

*Supply—Health and Welfare*

in Australia, and 27 in The Netherlands. Some of the other countries have a much higher rate. The last ones given here are Chile, 148; India, 137; and Mexico, 100.

The breakdowns are given for the provinces. The hon. members for Kamloops and Kootenay West will be interested to know that their province of British Columbia has the best rate of 30. Ontario and Saskatchewan come second with 31 and 31. If, in some 20 years, we have been able to make this sort of improvement in Canada, what could we do in the whole world? Here are the figures for Canada since 1921. There is a remarkable drop from 102 away back in 1921 down to 35 in 1953. I submit that since we are living in a world where it is well known that people in one-half of the world can look forward to living to 65 or 70 and in the other half of the world can expect to be dead by the time they are 35 or 40, we have a fundamental source of trouble. Therefore I suggest the minister should have more money available for his information section so that it can do a worth-while job in the field of world health.

I might mention that I have had a good deal of trouble in getting information from the minister's department regarding what is being done by Canadians in different parts of the world, the sort of information that the hon. member for Lanark gave last night. I asked for a copy of all information on WHO that had gone out from the minister's office in the last twelve months. There is one press release here giving the minister's tribute to nurses on the occasion of the annual world health day, and it also puts in quite a worth-while plug for his own department, which is all to the good. I also received a booklet telling about a Canadian nurse who left Canada in 1951 for Penang in Malaya. She has been working in the Penang school of nursing ever since. I checked with the department and asked who the nurse was. I was told that they were sorry, but they did not know. She comes from Vancouver, Halifax or Moncton, some place in Canada, and if it is worth while putting out a world health organization publication to tell of the work of a Canadian nurse, surely it is worth while to say who she is and provide some pictures and stories. I am certain that the newspapers in the area in Canada where she used to live would be interested in having that information. There is a worth-while story here about the job that is being done by a Canadian nurse in this school of nursing. My letter was written on the 10th of March, and I am still hoping that some newspaper in

Canada will be supplied with the information because they would be very glad to have information about a local girl who has made good.

I should like to devote a good deal of time to the subject dealt with last night by the hon. member for Rosetown-Biggar, national health insurance, but before I come to that I want to make a plea to the minister to use his influence to get more funds from the treasury for his important department. This year he will have \$842 million plus \$7 million for civil defence. I know that some people in Canada will think that is a good deal of money to make available to one minister, but I suggest the amount is not adequate in view of the problems that have to be met.

I want to mention the expenditures for old age pensions, family allowances, blind persons and disabled persons. Some time ago I referred to a publication of the bureau of statistics showing the distribution of non-farm income in Canada. This publication reveals some very disturbing information. With respect to families of two or more persons, there were 3 per cent who in 1951 had to get by on incomes of less than \$500. I ask hon. members to think of having to provide housing, food and medical care on \$500 a year. Of course there are a large number of single old age pensioners who are getting \$40 a month or \$480 a year. I ask the minister: How can you possibly provide decent food, shelter, clothing and medical services on less than \$500 a year? Yet 3 per cent of our Canadian families of two or more persons have this sort of budget.

Another 5 per cent have to get by on incomes between \$500 and \$1,000, and another 7 per cent on incomes between \$1,000 and \$1,495. Therefore 15 per cent of our families have incomes of under \$1,500 a year. In these brackets we have our old age pensioners, our blind pensioners, our disabled persons and a great many to whom family allowances have made a great deal of difference. I know that earlier this session a resolution of the hon. member for Assiniboia was debated which asked that in 1955 we devote the same share of the total national income to family allowances as we did ten years ago when family allowances were first instituted. I submit that is a very reasonable proposition, but unfortunately the Minister of National Health and Welfare could not go along with that suggestion. I want him to reconsider his stand and see to it that disbursements to family allowance recipients are increased so that the same share of the national income will be spent for that purpose as when the allowances were first introduced.