

9. Require those who may be a dangerous source of infection to accept prescribed treatment (para. 45).
10. Arrange for fuller use of government transportation facilities for the movement of medical personnel and patients (para. 46).
11. Increase research activity (para. 47).
12. Extend co-operation with all appropriate agencies working in the health field (para. 48).
13. Appoint departmental nurses to residential schools (para. 49).
14. Provide increased dental care (para. 50).
15. Train Indian doctors and nurses (para. 51).

IX. Conclusion

In closing may I make a few observations which though based on a short experience of this problem seem so plain as to be almost self-evident. The Indian and Eskimo populations of this country will greatly increase in numbers and wealth if we have any measure of success in our efforts to improve their health. By treaty they are wards of the government of Canada. While it may not be specifically laid down that the government must provide a health service, we are obliged on ordinary grounds of common decency, to exert ourselves to give them every reasonable opportunity to attain sound health. This is important even on the grounds of self-interest because the health of the whole country is dependent to a certain degree on the health of every part.

With the increase in air travel and the penetration of more people into the north country the risk of epidemics is augmented. It is impossible to segregate the Indians for the sake of protecting their health. Without losing their pride in their special place as Indians, they should be welcomed and treated as Canadians as they have every right so to regard themselves. This will mean that they must be given full opportunity for economic development, for the attainment of an adequate educational standard and for the maintenance of sound health. The program outlined in this brief will help towards this in the provision of more adequate facilities for the health service.

Finally, I should like to add a word of sincere tribute to the men and women who have done such remarkably fine work since the Indian Health Service was established, under conditions far from encouraging. The government and the people of Canada owe them a debt which can be adequately discharged only by ensuring that they are given a reasonable opportunity to implement the program which they better than anyone else know should be put into effect in the interest of their Service and of all of Canada.

Mr. CASE: Referring to expenditures for health services, do you propose to put in your estimates this year \$4,103,390 exclusively for health services? And do you provide, for the cost of bringing out—in connection with this boat?

Hon. Mr. CLAXTON: That is right.

Mr. CASE: Does the department bear any expense in connection with that boat that goes up to the Hudson's Bay?

Hon. Mr. CLAXTON: Yes, it does. We pay fares for all the personnel of the department who go up in that boat and also we pay freight on the medical supplies.

Mr. CASE: And you pay the medical personnel?

Hon. Mr. CLAXTON: Oh yes.

The CHAIRMAN: Mr. Claxton has made his presentation, and we appreciate very much his coming here; so, if you do not mind, we will now proceed with