Health and Welfare

four times the capital expenditures of hospitals that are needed.

We agree. We admit that we lack hospitals, psychiatric or other, and that it is not normal to make taxpayers from Quebec or another province, pay thrice the capital expenditures of a \$1 million hospital. After 40 or 50 years, the hospital will have cost \$3 or \$4 million in capital charges, which means that we shall have to pay an amount equal to the cost of four hospitals, but we shall only have received the investments for the building of a single one.

The hon, member for Hull (Mr. Isabelle) is right when he talks about a scandal in connection with all the moneys that the federal and provincial governments must pay to finance the hospital insurance program.

A look at the items covering investments, depreciations and expenditures for hospital construction makes us realize that we have to pay hospitals four or five times over. The hon. member for Winnipeg North should have pointed out in the notice of motion we are now studying that investment charges should be advanced by the Bank of Canada and made available to the provinces so that they may pay our hospitals only once.

This motion raises a second point in connection with hospital insurance, and I quote:

—so that the provinces will have available sufficient funds to provide for adequate treatment of the mentally ill, those people suffering from T.B. and the care and training of mentally retarded children.

I know several children who are waiting for a hospital bed to undergo treatment. The federal government and the provinces are short of money. There is a shortage of space a shortage of everything. However, there is a solution.

That solution is not medicare, as suggested by the hon. member for Hull, for although he condemns the abuses of the present system, he still approves of medicare. That solution is a plan even more socialistic than today's hospital insurance, which would meet the needs of our citizens in health matters, but not according to the proposals made during the last election campaign concerning medicare.

Abuses are denounced in the case of those who go to hospital just for a check-up and who take it easy for three or four days. But if medicare becomes more elaborate, with even more officers and red tape, we shall have even less results and we shall be even farther away from the objectives we have today, namely the protection of health.

Now the Ralliement Créditiste has recommended for a long time a health program that would solve the problem. A health dividend would be granted by the federal government with the co-operation of the provinces. It would be paid to individuals who in turn could go to a hospital that suited them and subscribe to the health insurance program of their choice. Civil servants should not ram health insurance plans down people's throats.

Health is a matter concerning the individual and the medical profession, and the hon. member for Hull is well aware of it. Why does the government not try to implement a health insurance program which would respect the personality and the privacy of the individual. The Créditistes suggest a solution: A health dividend should be granted to the individual so that he may, as a family man and as a citizen, obtain a program of medical protection from the insurance company of his choice, the representative of his choice, in order to go to the hospital of his choice and to choose his doctor.

When Canada becomes even more socialistic civil servants will choose our physicians for us. It might be an exaggeration in 1968 to say that civil servants, in a few years, through Medicare, will choose our physicians, but let the Medicare program take root in Canada and before ten years, doctors will have become servants of the state. They will have no say whatsoever about health, because the best among them will have gone. In fact they will be replaced by civil servants with no interest in the health of the Canadian people, because they will consider themselves as mere employees of the federal government and will not have any medical reputation to safeguard. Those doctors will be ordinary numbers, the same as the sick persons on a medical file card. The hon, member for Hull is a doctor and if he were not connected with a political party, he would agree with his colleagues who are practitioners and who want to protect the doctor's personal initiative and, at the same time, the health of each individual.

• (5:40 p.m.)

Canadian doctors are as interested as M.P.'s in protecting the health of the Canadian people. When we have incorporated national health in a program such as medicare, the objectives we are seeking to attain today will not only be beyond our grasp but will be further away still than the solution of the problems now facing us.