

Supply—Health and Welfare

national organizations, as well as by the minister and her officials. I think we should be able to find a solution to this problem, financial and otherwise, as a result of co-operation between federal and provincial governments which are willing to do their share and accept their responsibilities.

Mr. Chairman, I should like to bring one further matter to the attention of the minister in connection with this report. During my recent visit to my constituency I received a number of representations urging that the art of chiropractic be included on an equal basis with other health professions in any health program to be introduced. When I was a member of the British Columbia provincial legislature there was a discussion in this regard during a proposed amendment to the workmen's compensation act. Prior to this discussion the art of chiropractic was not included under the act. As a result of representations from various organizations in British Columbia the regulations under the workmen's compensation act were amended so that industrial casualties who were recommended by doctors could receive assistance from chiropractors. I will now read a card which was sent to me by a very well known citizen of the Arrow lakes:

It appears that the near future will see some form of government participation in a health care program. Chiropractic is a separate and distinct health service, not provided by any other profession. It is a health service which is required and used by many citizens of British Columbia. I therefore strongly urge that you, as my elected representative, endeavour to ensure that chiropractic is included on an equal basis with the other healing professions in any health program to be introduced.

I support that proposal from my personal experience and personal knowledge of what has been done with the proper use of the art of chiropractic, and I urge the minister to give consideration to this request.

I wish to support wholeheartedly the remarks made by the hon. member for Hamilton South with respect to the necessity for greater consideration of the needs of the mentally retarded and mentally ill in Canada. We must realize that the member for Hamilton South speaks with knowledge and from experience. Unfortunately I had to be absent from the house when he spoke, but I read his speech this morning. I think it was excellent, and I wish to endorse what he said in this respect. I do so wholeheartedly because I represent a riding in which the people themselves have tried to do something in this regard through the organization of the Kootenay society for handicapped

[Mr. Herridge.]

children originated first by Dr. Endicott, a very well known doctor associated with the clinic at Trail, who has given years of service to this organization.

He had occasion recently to come to Ottawa. His colleagues were very anxious, as he himself was, that he should have the opportunity to meet the minister and discuss with her their experience with some of these problems locally. On behalf of the Kootenay society for handicapped children I want to express very sincere appreciation for the time the minister spent discussing this matter with their representative, Dr. Endicott, when we all know that she was particularly busy on the day in question. Dr. Endicott was very pleased, and he returned and made a report. I wish to read now from the minutes of a meeting of the board of governors of the Kootenay society for handicapped children held on June 21, 1964:

Dr. Endicott reported that he had visited Miss Judy LaMarsh in May. He stated that he had told her that the estimated cost of the complete plans for the Dr. Endicott home would be \$500,000 and gave her a copy of the brief, on which he had made some marginal notes. He stated that there would be a dominion-provincial conference in Ottawa in October and that Miss LaMarsh particularly wanted "lay" people to attend, people from local societies and associations. She wanted the experts to be balanced by plain interested people. Dr. Endicott recommended that we send a delegate, which would cost about \$400—\$500.

They intend to do this, and this is the sort of approach I like in problems of this kind. I think ministers and officials of departments can learn from local people. I have had a few experiences involving one or two departments of the government when on occasion I have met an official who gives the impression that he is sitting on the right hand of the Almighty. I am very glad to say I have not had this experience with the Department of National Health and Welfare.

Dr. Endicott makes some suggestions which I want to bring to the attention of the committee because I think they indicate a lengthy study of the question. In writing to me about this matter he says:

As you know, we have analysed the problem as offering five possible solutions. The favoured one at present and the one supported by present federal grants is encouragement of retention in the parental home. This is the "experimental legislation" you presented to a meeting of our society in Trail some years ago. The expectation at that time, certainly by provincial officials, was that there would be an exodus from Woodlands of dependants whose parents would want their child and the grant. This did not occur. The second expectation has been disappointing also in so far as the waiting