Supply-Health and Welfare

difficulty in keeping my eyes on the minister, for obvious reasons. But anyway, Mr. Chairman, to get along with what I have to say—

Mr. Martin: That is a compliment for my official.

Mr. Herridge: I think we are a backward nation as far as this question of national health insurance is concerned. When we realize the tremendous wealth of this country and the things that have been done in other directions, it is strange to note that we are still talking about health insurance in Canada. In order to illustrate that point I took a few notes from a document I had, which shows that the principle of health insurance has been established in a good many countries in the world for many years, countries far less able to meet the cost than Canada.

I find that in Germany there was a system of partial health insurance in 1883; in Austria, 1888; in Great Britain, 1911; Switzerland, 1911; Estonia, 1912; Roumania, 1912; Norway, 1915; Bulgaria, 1918; Portugal, 1919; Czechoslovakia, 1919; Poland, 1920; Japan, 1922; Latvia, 1922; Yugoslavia, 1922; Greece, 1923; Chile, 1924; Lithuania, 1925; Luxembourg, 1925; France, 1928; The Netherlands, 1929; Northern Ireland, 1930; Denmark, 1933; New Zealand, 1939; Australia since that time, and also various South American countries.

Mr. Martin: Not Australia; it is a voluntary system.

Mr. Herridge: But on a much wider scale than anything we have in Canada at the present time.

Mr. Martin: I do not think my hon. friend would support it.

Mr. Herridge: I do not think I would be quite satisfied with it, but they have gone further with it than we have at this time though not further, I hope, than the minister has in mind. I recognize the fact that most of the European systems were what were commonly called poor man's systems and did not embrace the entire population. But all systems, I think, since the first world war have contained compulsory features, though in some cases both compulsory and voluntary applying to different sections of the population. I mention this to indicate that the principle of national health insurance has been established in a good number of countries over a wide section of the world for many years, yet we in this great and wealthy country have not been able to take even the first step as far as co-ordination of our national activities is concerned.

I might say that this subject has been of great interest in British Columbia for some 20 years. After a plebiscite in 1936, I believe, the legislature of British Columbia adopted the British Columbia health insurance act which never came into effect owing to the opposition of certain vested interests, involving both insurance schemes and a small percentage of doctors who thought their own personal interests would be affected. In this connection, and I am pleased to be able to do so, I want to pay a tribute to the work done by the man who was provincial secretary of British Columbia at that time and was also responsible for health and welfare. refer to the late Hon. G. M. Weir.

Mr. Martin: He was a great man.

Mr. Herridge: He was. He did a great deal in connection with the necessity for health insurance. As a matter of fact, I know from personal knowledge that he undermined his health in doing this work. He was a forward-looking Liberal cabinet minister who was exposed at that time to the full opposition of the persons I have mentioned. I know that Dr. Weir died a very disappointed man because of the failure to establish health insurance in British Columbia.

Mr. Martin: Our deputy minister of welfare was one of his associates.

Mr. Herridge: I am very pleased to hear that. He built up a wide appreciation of the need for health insurance, and a wide understanding of the problems involved. I am sure the work he did in that connection will be long remembered by the persons in British Columbia who knew him. It so happens that I was going through my files this morning checking over various things, and I came upon a copy of a speech Dr. Weir made on January 16, 1936. I am going to quote a paragraph or two from that speech, because I think what he said at that time is still true 20 years later. This is what Dr. Weir had to say:

I propose tonight to emphasize the need for health insurance in British Columbia, to discuss the effect of health insurance upon industry and taxation, and to make clear the respective functions of the dominion and provincial governments in the health field.

Then he went on to say:

To understand why we are so concerned over health, illness and their human and economic aspects, it is necessary to describe briefly certain developments of the last few decades. During the past 50 years there have been really marvellous developments in the science of medicine. Inventions and discoveries have revolutionized many phases of medical science. All over the civilized world magnificent hospitals have been built; physicians have been more technically educated; surgeons have been trained; laboratory workers have acquired a technique; and to put it briefly, the