abortion. I say to many hon. gentlemen in this House on the benches opposite, who very comfortably consider this problem to be something which does not come too close to them, that they are actually prolonging the agony of women who must have abortions either because the birth control device has failed or because of their ignorance or because of other factors. Many of these women cannot obtain legal abortions.

I see one of my colleagues from Vancouver shaking his head. I do not know whether he is doing so in disagreement or because he abhors the situation. If it is because of disagreement, I would point out to him that the hospitals in Vancouver which do perform abortions and which are trying their best to meet the need do not have the facilities to do it. Pregnancy will not wait. As time goes on one reaches the horror stages. Organizations have travelled around showing pictures of the awful stages which abortion should never reach because it should have been carried out much earlier. I, too, have seen an abortion. I saw it with my own eyes. I should like to see all these horror pictures documented. However, I am not here to discuss abortion, except to say that the reason we now have far more illegal abortions than we should have, and more legal abortions than we need, is simply that we do not make available birth control techniques and devices as freely as we should.

Hon. members may think this is not true, but I should like to point out that 74 per cent of the women who wished to have abortions, and who went to the Planned Parenthood organization in July, had not used any form of contraception. A great percentage of them did not know where to obtain contraceptives or what type to use.

I should like to draw my remarks to a close by returning to my original theme. I believe members of this House are sufficiently grownup to know that we ought to be trusted with the reports the government has. What is the government doing with all these reports? If these reports resulted in legislation and action in respect of family planning, then I might have some sympathy with the practice of secrecy in this regard. I believe these reports need ventilation, lots of fresh air and sunshine. I urge that members of this House who are interested in these reports be given access to them so that we can give the public of this country the knowledge and information they must have if they are to co-operate in this participatory democracy which I want to see become much more real than anything we have at the present time.

[Translation]

Mr. Gaston Isabelle (Parliamentary Secretary to Minister of National Health and Welfare): Mr. Speaker, I wish to commend the hon. member for Vancouver Kingsway (Mrs. MacInnis) for her contribution to our previous debates on family planning or abortion.

I wish to thank her also for her co-operation in bringing the number of motions on these problems down to a minimum so that her colleagues would have an opportunity to express their opinions in the House.

I know that family planning and abortion are of great interest to her, as I say, but since other members from her party have already expressed opinions on this

Vancouver Family Planning Clinic

matter, I would not want family planning and abortion to be considered as a cure-all as readily accessible as contraceptive pill vending machines. I hope we will not come to that because it would be going too far.

If we were to pursue the question of abortion to the point advocated by some members of the New Democratic party, I believe we would be going back to Hitler's time, to eugenics. As a matter of fact, abortion could be practised on request, when the least doubt would exist as to a possible disability of the new-born child. It is going a little too far. I know that the problem at the present time is an emotional one. It requires serious discussion.

But we should not let ourselves be carried away by emotion and create a problem without solution. Abuse must be prevented and it is by adopting fair and reasonable legislation, as we did by amending our Criminal Code, precisely on this important issue of abortion, that we will be able to determine whether we were right or not. I think we will be able eventually to say to the next generation that perhaps we were right to prevent abuse and from the outset to refuse to allow abortion on request and thus step into the unknown as did Russia and other countries which have had to repeal their legislation to protect their people, since we must be quite careful not to become the tools of our own destruction.

It is always nice to find that intelligent people can sit around the same table and discuss a most important question.

• (5:20 p.m.)

[English]

My intention this evening is to review certain aspects of family planning, a concept which, as you are aware, is receiving the support of this government, not only in Canada but also through the Canadian International Development Agency in the emerging nations of the world.

[Translation]

Mr. Speaker, even in the most privileged countries, the quality of life is now being threatened by a population explosion that was particularly marked these last years. Among the various means suggested to check such a population explosion, the best known is the birth control pill which was approved by physicians and welcomed by the general public.

[English]

Introduced some ten years ago, these drugs have held out hope to nations struggling under population pressure and to individuals attempting to plan a family.

To the physician, oral contraception not only presents the accustomed challenge of weighing the benefits of a medication against its possible harmful effects, it also introduces a novel and important relationship between himself and his patient. Hitherto it has been implicit that the patient accept the experience and judgment of the doctor. However, in prescribing these drugs, the doctor is usually acting neither to treat nor to prevent a disease. He is prescribing for socio-economic reasons. This situation demands that the patient be fully informed and