



STATEMENTS AND SPEECHES

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FIVE YEARS OF HEALTH PROGRESS

An address by the Minister of National Health and Welfare, Mr. Paul Martin, made at the 1953 Biennial Meeting of the Canadian Hospital Council, Ottawa, May 19, 1953.

The Hospital In Canada's Health Plans

Since it began five years ago, the National Health Programme has immeasurably strengthened the part played by hospitals in serving the health needs of Canadians. In 1948, when the Government announced this Programme, it placed particular emphasis on hospital building by providing \$66,000,000 for that purpose -- nearly 40 per cent of the total grants available.

In the five-year period, federal funds expended or committed for approved projects under the Hospital Construction Grant total nearly \$57,000,000. It is therefore evident that, with the encouragement of the Federal Government, a great effort has been made by the provincial and municipal governments -- and by the citizens of Canada -- to extend and improve our hospitals.

Since 1948, under the stimulus of these federal grants, Canada has increased its total public hospital facilities by at least one-third.

Added Support For Canada's Hospitals

To mark the fifth anniversary of Canada's National Health Programme, it was my privilege ten days ago to announce in Parliament the Government's decision to move forward on three entirely new health fronts. Additional federal grants -- totalling \$42,000,000 over the next five years -- are now available to widen the scope of this Programme.

These three new grants may be used to help Canada's hospitals in establishing:

- improved services for mothers and children;
- special units and clinics for the rehabilitation of the disabled;
- more extensive X-ray and laboratory services.

Although the application of these new grants will not be limited to hospitals alone, they should be of particular interest to all who work in this field. In six important ways, the funds available under this threefold programme will bring direct and lasting benefits to Canada's hospitals:

- (1) By helping hospitals to accept wider responsibilities in public health and preventive medicine;
- (2) By enabling many smaller hospitals to extend to their patients some of the specialized services they have previously been unable to provide;
- (3) By assisting in the training and employment of professional staff in these specialized fields;
- (4) By providing opportunity for hospital workers to use their professional knowledge and skills to best advantage;
- (5) By improving special facilities in smaller hospitals and thus encouraging more specialized medical personnel to serve in them; and, finally,
- (6) By providing better diagnostic services outside of hospital, more efficient use will be made of existing hospital accommodation.

Threefold Health Advance

The utilization of these three new grants -- for Child and Maternal Health, Medical Rehabilitation, and Laboratory and Radiological Services -- will be worked out in co-operation and consultation with provincial health authorities and with officials of Canada's professional health organizations. The pattern developed in one province may, for various reasons, be entirely different from that followed in another. Each part of the country has its own peculiar needs; the purpose of these grants is to help fill the gaps in existing services in the fields covered, by developing those facilities most urgently needed in the area concerned.

It would be premature at this time to lay down any definitive formula for the utilization of these grants. However, without restricting their possible use in any way, perhaps I might describe briefly, grant by grant, the general type of service that might be developed. This review will indicate the potential value of these grants to Canada's hospitals.

(a) Child and Maternal Health Grant

... The vital significance of this grant becomes immediately evident when it is realized that this year's births will involve the life and health of 800,000 Canadians -- 400,000 infants and their mothers.

Already Canada has done much to provide for the development of maternal and child health services, although no specific federal grant has previously been available for this purpose. Undoubtedly, federal aid provided under other grants for the improvement of services in this field has been a factor in the impressive decline in our infant and maternal mortality rates in the last five years -- resulting in a saving of 10,000 infant lives alone. On the other hand, our infant and maternal mortality rates in Canada are still too high to provide any cause for complacency.

In the utilization of the new grant for child and maternal health, some thought will no doubt be given by the provinces to developing improved services for mothers and children in hospital out-patient departments and in community health centres. The grant funds might also be effectively used to help provide certain equipment for maternity services in hospitals. By supporting the establishment of pre-natal and post-natal clinics in hospitals, the grant should help improve the total service rendered to the community by the hospital.

There was a time when the hospital was considered solely as a place for the care and treatment of the sick. Today, it is taking its place more and more as a vital part in the total pattern of preventive public health services designed to promote positive good health. Indeed, the ideal of the modern hospital is that the health activities of the community should centre on it. With this in mind, the Child and Maternal Health Grant, like the other two new grants, should contribute significantly towards the assumption by the hospital of greater responsibilities in the public health field.

(b) Medical Rehabilitation Grant

The grant for Medical Rehabilitation, like that for Child and Maternal Health, should have a decided influence in providing improved facilities within our hospitals.

