The Ottawa Journal for Thursday, October 13, quotes a delegate from Oshawa to the recent Liberal convention as saying this: measure in that it does not democratically define the term "medical practitioner". It is discriminatory against the optometrists of

• (7:50 p.m.)

Voters treat our candidates with a considerable amount of scorn. We can't put up our candidate as a man of confidence, judgment and influence and be believed any more.

It is regrettable, Mr. Speaker, that such a great party which has done so much for our great dominion, has now sunk to such an unreliable level because of its fooling around with the rights and wishes of the Canadian people.

The house has agreed that medicare is a provincial matter. Of course, the federal government has jurisdiction over the health of the peoples inhabiting the Yukon and the Northwest Territories. On the recent trip made to the Arctic by the committee on northern affairs and national resources, of which I have the honour to be a member, it was found in many areas that there was a lack of general health services for the Eskimos and the Indians. We found the medical services in the town of Frobisher Bay rather good, but the remainder of the eastern Arctic depends on the ship C. D. Howe which calls once a year to bring medical attention to the outposts. This ship, which costs \$15,000 a day to operate, was stuck in the ice for 15 days in 1965. I remind the house that at that time it was unable to bring the vital medical services to the Eskimos of Baffin island and to those of the eastern Arctic. I found by asking questions at a meeting held with the Eskimos at Frobisher Bay that there is no doctor, and no medical service of any kind at Clyde River, which is an outpost of 300 people on the upper coast of Baffin island on the Canadian side of Davis strait. Medical services are needed immediately at Clyde River and at another point called Pond Inlet, which is a village of 250 people.

We found that medical services in the central Arctic were intermittent and not as effective as they should be. The public health nurse at Fort MacPherson on the Peele River in the Mackenzie delta has a transportation problem and badly needs a car for transportation services for the Indian patients. I would hope that the Minister of National Health and Welfare would take note of this and see that this problem at Fort MacPherson is solved.

I have said that this bill is strictly a financial measure. It is also a discriminatory

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measure in that it does not democratically define the term "medical practitioner". It is discriminatory against the optometrists of Canada. This is a shame, since so many people need and use the services of optometrists. I now quote from a letter received by all hon. members I presume, from the Canadian Association of Optometrists, 807 Metcalfe Building, here in Ottawa:

To put it bluntly, the medicare bill, which is Bill 227 and called the Medical Care Act, discriminates against optometrists, and their patients. It also discriminates against other health professions which regularly perform services which are also performed by physicians.

The letter quotes clause 2(d) of the bill and comments as follows:

The stickler is that all services, including those of ophthalmologists, will be covered. And who will decide which services are "medically required?" As it reads, 2(d) advocates discrimination against optometrists, and their patients.

Next the letter quotes clause 2(f), which reads:

"Medical practitioner" means a person lawfully entitled to practise medicine in the place in which such practice is carried on by him;

The comment of the Canadian Association of Optometrists is that they will be pushing strongly in Ottawa to have this definition amended so that it will read that for the purposes of the act a legally licensed optometrist will be regarded as a medical practitioner, as he should be regarded.

I quote again from their brief, where they confirm that—

-unless the bill is changed the following can be expected to happen:

The public will be deprived of its traditional and fundamental right to freedom of choice of health practitioner. Optometric patients (almost six million, or 65 per cent to 70 per cent of Canadians who seek vision care) will be influenced to quite naturally seek out the favored-by-legislation practitioner, i.e. the medical practitioner.

Optometrists would be placed in the suicidal position of having contributed to public funds which will be used to drive patients out of their offices.

What a chaotic situation this bill will create in that respected profession. To continue the quotation:

It will have a serious impact upon the number of young people coming into optometry. There would be little incentive to study for five years to become a member of a profession legislated to fade from the scene.

It will provide a service which if restricted to medical practitioners will be unavailable to a great proportion of the public, particularly outside the metropolitan areas. The optometrist is the only vision care practitioner in 60 per cent of the communities where there are optometric practitioners.