

The Budget—Mr. Stafford

education of each physician was \$100,000 as estimated by Dr. Payzin, Dean of Medical School, Ankara, Turkey.

3. Ten per cent of India's physicians have left for the United States, the United Kingdom and Canada mainly, while over half the government clinics in the Punjab are vacant, the physician-population ratio in the rural areas of India are as high as one in 25,000 in some areas, which is one of the world's worst ratios of physicians to population. I would hate to think what the medical services in my home town of St. Thomas would be with only one physician for the whole population of 25,000. This is exactly the situation in rural India today.

4. Fifty-one per cent of Bolivia's physician output in 1965 applied to immigrate to the United States.

5. The Dominican Republic is losing half of its medical graduates to emigration every year.

6. From the Philippines 1,158 physicians emigrated to the United States and this number represented 5.3 per cent of their national medical manpower and half of these went to the United States in 1967.

7. The United Nations report estimates that the total value in terms of cost of education alone for the professional people immigrating to the United States in the 20 years after the second world war was in excess of four billion U.S. dollars. This figure does not include anything of the estimated productivity of these trained personnel in a normal expected working span of 25 years. This value of productivity must be added to the benefit of the developed country, in excess of their zero expenditure for the education of these people.

I have cited but a few examples to illustrate the overall brainpower drain from developing countries. I have further cited statistics from our own Department of National Health and Welfare to indicate the extent to which we are dependent on a continuing inflow of trained personnel from these poorer countries to meet our annual requirement of physicians.

In the final recommendations of the Secretary General's report the following statement is made:

Developed nations which at the present time rely on developing nations for numbers of their trained personnel should expand their training facilities and improve their internal career ladders so as to avoid heavy reliance on the human resources of developing nations. This would apply, in particular, to the medical field.

Given this specific recommendation in the Secretary General's report and realizing as we must the magnitude and inequity of this brain drain problem and bearing in mind the report's numerous references to Canada's very pregnant part in the problem, what is the national policy? I believe we see the policy taken by our government in the medical manpower field illustrated in a report prepared by the Department of National Health and Welfare. In this special report and study of the Projected Supply of Active Civilian Physicians in Canada from 1968 to 1981, we find it stated in the preamble that foreign medical graduates "now provide the majority of new physicians in Canada". Furthermore, this study draws attention to the degree of dependency which Canada at large, and each province in particular, places on the foreign medical graduate.

The study shows that unless an average excess of 588 new physicians enters this country every year during the next ten years, that is to say, in excess of our own Canadian graduates, we will not be able to maintain our present physician-population ratio of one in 740. Furthermore, by 1981, with no immigration of physicians into this country and the marginal increase in medical school graduates each year—and this increase barely keeps pace with expected population increases—the physician-population ratio will worsen to the extent of one physician per 933 population.

Because of the heavy inflow of immigrant physicians we have failed to make educational adjustments to match our medical manpower output with job demand in Canada. Thus we have exclude thousands of our own promising, deserving and qualified students from entering our medical schools because of lack of space. Statistics compiled by the Association of Canadian Medical Colleges indicate a snowballing increase in the number of applicants to Canadian medical schools in the past few years. The number of acceptable applicants now exceeds the number of available position by some 200 students. As well, the group of students labelled as marginally acceptable in the last reported year numbers 288. Together, there is a reservoir of almost 500 of our own Canadian sons and daughters who are being denied admission to medical school. To have to deny our own students access to the medical profession with its attendant social prestige, respect, satisfaction and financial security is a most unpalatable situation.