

Birth Control Methods

For this reason, we must get busy on birth control methods. If we want to avoid a great number of abortions, illegal and otherwise, we must get busy disseminating birth control information and contraceptives. As I have said over and over again, abortion is not the first line of defence against unwanted pregnancies. The first line of defence should be effective contraceptives used consistently and diligently. People do not have the information they should have on how to use these contraceptives or which ones are effective. The physical and mental suffering from so many illegal or legal abortions, would be quite unnecessary if we had proper birth control information available throughout this country.

In this connection, I want to refer to the report of the Royal Commission on the Status of Women. The sooner the government gets busy dealing with this report the sooner they will stop hearing from us over here on this subject, because we are determined to make sure the government has clearly before it the various important sections of this report. The supplying of birth control information is now legal, but as the report on the status of women points out, for 40 years before the law was amended few people dared to operate birth control centres because of the risk of being prosecuted. Since the ban was lifted a number of centres are being planned, but there are still relatively few in Canada. In 1969 it was estimated there were approximately 38 centres, including seven family planning clinics under the Family Planning Federation of Canada, eight public health clinics and 23 hospital clinics. The need for more facilities is obvious. In 1968 there were 4,378,000 women of child-bearing age, that is between 15 and 45 years, in Canada, yet according to their own estimate, one of the family planning clinics in Toronto could process only 1,250 calls in one year.

At the present time only about 23 of the 948 general hospitals in Canada have family planning clinics attached to them. I know that the Vancouver General Hospital is one of them. When I visited that hospital during the Christmas recess one of the doctors told me with great pride that the family planning clinic at the Vancouver General, one of 23 attached to hospitals in Canada, was the very first outside clinic which had been permitted in the Vancouver General.

The status of women report recommends that birth control information be available to everyone, and recommends that the Department of National Health and Welfare should be prepared to offer birth control information free of charge to provincial and territorial authorities, organizations, associations and individuals, and to give financial assistance through health grants to train health and welfare workers in family planning. The report further recommends that the provincial departments of health organize family planning clinics in each public health unit to ensure that everyone has access to information, medical assistance, birth control devices and drugs.

It also recommends that the provincial departments should provide medical clinics where they are needed, particularly in remote areas. I may say that in Britain

[Mrs. MacInnis.]

today there are mobile clinics which travel around and operate in conjunction with metropolitan and civic health centres. The people in charge of these units find out from social workers and other people where the women are who want birth control information and devices. The doctor and nurse in charge of the unit visit these areas to make sure that this information and these devices are provided.

If you had encountered as many women in various income groups as I have who, if they had known how to prevent unwanted pregnancies, might have avoided abortions, I think you would realize that this country should move ahead at a faster rate than it is moving now. Those people who are opposed to abortion, whether legal or illegal, would do well to help cut down the incidence, and the only way to cut down the incidence of abortion is to provide people with other means of preventing unwanted pregnancies.

I think it is far better to deal with birth control measures than to wait until you have to deal with an abortion. I do not deny that the Family Planning Association is a good organization, and I know the Minister of National Health and Welfare (Mr. Munro) is working through that organization. However, I do not think the Family Planning Association would claim that by itself it can handle the need which exists today. This whole matter of birth control should be a part of our health department machinery in cities and large towns. These mobile clinics should travel under the auspices of our metropolitan and municipal health authorities. The federal Department of National Health and Welfare should provide funds and information to assist in establishing these clinics across Canada.

In looking across the chamber I think I can anticipate who is going to reply. I believe it is the minister who is in charge of designated areas. I hope it will be he because I wanted to indicate to him that the whole of Canada is a designated area as far as this matter is concerned. Let me indicate to whichever member does reply that in his constituency, as in mine, there is a great need for the implementation of these recommendations of the report on the status of women. This implementation should be carried out with the least possible delay.

I urge upon the Department of National Health and Welfare and other government departments the need to get away from their present vulnerable position of keeping these research studies secret. These departments should do everything they can, using material available, to help forward the campaign of birth control that the minister is so anxious to see brought to a successful stage of development.

Mr. J. A. Jerome (Parliamentary Secretary to President of Privy Council): Mr. Speaker, perhaps it is wrong to begin by anticipating, as the hon. member who just completed her remarks did, who may be speaking from the opposite side, but I notice that the hon. member for Simcoe North (Mr. Rynard) has some notes in front of him. With his medical background, surely his contribution to this debate will be more productive than mine, if