Disability, of course, is not a simple condition to be countered by any single programme. There are many types of disability and there are many aspects to the rehabilitation process if the disabled person is to be led back to a useful and productive life. Already a great deal is being done in Canada by the Federal Government, by provincial governments, and by various voluntary agencies to provide rehabilitation services for particular groups of disabled persons. The purpose of the new grant is to support the development of suitable health services for handicapped persons not already provided for by public or private action.

Obviously, all the rehabilitation health services established or supported under this grant will not be located in hospitals. Some will be in special rehabilitation units or centres, associated in many cases with a university or with the programme of one of the voluntary societies active in this field. Wherever these services may be developed, however, they will serve to strengthen the resources available to hospitals within the area concerned.

In many hospitals, thought may be given to assisting with the creation of sections of physical medicine and the employment of qualified occupational therapists. In many hospitals too, grants may be used for the specialized training of health and welfare workers in the rehabilitation field, for the purchase of equipment for hospital rehabilitation centres and for the employment of suitable staff.

The hospital is a vital part of any medical rehabilitation programme. On the one hand, by providing special services, it can assist in the rehabilitation process; on the other, it can be a beneficiary of the rehabilitation programme in that early and effective

rehabilitation may significantly decrease the length of stay in hospital for patients requiring rehabilitation or may, in some cases, eliminate altogether the necessity for hospitalization.

(c) Grant for Laboratory and Radiological Services

I come now to the last, the largest, and, from the standpoint of the hospital, perhaps the most significant of the new grants -- that for the extension of laboratory and radiological services. This grant, beginning at \$4,300,000 this year and rising over the next five years to approximately \$7,800,000, is designed to augment Canada's facilities and services to help physicians in the accurate diagnosis of disease and ill-health.

The importance of this grant will at once be evident to the members of the Canadian Hospital Council, who know from first-hand experience how much the practising physician must rely on the specialized services available to him. Speaking to the members of the Canadian Medical Association five years ago, I put it this way:

"The black bag is still the symbol of the medical profession, but the discerning doctor must see himself and his services against the broad pattern of medical facilities that the Canadian community has developed to enable him to serve it better. The history of medicine reflects the growing dependence of the doctor on the health facilities available to him. To the simple relationship between doctor and patient have been added the diagnostic, hospital, laboratory and other facilities that have been developed to support the doctor in his work."

Canada is, of course, fortunate in that the services provided by major laboratories in our larger hospitals and in the universities are second to none. Much splendid work is also being done by the various provincial diagnostic services. However, it has become clear in recent years that there is an urgent and continuing need for the extension of laboratory, X-ray and other diagnostic services in those areas where present facilities are inadequate.

There is no thought of duplicating existing services that are now performing a useful and economic function. It is hoped, through this new grant, to continue to encourage accuracy and quality so that physicians, in all parts of Canada, may have complete confidence in the reports made to them.

Under the Hospital Construction Grant, we have been successful in expanding the capacity of our hospitals. Under some of the other grants, we have assisted, to a limited extent, in the development of diagnostic and laboratory services. The new Laboratory and Radiological Services Grant, however, makes possible an expanded programme for the setting up, particularly in the smaller hospitals, of the facilities and services physicians require to serve their patients effectively. The improvement of these services will, of course, benefit doctor and patient alike, since patients in outlying areas will be spared the necessity for spending unnecessary time and money in travelling to the larger medical centres to obtain accurate diagnoses of their illnesses.

A useful by-product of this grant should be the easing of the strain on our limited facilities for hospital accommodation. At the present time, many hospital beds are occupied for purely diagnostic purposes which might better be made available to patients requiring active treatment. By helping to improve laboratory facilities and services for the diagnosis of illness outside of hospital, this grant may make it easier for hospitals to provide accommodation for the acutely ill.

Five Years of Achievement

These three new grants are logical extensions of the National Health Programme and were decided on in the light of our wide experience in bridging gaps in Canada's health services. Two years ago I reported to this group on the achievements of the first three years of Canada's National Health Programme. Now, in the broader perspective of five years' time, it might be of interest to look back and trace some of the more notable achievements made possible with the aid of federal grants under this Programme.

Since the inauguration of the federal grants programme, the provinces have been able to initiate projects that will use more than \$110,000,000 -- or two-thirds of the \$167,000,000 made available to them.

This substantial federal support has provided a decided stimulus to health activity in every part of Canada by enabling the provinces to survey their health resources, by encouraging hospital construction, and by assisting in the improvement of health facilities and services in such important fields as mental illness, cancer, tuberculosis, arthritis and rheumatism.

