

men are driving taxis and doing manual labour and institutional work for which they receive little or no remuneration. An inquiry was therefore set on foot; a survey was made of some 1,800 families in all economic grades, and some very interesting facts were ascertained.

And further down:

It was found that 52 per cent of the American people receive no services from a physician. I think these figures would largely correspond with conditions in this country. It was found that 79 per cent get no attention from a dentist, that 89 per cent receive no health examination or similar preventive service, and 62 per cent receive no medical, dental or eye care of any sort. These statistics are for the prosperous years of 1928-29. Conditions are indubitably much worse now.

On the other hand it was ascertained that although many doctors have good incomes, one-third of all the physicians in the United States had incomes of less than \$2,500, even in 1929. More doctors were found in the \$1,000 to \$2,000 class than in any other. It was also found that 16 per cent of American families spent less than \$10 a year for medical service; forty-six per cent spent less than \$40 a year; four per cent spent more than \$500, and one per cent spent more than \$1,000.

A further argument I advanced at that time was:

It will be readily apparent that those who spent only \$10 a year were not a matter of great importance, or even the \$40 class, but for the four per cent whose expense for medical service was over \$500, and that one family out of a hundred which was called upon to bear an expense of over \$1,000, it was a very serious matter.

We must realize the impossibility of the ordinary family undertaking to cope with such a condition. I stated that there are means by which these matters could be easily taken care of. These services are costing the people of the United States approximately \$30 per year, but it was found that for \$36 per year the entire population could be given adequate medical service by bringing together those who lacked medical service and doctors who are idle. This is my second reason for supporting state medicine.

My third reason is consideration for the forgotten man, the doctor. We hear a lot about the forgotten man, but I submit that the doctor has been forgotten as much as anyone in the last thirty or forty years. In my previous remarks I stated that medical men were driving taxis and doing manual work in American cities, and I know for a fact that there are many medical men in Canada who have absolutely nothing to do. This is the case even though conditions have improved. Another matter that should be taken into consideration is the fact that the young men who graduate to-day in medicine are far superior to those who graduated thirty-five years ago. The training they are given

[Mr. Howden.]

to-day is far better. A young man entering medicine to-day must have a high standard of learning before he takes up the study of medicine; then he must put in four grilling years at college and one or two years in a hospital. I have no hesitation in saying that to-day the young interne in the hospital takes technical operations in his stride that would make the older practitioner in the country stop to take his breath before he would attempt them. These men are first class professional mechanics. They take on blood counts, spinal punctures, gastric irrigations and syphonage, things that many of us would not attempt without sending our patient to a hospital. Here you have these young men, turned out of the universities at the end of five or six years with a first class training, and with nothing to do. Why? Because in different communities, sparsely settled, the people cannot afford to support a doctor, and the consequence is, on the one hand, the people must go without medical attention, and, on the other, these young men with medical training must go without work.

I have referred to my own early experience—not outstanding at all; just the usual thing. After graduating I moved across from Winnipeg into a district that was starting as a workmen's suburb. There was no difficulty about getting work to do; I always had plenty of it. Morning, afternoon and night, and often all through the night, I was working; but like Old Mother Hubbard my cupboard was often quite bare, or pretty nearly so. I used to think in those days that if some authority, the state—I did not care who the state might be, whether the city council, the province or the government of Canada—would only come to the rescue in cases of that kind and give a man a decent living, he would go to his work with a better heart, and he would not have to go through such long gruelling hours of work without the burden of finance being settled. That is another thing that could be very readily cleared up if we had a form of state medicine.

Let us assume that state medicine is a good thing; let us assume that it is desirable in regard to all these things that we were talking about a little while ago, these deaths from diphtheria, typhoid fever and what not. Assume that state medicine is a good thing. Then what is the next thing to do? Is there a member in this house that does not understand the significance of modern day medicine? Is there a member in this house, be he medical man or otherwise, that does not know the history of diphtheria, of scarlet fever, of typhoid fever? Is there anyone who does not know that the incidence of death from