It makes no difference how fine the legislation is if we lack the doctors or the medical centres to do the job. Indeed, we might easily find ourselves doing a disservice to those who will ultimately have to pay the bills. So that there may be no misunderstanding as to the economic aspect of this measure from the point of view of Nova Scotia, let me point out that about 80 per cent of the federal members from our province have risen to make comments, including the minister himself. This, I suggest, indicates the degree of concern which is felt. As I say, I hope the minister will find some opportunity, while they are here in Ottawa on other business, to talk privately with our minister of health, our premier, our minister of finance and economics, and our provincial secretary, about the serious dollars and cents problem which will confront Nova Scotia if the government plan goes through as it stands.

• (6:20 p.m.)

As I said earlier, I am very much aware of the needs of a large segment of our population in Nova Scotia with regard to the high cost of medical care. In many cases they do not have the funds to meet the obligation which would be incurred and because they are proud people, they do not seek out treatment. In this connection I must add, however, that I really have not known a doctor in Nova Scotia who has refused treatment because he felt there might not be immediate payment for his services. Nevertheless Nova Scotians, because of their pride, do not incur debts, no matter how much they need the services. They do not accept the services unless they are able to fulfil the commitment. For this reason there probably are this very day hundreds and hundreds of Nova Scotians who fail to seek out medical help and advice. Notwithstanding that, it is wrong to force upon those people, not only in Nova Scotia but in all of Canada, the compulsory aspect of this measure.

Over the years, people have built this nation because of their ability to make decisions for themselves. So far in all the western countries this ability, on balance, has not proven to be a bad thing, quite the contrary. There are ways in which medical services can be supplied. The minister is aware of the methods which could be brought into play, such as the continuing utilization of the present medical insurance programs which are being conducted both by private enterprise and by doctor plans similar to the Maritime Medical Plan, and others.

Medicare

With the exception of some clauses which suggest that some flexibility might be brought into play, in this bill these have been set aside completely. The bill should have been more closely aligned with these known and tried concepts. It should have brought in—if this is the word—this freedom, this right of choice to decide for one's self those things in life which are meaningful. I do not like to call this bill a measure of creeping socialism, but sooner or later one begins to wonder whether or not he ever will be charged again for any of the needs which arise in the course of his life.

It becomes a bit of a shock when you speak to young people who say, "What is the use of buying life insurance or annuities, or providing some form of insurance against the cost and burden of putting children through university education?" As I say, it is somewhat of a shock to hear young people say "Why bother; let us take that \$200 or \$250 a year and spend it at Christmas time or take a vacation with it, because by the time Susan or Danny is of age all these things will be provided for them by the generosity of the federal authority". Apart from the dollars and cents aspect of this, I think something greater is being taken out of the so-called pockets of our people, and that, I repeat, is the right of freedom of choice.

I am well aware that in no way does the bill impinge upon the freedom or right of any Canadian to approach any doctor, whether it be his family doctor or a new doctor, for medical assistance under this plan. Again the arguments in this context are familiar to most members in the house, so I shall discuss them only briefly. If a doctor finds himself working from six o'clock in the morning until midnight six days a week, it is not going to be too long before it will not be wholly proper or safe to consult him. The doctors will tell you this themselves. The only way they can combat this condition is to make themselves inaccessible to people. All of this may be brought about because we are going to rush into something before we are fully prepared to cope with its ramifications.

Mr. Speaker, when the bill comes before the house I intend to support it. I was very impressed with the way in which the hon. member for Simcoe East (Mr. Rynard)—God bless him, and I hope he is doing better these days—presented the amendment. The various suggestions in the amendment were those with which I agreed, and which supported when they came before us for determination.