

Supply—Health and Welfare

Mr. Martin: We are doing that very thing, of course.

Mr. Nicholson: The minister will correct me if I am wrong, but not a five-cent piece has his department made available for assisting to build housing for the aged anywhere in Canada.

Mr. Martin: That is not our field, but the department is putting out more money for old age security than any country in the world.

Mr. Nicholson: I want the minister, when he rises, to state how soon—

Mr. Martin: I do not propose to rise.

Mr. Nicholson:—his department is going to face up to the problem of housing for the aged. Again from the department, I have received information as to what has been done in Denmark, Norway, Sweden, Great Britain and the United States. I am very sorry that there is no section showing what is being done by the health and welfare—

Mr. Martin: I have just said it was.

Mr. Nicholson: Some work is being done by local organizations on borrowed money from Central Mortgage and Housing. My colleague the hon. member for The Battlefords is active in a project in the little town of Neilburg. They were able to borrow from Central Mortgage and Housing 92 per cent of the cost of these buildings. The local people are going to have to repay that over a period of 40 or 50 years. The provincial government is going to make a contribution, and the local people are going to make a contribution, but a start is being made at Neilburg.

My case is that the Minister of National Health and Welfare should have funds available so that where provinces are not giving some supplementary assistance to this very large group of our Canadian people, the minister's department will give a start in the field of housing.

The second field where help should be given is medical care. What the hon. member for Peace River said was being done in Alberta for old age pensioners by the provincial government could be repeated about Saskatchewan. I am not familiar with what is being done in British Columbia. But it is a pity you have to wait until a C.C.F. or Social Credit government is elected before the local authorities are prepared to take a step to see that those who are getting no supplementary income get medical and hospital care and other assistance.

The third field is that of income maintenance. I think it is most unfortunate that such a large group of our Canadian people

have to balance budgets in this day and age on \$40 a month. This is true, especially when one considers how freely we spend for a great many projects. We are going to approve some \$50 million for servicing T.V. viewers in the country. We can find \$50 million for T.V. but to supplement the \$40 a month for people who have no other income we just have not the funds available. I am going to urge that the minister proceed much more rapidly with the establishment of complete information in his department regarding the needs of the ageing in Canada, and what he is prepared to do in the fields of housing, medical care and income maintenance.

Now, I come to the subject which was discussed so fully by the leader of this party last night, but I cannot conclude without making some reference to the need for a nation-wide health insurance program. I think it is a great pity that the minister has not given real leadership in this field. I hold in my hand a pamphlet entitled "Heroes of Health", published by the health league of Canada. There are pictures of Jeanne Mance; Sir Frederick Banting; Edward Jenner; James Young Simpson, for painless surgery; Florence Nightingale; Joseph Lister, for antiseptic surgery; Louis Pasteur; Robert Koch, for bacteriology; Madame Curie and Sir Alexander Fleming. We still have room for a picture of the Minister of National Health and Welfare.

Mr. Martin: It will be there.

Mr. Nicholson: I hope I may live long enough to see his picture included in a book "Heroes of Health", as being the man in Canada who was prepared to come out boldly and provide the leadership to give people in all walks of life the very best in the field of health.

I might remind him that his deputy minister in charge of welfare had some very constructive ideas some years ago, and I am sure he has not changed his view. In one of the pamphlets issued to the Canadian forces in 1944, Dr. Davidson said:

There are still gaps in our social security program. Chief among these concerns the question of illness. When sickness strikes it strikes with a two-edged sword. Not only does the workman lose his pay during the period he is away from work—worse than that, he has to bear the crushing blow of medical, hospital, and other expenses, running sometimes into hundreds of dollars.

Then, later on he says:

But not all of this represents additional cost. We are meeting now from our own individual resources, as best we can, the heavy medical and hospital expenses that we encounter from time to time. We are carrying now in large part the cost of our own unemployment, eating up our savings when we fall out of work. We are paying now, to