

*Medicare*

out could have been included, leaving only the medical profession proper—the government must have given some thought to those things, such as, for instance, the consistency of standards required in order to secure the unanimous agreement of the provinces. The financial means of the Canadian people also probably had to be considered in the drafting of this bill, as well as a great number of other factors.

Besides, Mr. Chairman, in order to determine the value of a bill, one must first consider not only its good points, but also the objections raised.

To sum up, after studying the extensive material handed to us, I believe the objections came from three sources. From the opposition, first, which says: the bill is not bad, it is good, but does not provide a wide enough coverage. It seems, therefore, that the opposition already agrees to the plan in principle. The minister has immediately accepted the possibility of a more extensive coverage since he said: "I am ready to discuss with the provinces and to improve it."

If the minister could accept the amendment of the hon. member for Burnaby-Coquitlam (Mr. Douglas), I think that it would leave the door open, as the opposition would like to have it and would enable as soon as possible to include certain professions which I would call paramedical, even if the term is not the proper one, such as optometrists, chiropractors, naturopaths, podiatrists—as would say my hon. friend from Ville-neuve (Mr. Caouette)—and all others which have been mentioned.

Another series of objections come from the medical profession, and I think that the most serious condemnation has been made in a memorandum prepared and published by Dr. L. D. Wilcox, an associate professor at the department of medicine of Western University. He stated last June that this bill would become a national disaster.

Mr. Chairman, I admit that I was impressed. I read the whole report and the considerable data submitted therewith. I asked myself some questions, because just like all the hon. members, I am open-minded and when it is especially stated that this would give rise to a national disaster, you can imagine that it can impress a person concerned with the common good of his electors and fellow-citizens.

In spite of the fact that I have gone through all the objections, just the same I am not convinced. I see that the first

objection of the learned doctor is as follows: The medical insurance bill will be subjected to some political pressures. He seems to say that the various political parties will outbid each other.

Mr. Chairman, I, of course, do not always accept partisan pressures, but I find they fall into three categories. For example, a party of the opposition can filibuster in order to prevent the government from passing a good measure and gaining a certain prestige. Then, there are ways of using parliamentary measures so as to seem to be doing something for the welfare of the people, knowing that this particular thing cannot be done. Then, there is what I will call competition with regard to good measures, to see who will introduce the best and most perfect bill.

I think this is what happened in the case of the present bill, and the speakers of all the political parties are, as I call it, competing with regard to good measures. They are not trying to condemn the bill, but to make it as perfect as possible.

I think the good doctor is not correct at all when he blames the politicians for politicking in the sense of competing with regard to good measures.

Then also, the Hall report is superficial. I took the trouble to go through it several times, and I must confess, Mr. Chairman, that I am much more impressed by the Hall report than by the brief submitted by this eminent doctor from Western University, which seems to me much more superficial. The Hall report is a collection of evidence given by a great many qualified professionals. He also adds that "Canadian medical care is now the best in the world". We do not doubt it. The doctor claims that "health insurance will lower the quality of medical care," but that has yet to be proved. He adds the argument that "the needy are already well taken care of". Doubtless, he would like to assimilate all Canadians to welfare, to public welfare. Where health is concerned, there is no question of charity; health is precious human capital for a nation and helping the Canadians to keep in good health is not charity.

He also states that "the geography of Canada will prevent the plan from being universal," but again that has not been proved at all.

Therefore, I feel that the bill, as it is, constitutes a major effort toward what might be called a universal project acceptable to all ten provinces.