

Health Insurance

hospital but I would say that 300 or 400 of the patients in that hospital come from the Ottawa area and not entirely from the Ottawa valley.

Let us look at the regulations as they stand. In answer to some of the questions that were put to him today the minister pointed out with a degree of pride that we are going to take care of mental patients in general hospitals. There is no doubt that is the case under this bill. However there is no restriction on the length of time which a patient may be in that hospital. Remember that when a case of mental illness occurs, no doubt the relatives will want to have the patient put in a general hospital rather than in one of the Ontario hospitals. It is only normal and natural that they would want to do that. I want the minister to pay particular attention to this, that they would have a further incentive to do so because the care of such patients is free in general hospitals and if they go to the Ontario hospitals they will be charged. It is going to come out of their estate or some place. Payment has to be made.

As I said the other day, I feel this is a retrograde step. You are not really recognizing the problem of the number of mental patients in Canada. The amount of money you are giving under the health grants does not begin to cope with this problem of hospitalization. As my leader has said, even if the province of Ontario or any other province is paying a large percentage of these costs there is this drag on the province's finances. After all, taxes have to be paid and the financial agreements that are made between the province and the dominion under this bill are of some help, but the provinces are having their own troubles in trying to finance other things. There is no doubt of that.

To recapitulate, I think I have clearly proven that patients going into mental hospitals in my own province are paying their bills. I do not believe this figure of 90 per cent the minister has mentioned. If they are not paying their bills, they might be classed as indigents, but there is a very strong inquiry made under the regulations. In cases where the estate is taken over, the hospital bills are paid. There is a percentage of indigents in these hospitals. If long-term treatment is required and it is certainly expensive, a small estate might easily disappear.

It is not sufficient to say that the cost of caring for the mentally ill will put up the cost of caring for the others. There was some suggestion that there might have to be an additional tax levied under the present

scheme in order to take care of mental hospital facilities. As my leader has said, I feel that this should receive further consideration. There are 10,000 more people in Canada suffering from mental disease than there are in all the general hospitals put together. Some people do not understand that. They have taken the minister's statement that the provinces are paying 90 per cent of the bills.

Let me say this to you, sir. These are sick people the same as anybody else. If they are to be ignored under this scheme, then we shall arrive at this situation. We will pay for pneumonia, yes; that is fine, but we will not pay for mental disease. We are not giving recognition to one of the greatest problems that the minister has to face in the whole of Canada. If you are to face up to it, then some place, somehow additional funds must be provided for the care of these people. You should not set them aside and say that it is the duty of the province to look after them.

The minister made the statement this afternoon that the province is looking after 90 per cent of the mental patients. Their bills are being paid but there is no greater percentage of indigents in those hospitals than in other hospitals. We must look at that. Let us take a second look at this; let us inquire into it and do something to help this population which is growing in Canada.

Mr. Stanley Knowles (Winnipeg North Centre): Mr. Speaker, my intervention at this point will be very brief. I admit also that what I will say will inevitably be by way of repetition of things that have been said before. I feel, however, that we must indicate our whole-hearted support of the proposal now before us, which is in line with the contention that we have made right from the start, that reconsideration should be given to the government's insistence that mental and tuberculosis hospitals be excluded from this plan.

As the hon. member for Lanark (Mr. Blair) has just indicated, the incidence of diseases in these categories is very great, and if we are to have a hospital plan that is worthy of the name it should include all the diseases that affect our Canadian people in all of the provinces of this country.

What we do not like about the government's attitude toward this matter is that it is giving the impression it is coming into hospitalization on a 50 per cent basis when in point of fact it is coming in on a basis of about 30 per cent or 35 per cent when you consider all of the illnesses in Canada that require hospitalization. We feel that is not good enough.

I rise also to protest once again against the times without number the minister tries to