defend them because I had seen the hospitals. They have beds in the basements and in the corridors and they have nurses trying to care for these people under inadequate circumstances and running great danger from infectious disease because these hospitals are not large enough. One medical man in charge said, "What will I do? Will I send them back to die? Four of these people will get better if they stay here. If I had a proper hospital, in place of treating one out of four that needed to be treated in that area—"

Mr. MACNICOL: At Munsey you have an excellent doctor in charge.

Dr. MOORE: Dr. Pardy is in charge at present; Dr. Macleod is in uniform.

Mr. MACNICOL: If someone takes sick they have to send him up to London. The doctor I spoke to told me how many there were there—perhaps 1,000. If there were a little hospital there the Indians would go, but they do not like going off the reservation.

Dr. MOORE: These Indians have access to the facilities at the Victoria hospital in London. Think of all the poor people up in the north country who get sick and die in their teepees and never see a doctor or a nurse, let alone a hospital. I feel that our own hospital facilities should be greatly increased. I think we should provide at least 2,000 beds for the care of tuberculous Indians, and I do not think we will make any progress in reducing the terrific mortality among these people until that is done. I think some of those beds should be located in areas where there are large concentrations of Indians, districts like James Bay, where there are 4,000 Indians around the bay.

Mr. MACNICOL: Have you nothing up there?

Dr. MOORE: There are a couple of small mission hospitals.

The CHAIRMAN: Will you go on with your brief?