

Name	Electoral Division	Address
ALEXANDER, Keith	Roblin	Roblin, Man.
BAIZLEY, Obie	Osborne	185 Maplewood Ave., Winnipeg 13
BJORNSON, Oscar F.	Lac du Bonnet	Lac du Bonnet, Man.
CAMPBELL, D. L.	Lakeside	326 Kelvin Blvd., Winnipeg 29
CARROLL, Hon. J.B.	The Pas	Legislative Bldg., Winnipeg 1
CHRISTIANSON, John Aaron	Portage la Prairie	86-9th St., N.W., Ptge. la Prairie, Man.
CORBETT, A. H.	Swan River	Swan River, Man.
COWAN, James, Q.C.	Winnipeg Centre	512 Avenue Bldg., Winnipeg 2
DESJARDINS, Laurent	St. Boniface	138 Dollard Blvd., St. Boniface 6, Man.
DOW, E. I.	Turtle Mountain	Boissevain, Man.
EVANS, Hon. Gurney	Fort Rouge	Legislative Bldg., Winnipeg 1
FORBES, Mrs. Thelma	Cypress	Rathwell, Man.
FROESE, J. M.	Rhineland	Winkler, Man.
GRAY, Morris A.	Inkster	141 Cathedral Ave., Winnipeg 4
GROVES, Fred	St. Vital	3 Kingston Row, St. Vital, Winnipeg 8
GUTTORMSON, Elman	St. George	Lundar, Man.
HAMILTON, William Homer	Dufferin	Sperling, Man.
HARRIS, Lemuel	Logan	1109 Alexander Ave., Winnipeg 3
HARRISON, Hon. Abram W.	Rock Lake	Holmfild, Man.
HAWRYLUK, J. M.	Burrows	84 Furby St., Winnipeg 1
HILLHOUSE, T.P., Q.C.	Selkirk	Dominion Bank Bldg., Selkirk, Man.
HRZHORCZUK, M.N., Q.C.	Ethelbert Plains	Ethelbert, Man.
HUTTON, Hon. George	Rockwood-Iberville	Legislative Bldg., Winnipeg 1
INGEBRIGTSON, J. E.	Churchill	Churchill, Man.
JEANNOTTE, J. E.	Rupertsland	Meadow Portage, Man.
JOHNSON, Hon. George	Gimli	Legislative Bldg., Winnipeg
JOHNSON, Geo. Wm.	Assiniboia	212 Oakdean Blvd., St. James, Wpg. 12
KLYM, Fred T.	Springfield	Beausejour, Man.
LISSAMAN, R. O.	Brandon	832 Eleventh St., Brandon, Man.
LYON, Hon. Sterling R., Q.C.	Fort Garry	Legislative Bldg., Winnipeg 1
MARTIN, W. G.	St. Matthews	924 Palmerston Ave., Winnipeg 10
McKELLAR, M. E.	Souris-Lansdowne	Nesbitt, Man.
McLEAN, Hon. Stewart E., Q.C.	Dauphin	Legislative Bldg., Winnipeg 1
MOLGAT, Gildas	Ste. Rose	Ste. Rose du Lac, Man.
MORRISON, Mrs. Carolyne	Pembina	Manitou, Man.
ORLIKOW, David	St. John's	179 Montrose St., Winnipeg 9
PAULLEY, Russell	Radisson	435 Yale Ave. W., Transcona 25, Man.
PETERS, S.	Elmwood	225 Melrose Ave., Winnipeg 15
PREFONTAINE, Edmond	Carillon	St. Pierre, Man.
REID, A. J.	Kildonan	561 Trent Ave., E. Kild., Winnipeg 15
ROBERTS, Stan	La Verendrye	Niverville, Man.
ROBLIN, Hon. Duff	Wolseley	Legislative Bldg., Winnipeg 1
SCARTH, W.B., Q.C.	River Heights	407 Queenston St., Winnipeg 9
SCHREYER, E. R.	Brokenhead	Beausejour, Man.
SEABORN, Richard	Wellington	594 Arlington St., Winnipeg 10
SHEWMAN, Harry P.	Morris	Morris, Man.
SHOEMAKER, Nelson	Gladstone	Neepawa, Man.
SPELLIE, Robert Gordon	Birtle-Russell	Russell, Man.
STANES, D. M.	St. James	381 Guildford St., St. James, Wpg. 12
STRICKLAND, B. P.	Hamiota	Hamiota, Man.
TANCHAK, John P.	Emerson	Ridgeville, Man.
THOMPSON, Hon. John, Q.C.	Virden	Legislative Bldg., Winnipeg 1
WAGNER, Peter	Fisher	Fisher Branch, Man.
WATT, J. D.	Arthur	Reston, Man.
WEIR, Walter	Minnedosa	Minnedosa, Man.
WITNEY, Hon. Charles H.	Flin Flon	Legislative Bldg., Winnipeg 1
WRIGHT, Arthur E.	Seven Oaks	4 Lord Glenn Apts. 1944 Main St., Wpg. 17

