

Therefore, when I say I am opposed to state medicine, it does not mean that I am opposed to government participation in the health field. It would be ridiculous for me to take that attitude. For many centuries governmental and public authorities have been forcibly removing from communities those who were suffering from contagious diseases. At the present time we have our municipal, provincial and federal health services. I believe that few doctors, if any, object to this in principle. The Canadian Medical Association at its last convention held in the city of Ottawa endorsed the principle of health insurance. Canada has lagged behind most of the countries of the civilized world in this respect. There is no country in the world to-day which disclaims all responsibility for the care of the sick. I understand that some forty countries have some form of state insurance or have assumed other responsibilities.

The only country that has state medicine according to my interpretation is Russia. The system in Russia may look good on paper, but if we consider the figures published by the League of Nations we find that that country is the focal point of typhus infection for all Europe. In 1883 Germany made it compulsory for all those earning less than a certain income to carry a form of state insurance, but the state contributed nothing to the insuring societies or organizations. In England the employer, the employee and the state all contribute. Austria adopted a system in 1888; Hungary adopted one in 1891, and it spread to other countries of the world until, as I said before, forty countries have some form of state insurance. In most of these countries no one concerned is satisfied with the way in which the system has worked. The main failure seems to be not so much bad organization, the inertia of the doctors or the failure to realize the importance of preventive medicine, as the inability of the countries to provide funds to ensure adequate medical services.

The cost of illness in Canada is \$23 per capita yearly. For the state to assume this responsibility would mean the staggering sum of \$253,000,000 added to the annual taxation, and there would be no assurance that these costs would not be greatly increased when the medical services were free. This estimation does not take into account the extension of preventive medicine or of medical research. I should like to quote Hon. Dr. J. M. Uhrich, Minister of Public Health for Saskatchewan. He says:

But remember: Somebody will have to pay for it. Do not let anyone run away with the idea it is not going to cost anything. Money

does not grow on gooseberry bushes, and the only way such services can be paid for is out of the pockets of the people themselves.

The consideration of a state scheme of insurance is ruled out by the British North America Act. Under that act the federal government was given jurisdiction over quarantine and the establishment of marine hospitals, and to the provinces was given jurisdiction over hospitals, asylums and charitable institutions. Public health was not a matter of concern to the framers of the British North America Act. The broader jurisdiction in the health fields was given to the provinces, and the provinces have accepted full responsibility from confederation down to our own days. In the matter of public health the dominion has been able to cooperate with the provinces. The privy council of Great Britain found that part IV of the Employment and Social Insurance Act, which was passed by this house some years ago, was unconstitutional, and at the present time the house is circumscribed on this particular subject.

However, I should like to make a few observations on the question of medical services in Canada. First of all, let me register my objection to a system or scheme of state medicine. It has never been established that any fundamental fault is to be found in the system under which we are working. There is no evidence of widespread neglect of those who need medical care. The medical system as such is not responsible for all conditions and it cannot cure all diseases. Sickness is due to many causes outside its province. A system of socialized medicine would bring many serious disadvantages. Medical services can best be advanced by other and less radical means. The financial aspects of medical care can be met acceptably in various ways without socialization. Wider and more effective use of medical resources could be effected without socialization, and a realization of better social and economic conditions would facilitate more adequate medical care. Socialization would not be practical from any point of view, particularly under the democratic system.

Some of the disadvantages of socialization are that the quality of medical service would tend to deteriorate. There would be a tendency to standardize treatment, and routine and perfunctory work would result. The incentive to do good work would be removed and personal responsibility would be lowered. The old relation between the doctor and the patient would be destroyed; competition would be removed and medical progress would be obstructed. There would be less interest in work, less professional interest, and research