

torate. For example, studies were made on the effect of certain contraceptives on fertility and other functions and to the possible relations between particular drugs. Most of the research work has been carried out on humans. Under the direction of our colleague, Dr. Hurteau, the University of Ottawa has undertaken under contract very promising research on a contraceptive that could be used over a long period of time.

It must be added that similar projects have been approved by the research grants program of the Medical Research Council. For instance, research has been carried out on the biochemistry and metabolism of steroids and hormones which have an influence on reproduction, on genetics, on reproduction immunology and finally chromosomal research on human populations.

The department is also studying some of the problems of abortion which is the most undesirable type of birth control. Abortion is very costly and, as I said a while ago, can do irreparable harm. Since we shall have an opportunity, later on, to discuss this question in the House, we shall then provide necessary particulars.

As concerns the major part of this research on family planning under federal governments grants (excluding the Medical Research Council program), I would rather be modest and say that this is only a beginning, especially in the social science field. We wish to set priorities in research on family planning, stressing pilot-projects, evaluation of programs and assessment of efforts provided in the field of education. From an administrative point of view, our efforts could have more weight if we changed the method used for financing research and directed those necessarily limited funds toward specific fields whose priority has been recognized.

The department aims at training qualified staff which will be responsible for considering and applying the various proposals designed to increase family planning services through information, personnel training and research. Of course, such a proposal should first of all be studied in conjunction with the provincial governments concerned. We also hope that some time will be devoted to family planning matters at the next conference of health ministers. As I suggested a while ago, it would seem that all delegates at the conference of health ministers have received the bulletin on family planning which has been distributed to them.

I would also like to mention that, for reasons which are not totally clear, Canada has relatively few specialists and experts in family planning, which requires qualifications in many disciplines. Educational books and other kinds of public information documents will be prepared for those working in this field at the present time.

Mr. Speaker, I do not have to add that the federal government, with the means at its disposal, does everything to indicate to the Canadian people that it is absolutely necessary to allow an individual to use his free choice in connection with such things. That is why the federal government will give the necessary directions as the results of research will be known and that it will inform the population on the best steps to take in connection with family planning.

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Family Planning Centres

Even if that matter falls under provincial jurisdiction, the federal government must nonetheless be able to grant subsidies for programs of that kind, which will contribute to the development of this country. I believe that the government is pioneering, as indeed it has always been, in the social field, and I am sure that it will provide assistance in order to better life in Canada, not only for certain groups of society but for all Canadians.

• (5:30 p.m.)

[English]

Mr. Deputy Speaker: The hon. member for Algoma (Mr. Foster).

Mr. Knowles (Winnipeg North Centre): That is the talking-out team over there.

An hon. Member: They're doing well.

Mr. Maurice Foster (Algoma): Mr. Speaker, the motion before us this afternoon in the name of the hon. member for Vancouver-Kingsway (Mrs. MacInnis) reads as follows:

That an order of the House do issue for a copy of the study undertaken by Le Centre de Planification Familiale, Montreal, in the fiscal year 1969-70 funded by the Department of National Health and Welfare on "Projet de recherche auprès du milieu défavorisé urbain Québécois".

This study, as I understand it, relates to family planning in the Montreal area—to families in the low-income bracket and the effect of low income, poor housing and limited education upon the size of families. The hon. member for Vancouver-Kingsway drew attention very ably in the course of her speech to the social and welfare aspects involved. She told us that throughout the country there were only 23 family planning centres so far; it does not appear that a great deal of advantage has yet been taken of the change in the Criminal Code introduced rather more than a year ago which allowed information to be made public, at least by government bodies and non-profit public groups.

The hon. lady suggested mobile clinics might be provided, such as they have in Europe. This would extend, I presume, to "storefront" centres for family planning advice. One inquiry came to me from a social welfare group which wanted to set up a clinic of this type. This was very shortly after the change in the Criminal Code. The Department of National Health and Welfare was most helpful. They provided me with names and addresses of people who could help, suggestions for the structure of the organization, the kind of people who would be supervising, and so on. I believe the group for which I made inquiries went ahead, in co-operation with the provincial department of health, to establish a family planning centre.

The Parliamentary Secretary to the Minister of National Health and Welfare (Mr. Isabelle) indicated that this study was undertaken in Montreal and that the final report would possibly be published some time next June. It seems to me it would be very wise to have the report