

*By the Chairman:*

Q. And no penalty?—A. Yes, there is a penalty. I have here a compendium of all the laws of the United States concerning marriage, and there are penalties provided—but frequently they are arranged in such a way that they are never collected.

With regard to the state of Michigan, because no medical certificates are required, the law is a dead letter on the statute books. Even the physicians did not seem to know about it—nobody knew about it.

Q. No certificate is required?—A. No, no certificate is required.

Q. It is just a pious wish?—A. Yes, it merely puts it up to the individual's conscience, which does not seem to operate. The same can be said of the state of Indiana, so that if you are going to do anything that is to be of any value at all in Canada, you must demand the production of a certificate.

I have taken the liberty of putting down a couple of my own opinions, for what they are worth—and let me say, they are not worth much. The chief value of a law such as proposed in this Bill would be these—first, drawing the attention of individuals contracting marriage to the dangers of venereal infection. And let me say here that many of them will hear about it for the first time, when they are confronted with the fact that they have to present themselves for examination. The value of such legislation would be tremendous.

The second value would be this: The prevention of a considerable number marrying, who have venereal disease in a communicable form. If you catch 25 per cent, the law is worth while.

I have these criticisms of the proposed Bill—and I would ask you to remember that I am thoroughly in favour of it, and I know it would be accepted in Canada if properly framed—but I do not think the Bill should, at this stage, include women, for the reason already stated by my friend Dr. Bates. The great preponderance of unmarried individuals with venereal disease applies to men—not women. The man is the one we have to attend to, more particularly; you are attacking more than 50 per cent of the problem by including the men and excluding the women.

Another point I would like to make is this: The legislators in Wisconsin made the great mistake of introducing the Bill without consulting the medical profession; the medical profession were resistant with regard to certain phases of it, because at the start it demanded laboratory tests, and what not, which were obviously impossible. If in Canada this Bill were postponed, and this Committee were to ask the Canadian Medical Association, and the Associations of medical men in the various provinces of Canada to give this matter their serious consideration, even although you might intend to pass the Bill later on, you would help to make the legislation more operative. In so far as the medical profession is with you on this matter, the Bill will be effective; in so far as the profession are resistant the Bill will be weakened. The physicians in Wisconsin who for ten years were worried about the legislation now say, "We believe the bill is good, but at first we were all against it. We have had the opportunity in our offices to discuss venereal disease with the parties contracting marriage, and inform them of the dangers of venereal infection, and we believe we have done a tremendous amount of preventive work."

If at this stage of the proceedings you get the opinion of the organized medical profession in Canada, to my mind that would be the most important thing that could be done to make the proposed Bill effective.

There are at least four criticisms you are going to meet in connection with this Bill. You will meet it from certain members of the Medical profession, and certain other people. One has to be fore-armed to meet these criticisms, because they are sticklers. I have put them down in this way: (1) It is impossible by medical examination to be absolutely sure whether or not an individual