

## Division

## Messrs:

Thomas  
(Moncton)  
Thompson  
(Red Deer)

Thomson  
(Battleford-  
Kindersley)  
Yewchuk—56.

## NAYS

## Messrs:

Allmand  
Andras  
Badanai  
Barrett  
Bécharde  
Benson  
Blair  
Borrie  
Boulanger  
Breau  
Caccia  
Cafik  
Clermont  
Comtois  
Corbin  
Corriveau  
Côté (Richelieu)  
Cullen  
Danson  
Deachman  
Deakon  
De Bané  
Drury  
Dubé  
Dupras  
Faulkner  
Forget  
Foster  
Francis  
Gendron  
Gibson  
Goyer  
Guay (St. Boniface)  
Guilbault  
Hogarth  
Hopkins  
Howard (Okanagan  
Boundary)  
Hymmen  
Isabelle  
Jamieson  
Jerome  
Kaplan  
Lachance  
Lajoie  
Langlois  
Laniel  
Leblanc (Laurier)  
LeBlanc (Rimouski)  
Lefebvre  
Legault

Lessard (LaSalle)  
Lessard  
(Lac-Saint-Jean)  
L'Heureux  
Loiselle  
MacEachen  
MacGuigan  
Mackasey  
McNulty  
Mahoney  
Major  
Marceau  
Marchand  
(Kamloops-Cariboo)  
Murphy  
O'Connell  
Olson  
Osler  
Otto  
Portelance  
Pringle  
Prud'homme  
Reid  
Richard  
Richardson  
Robinson  
Rochon  
Roy (Laval)  
Serré  
Smith  
(Northumberland-  
Miramichi)  
Smith  
(Saint-Jean)  
Stafford  
Stewart (Okanagan-  
Kootenay)  
St. Pierre  
Thomas  
(Maisonneuve-  
Rosemont)  
Trudel  
Turner  
(London East)  
Wahn  
Walker  
Watson  
Weatherhead  
Whelan  
Whiting  
Yanakis—92.

• (9:50 p.m.)

**Mr. Deputy Speaker:** I declare the amendment lost. Is the House ready for the question on the main motion?

**Mr. McQuaid:** Mr. Speaker, may I call it ten o'clock?

[Mr. Speaker.]

## PROCEEDINGS ON ADJOURNMENT MOTION

A motion to adjourn the House under Standing Order 40 deemed to have been moved.

## HEALTH—CANADIAN MEDICAL ASSOCIATION REQUEST FOR EXPANSION OF FACILITIES TO TRAIN DOCTORS—GOVERNMENT ACTION

**Mr. P. B. Rynard (Simcoe North):** Mr. Speaker, yesterday during the question period I raised the question of medical manpower—

**Mr. Deputy Speaker:** Order, please. The Chair has difficulty hearing the hon. member for Simcoe North (Mr. Rynard). Would hon. members please keep their conversations quiet or conduct them behind the curtains in order that we may proceed with the "late show."

**Mr. Rynard:** Mr. Speaker, yesterday when I raised the question of medical manpower there was not sufficient time to deal with it adequately. First there is the shortage of established doctors, second the complete inadequacy of new doctors and, third, the moral issue.

• (10:00 p.m.)

Medicare was set up by a Liberal government and became the law of the land. It then became the responsibility of Parliament to see that the necessary doctors were provided. To put it mildly, there has been no real attempt to carry out these provisions. The profession is today unable to cope with the increasing medical demand of not only an increasing population but of an aging population, necessitating more chronic care. People are paying for medicare and feel they have a right to medical attention. This has put a very severe strain on the medical profession.

There should have been an increase, as recommended in the Hall commission report, instead of four years later graduating, in 1969, just over 1,000 doctors, importing just over 1,000 from foreign countries and refusing to provide the facilities required to train the necessary doctors needed to keep pace with our growing population and demand. In 1961 there was in Canada one doctor for every 50 persons. That ratio has dropped and we now rank twentieth in the world in doctor-population ratio.

In both rural and urban centres there is an increased shortage of doctors and lack of hospital space. As a joint program with national medicare, money was to be set aside, called the health resources fund. A fund of \$500 million dollars was to provide the facilities, build the schools for training doctors and paramedical personnel. About the first thing this government did was to cut the health resources grant. This was patently dishonest and unfair to the Canadian people, cutting the services that they are now getting, and it was unfair to the doctors who are expected to pick up the overtaxed load of patient service. The emergency departments of hospitals are being overtaxed.

Because of the scarcity of doctors and their overload of patients, the sick find difficulty in securing appointments. Many people are forced to go to emergency departments of hospitals that were never meant to treat anything but