

is owed to other co-operative institutions, such as credit unions and co-operative insurance companies. However, concern has been expressed from time to time as to how far this trend could continue without posing a risk to the financial health of co-operatives. In 1966-76, member equity in marketing and purchasing co-operatives declined from 48 to 37 per cent.

#### *Fishermen's co-operatives*

Fishermen's co-operatives exist in all provinces. In 1976, there were 82 such organizations, with 12,000 members, which sold \$54-million worth of fish and \$45-million worth of supplies.

In British Columbia, all fishermen are eligible for membership in one large central co-operative, the Prince Rupert Fishermen's Co-operative Association. This association operates fish-processing plants in Prince Rupert and Vancouver. British Columbia fishermen also have co-operative credit and insurance plans.

#### *Service co-operatives*

These co-operatives provide insurance, electricity, housing and other services, including water, transportation, cold storage, seed-cleaning and natural gas. Service co-operatives reporting for 1976 (excluding insurance co-operatives other than those providing medical insurance) numbered 873 and had a member-

ship of 589,000, business revenue of \$103 million and assets of \$289 million.

#### *Insurance*

Co-operative insurance companies are active in all provinces – handling life, automobile, fire, hail, general casualty, fidelity and medical insurance. At the time of their founding, some of the mutual insurance companies were similar in principle to co-operatives. However, statutory provisions governing Canadian life-insurance companies made it very difficult to maintain democratic policy-holder control in a large insurance firm. Some of the smaller mutuals, especially in the farm-life insurance field, operate like co-operatives.

Medical co-operatives were functioning in four of the ten provinces in 1976. These started mainly in the hospitalization field but gradually broadened their coverage to medical-surgical, etc. However, their field of operation was greatly narrowed by the entrance of federal and provincial governments into medical insurance in the 1960s. These co-operatives continued, nonetheless, to provide coverage supplementing the government plans, and in some cases to act as insurance agents for such plans. The popularity of these supplementary plans soared in the mid-Seventies in British Columbia and Ontario, each of which is represen-