Because of this measure, every province has been encouraged not only to strengthen existing services but to strike out in entirely new directions. As a result, there is no community anywhere in this country that has not, in some way, felt the impact of this programme. If it were possible to trace its effect on individual Canadians over the past five years, it would be clear that the National Health Programme has directly touched the lives of fully 75 per cent of our people, and, more indirectly, of all Canadians.

Perhaps the most tangible, most easily measurable achievement is our remarkable success in hospital building -- a feature of the programme that is of particular interest to members of this group.

In reporting to Parliament recently I indicated that, in the past five years, federal grants have been approved for hospital construction projects to provide an additional 46,000 beds. What I neglected to tell the House, however, was that this figure did not take account of the federal funds provided towards the cost of 5,900 bassinets for infants, 5,700 additional beds in nurses' residences, and of space required for out-patient departments, and for public health laboratories and community health centres established in hospitals.

In other words, in the past five years, the National Health Programme has assisted in the construction of new hospital accommodation for 57,000 patients, nurses and infants -- besides helping to increase hospital, laboratory and out-patient facilities and to supplement hospital services by

encouraging the building of health clinics.

To appreciate what this unprecedented record of hospital building really means, we have only to consider that, since the beginning of the federal grants programme, there have been built or started in Canada one-third as many new hospital beds as we had managed to accumulate in all the years before 1948.

These new hospitals and hospital additions are serving no less than 144 individual Canadian communities and provide an additional three beds for every 1,000 members of our population.

To help staff Canada's expanding public health programme, federal grants have also provided for the training of 5,000 health workers, many of whom are now employed in our hospitals.

Federal assistance has helped in adding another 4,700 health workers to the staffs of hospitals, clinics, and other local and provincial health services across the country. Substantial quantities of specialized equipment have also been purchased and installed in hospitals with the aid of federal grants. For example, more than \$3,000,000 has been spent in the development of a nation-wide hospital admission chest X-ray examination programme and in the provision of additional scientific equipment and surgical facilities for the treatment of tuberculosis in hospitals.

To provide better facilities for the treatment of mental illness, federal grants have assisted in the construction of 11,000 additional beds in mental hospitals. A similar though considerably smaller expansion has taken place in tuberculosis sanatoria, while special efforts have been made to encourage the construction of hospital facilities for the chronically ill -- a health problem that has taken on added importance with the shift in the age pattern of our population and the resulting increase in the incidence of the degenerative diseases.

The effects of the National Health Programme, of course, are not limited to hospitals. For example, there are now 77 mental health clinics in Canada, where 12,000 Canadians -- many of them children -- are receiving expert help. Before the inauguration of the federal grants programme there were only 17 such clinics in all of Canada.

To help combat tuberculosis, 25,000 victims of this disease have been provided with streptomycin and other drugs, free of charge. Half a million children have been given B.C.G. protection against tuberculosis. To fight, cancer, diagnostic services have been made available to more than 100,000 persons. In medical and public health research there has been a very decided upsurge of activity with more than 400 individual research studies now under way with federal assistance.

While every area of health action has felt the impact of the National Health Programme, unquestionably the most dramatic achievements have been accomplished in the field of hospital construction. Our success in hospital building has made it possible to scale down the requirements for this purpose over the second five-year period of the Programme. As I pointed out to Parliament, however, while the overall

proportions of the Hospital Construction Grant have been reduced, provision has been made for a carry-over of the unexpended balance from the first five years making an additional \$13,000,000 available for projects approved prior to April 1 of this year on which actual construction commences before October 1.

When account is taken of re-votes of unused funds, the total monies available for hospital construction during the next five years will probably approximate the amount actually spent during the first five years of the Programme.

The Vital Role Of The Canadian Hospital

The new grants which I have described today constitute a new and notable extension of Canada's National Health Programme, To me it has been a source of deep satisfaction that, through this extension in our programme for better health, the Federal Government is now able to provide additional support to the hospitals and other health services of this country.

Through all its many specialized activities -- in its diagnostic and consultative services, its public health clinics, its rehabilitation units, the modern hospital has wider opportunities than ever before for training, research, care of the sick and for the protection of health. With these increased opportunities come heavier responsibilities to which, I am sure, Canadian hospitals will measure up to as they have done in the past.

Today, more than ever before, the hospital has an essential place in our society, In these days when there are so many destructive forces at work in this world, any institution that seeks to heal rather than to harm, to give health and hope rather than to take life and limb, merits our respect and encouragement. Canada's hospitals are monuments to our belief in the sacredness of human personality and the sanctity of human life.

In the forward sweep of humanity in Canada, our hospitals and all who work within their walls have a proud and honoured place. I bring you the tribute of a grateful government and of a grateful people for your contribution to health progress and for your part in strengthening, by your service, our Canadian way of life.

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