

Supply—Health and Welfare

was interested. If we refer to page 6286 of *Hansard* for July 16, 1955, we find that I said this:

But I hope the minister who, I understand, is interested in what I have said, and has made some inquiries, will give some indication of his stand at the present time and tell us if something is going to be done in the next year or two, or in the next five years perhaps, in the matter of research and development.

Then the minister said:

My hon. friend may be sure of my deep interest. This matter is now being discussed, as a matter of fact, with the Charles Best institute . . . in Toronto, and a project is possibly under way. In any event, the matter has been referred to the research committee and it is being given further attention.

In view of this statement by the minister last year about research and the Charles Best institute, would he kindly give us a report as to what has taken place in the past year?

Mr. Martin: I am sure I express the view of every member in this house when I say that one is reminded, when the hon. member speaks, of the fact that he himself has unfortunately been indisposed for some months now and has been a sufferer in one of the Vancouver hospitals. Several months ago we told him how glad we were to see him back, and perhaps I would be permitted to do so again at this particular moment.

With regard to the other matter, it is one on which there is a divided opinion scientifically, as to whether or not there is value in that particular form of research. Last year I indicated my own personal interest in the matter, along with that of the hon. gentleman. We did discuss the matter with the director of the Charles Best institute, Dr. Best himself. Dr. Best felt that since at this particular moment he is engaged on a program of research he could not disturb it with advantage at this time, and quite properly so. The matter was discussed as well by me and by one of my officers with another research director who is now giving consideration as to whether or not his program of research in his centre—he has a very important cancer project under way—could be fitted into this particular field, because this one is not a specific subject. This is one, as my hon. friend knows from his interest in it, that covers a very wide field.

I can only say to him that the matter had not escaped my interest even before he raised it. I can assure him, as I think I did privately, of my own personal interest in the matter. These researches cannot be undertaken by us; they have to be undertaken by particular medical scientists. They have to be people who can fit into their program. I certainly hope that will be possible.

[Mr. Winch.]

With regard to the hospital construction matter that my hon. friend raised earlier, our objective, when we brought in the national health program, was to assist in the building of 60,000 beds in a period of 10 years. We have exceeded that objective. I am not saying there is not much to do yet. Of course there is; there always will be in the field of health, but I think, as I said a moment ago, that the combined efforts of all of us, of all jurisdictions and of people generally in this field, have been notable in this country, and we have every reason to be proud. We estimate now there are about 25,000 beds to be built. That number will increase as the population increases. That represents pretty much the current need, but it does not create, in these terms, the problem that might be suggested by the mere mention of the 25,000.

I agree fully with what my hon. friend has said about chronic beds. The reason we have a higher grant for the chronic, as opposed to the acute, is in part the reason he himself mentioned a moment ago. We wanted to encourage the provinces; we wanted to encourage private institutions to pay more attention to chronic care and to building institutions for chronic keep, and we have not succeeded. When I say "we" I mean all of us. I have sought in declarations I have made from time to time to keep emphasizing the importance of chronic care. Of course one of the finest chronic hospitals in Canada is St. Mary's in London. I mention that to those who are interested in this work. If they will go there they will see what can be done in a chronic institution. I can only hope there will be an increasing interest in this phase of the matter.

My hon. friend said that one way to do it is to increase the amount. All I can say at this time is that that matter, of course, continues to receive our attention.

Mr. Gillis: I should like to ask the minister a question. These general health grants to the provinces are matching grants?

Mr. Martin: Not all.

Mr. Gillis: A lot of them are.

Mr. Martin: The hospital construction grant is; the cancer control grant is; the rehabilitation grant is in part; the laboratory and radiological services grant is in part; the venereal disease control grant is. All the rest are not.

Mr. Gillis: What I would like to find out is this. A certain amount of money is available to each province each year, provided it can match the grants that have to be matched. Can the minister give us the amount of money that was available last year