

Supply—Health and Welfare

did emphasize the need to tackle this problem with the information now available.

I agree with the statement made only a short time ago that in this country we have unique opportunities to assure the health of our people to the limit that this may be possible in any particular case. With great open spaces, with a healthy, vigorous climate, with natural opportunities for exercise and recreation, there should be no healthier people in the world than the people of Canada.

In dealing with this subject it should never be forgotten that the first place to tackle the avoidance of disease and the need for surgery is in building a healthy body in the early days of our youth. Certainly that is the first place to tackle this problem. But that is something that goes right into the field of education and of the home itself. What we are talking about here is not the building of the healthy body in these early stages so much as the need for some plan that will ensure diagnosis, medical treatment and necessary surgery at the highest level for every Canadian who needs it. Nothing that is done should discourage those voluntary plans which have been taken up so successfully within these past few years. There is at least one community in Canada where over 70 per cent of the people are covered by Blue Cross, a voluntary plan. In a report from the province of Ontario in regard to various voluntary types of protection such as Blue Cross, the medical society plan and personal insurance with the insurance companies, it was estimated that some 65 per cent of the people were covered by those plans.

It may be impossible to reach an exact figure, but these figures are indicative of the extent to which people in this country are voluntarily and by their own effort taking care of their health requirements. I do not think any plan that is agreed upon, any pattern that is adopted within the framework of our constitution, should discourage those personal efforts to provide for the health of our people. I do not believe any rigid over-all pattern can be effective. What must be assured is that those who are unable to care for themselves, those who are unable to provide for these health measures, shall not be denied the opportunity.

As has already been pointed out, the cost of hospitalization and the cost of medical treatment are a source of great concern to many of our people. Undoubtedly that concern is general, and there are many cases where the whole resources of a careful life may be exhausted by unexpected illness. People should be encouraged to protect themselves against that. It should be our desire to

[Mr. Drew.]

see that wherever the individual is not fully protected, something is done.

I would point out that there can be no uncertainty about our acceptance of this general principle. That principle was accepted many years ago; in fact I do not believe that there is any community in Canada where a person will not get treatment as long as it is known that he is ill. We have throughout this country provisions for the payment of the bills of indigent patients. This may not be a pleasant thing; it may not be the way men like to recognize the fact that there are many of our people who are unable to pay their hospital bills. It has been recognized, however, by legislation. As a result there is provision for the payment to hospitals throughout Canada of a certain amount in each case for what are described as indigent patients.

We all know that with the increased cost of hospitalization and of the provisions for health generally, these payments are not adequate. In many municipalities a serious problem has arisen as a result of this situation. However, when that legislation was passed the principle was accepted. It should be our hope now that with that acceptance of the principle and with the information available, everything possible will be done without delay to tackle this great problem now facing us.

I feel sure we all agree as to the objective. It is clear that we do not agree on details. There are some of us who believe that in this still young and vigorous country, a country of great space and great opportunity, we must not try to mould our medical treatment into a rigid, cold pattern. We believe that would deny the very spirit that has given our medical practice in this country such renown throughout the whole world. It should be our desire to keep that freedom of choice, both for the patients and for the doctors but at the same time to ensure that in this very fortunate land every Canadian, wherever he lives, whatever his circumstances, will have the opportunity to obtain accurate diagnosis, the best medical treatment and the best surgical treatment that will restore him to health or prevent serious illness if it can be prevented.

Mr. Nicholson: Would the Leader of the Opposition permit a question before he resumes his seat? Would he support clause (f) in the amendment moved by his deskmate, the hon. member for Dufferin-Simcoe, in the speech from the throne debate, calling for greater co-operation with the provinces to develop an effective contributory plan which