THE LEGISLATIVE ASSEMBLY OF MANITOBA

2:30 o'clock, Tuesday, February 21st, 1961

Opening Prayer by Mr. Speaker.

MR. SPEAKER: Presenting Petitions

MR. CLERK: The petition of John James Norris and others praying for the passing of an Act to incorporate the Manitoba Automobile Museum Foundation.

The petition of the University of Manitoba Foundation praying for the passing of an Act to amend an Act to incorporate the University of Manitoba Foundation.

MR. SPEAKER: Reading and Receiving Petitions.

Presenting Reports by Standing and Select Committees.

Notice of Motion

Introduction of Bills

HON. GEO. JOHNSON (Minister of Health & Public Welfare)(Gimli) introduced Bill No. 19, An Act to repeal the Health and Public Welfare Act and to amend certain other acts.

MR. JOHNSON (Gimli) introduced Bill No. 2, An Act to amend The Vital Statistics Act.

MRS. C. MORRISON (Pembina) introduced Bill No. 22, An Act to validate By-law No. 5-61 of the Town of Morden and an Agreement between the Town of Morden and Canadian Cannery Limited.

MR. SPEAKER: Orders of the Day.

HON. DUFF ROBLIN (Premier) (Wolseley): Mr. Speaker, before the Orders of the Day I should like to inform the House that I received word yesterday of the death of an old friend of many of us here, George P. Renouf, and I should like to move the usual motion of condolence to mark this fact. I think that my association with Mr. Renouf while perhaps not as long as that of other members here was certainly as intimate, because for many years we sat together on the other side of the House, and when I first entered this chamber he was my leader in that little group which has now passed into history. It was an independent band of anti-coalitionists. We're not all of us gone yet; there are still some of us here in the House. We remember George Renouf as the leader of that little group. He had a remarkable history and nothing gave him more pleasure than to tell you some of the interesting events of his early days in this country and indeed no story was more romantic, because he sailed from the Isle of Jersey as a sailor boy in the latter years of the 19th century, coming over with the cod fishermen to pack fish on the shores of Quebec and Newfoundland, then finally landing on the continent itself and coming west here to Winnipeg, I think in 1896. Then he moved north with the great wave of railway building and as a worker on the railroad he found himself in the vicinity of what is now the Town of Swan River and the Swan River Valley and having helped to build the railroad that far he liked the country so well that he decided to settle there as a farmer. That he did.

During his years of residence in Swan River, I think he took every part that a man could in the public life of his community. He was a member of the School Board in 1907 and never ceased to hold public office until he left this chamber in 1958. After being a member of the School Board, he was a councillor, a reeve of Minitonas for 11 years, and then I think for some 26 years a member of this House. And I think we will all remember him as a man who loved to serve the people of his constituency. He was never a politician on an occasion of that nature. He was always trying to do what he could for anybody for whom he felt responsible in that area regardless of their views on politics or of anything else. And he was such a stout fighter for what he thought to be fair play for his people and the rights of his constituency. He always, as I think he would have said himself, called a spade a spade. All in all a remarkable personality. We're not likely to see that kind of man again because time and circumstance change so rapidly. I count myself fortunate in having known George Renouf and of having had an opportunity to observe the way he worked for the people of his community and of his province, and I know that there are many others who remember him in the same affectionate and kindly way as one of nature's gentlemen and a true servant of the people of this province.

So, Mr. Speaker, I have the honour to move, seconded the the Honourable Member for Swan River, that this House convey to the family of the late George P. Renouf who served as a member of the Legislative Assembly of Manitoba, its sincere sympathy in their bereavement and its appreciation of his devotion to duty in a useful life of community and public service, and that Mr. Speaker be requested to forward a copy of this resolution to the family.

Mr. Speaker presented the motion.

MR. A. H. CORBETT (Swan River): Mr. Speaker, it is with a feeling of sadness that I'm called upon to second this motion of condolence, because I first met George Renouf in May 1910 -- many years ago -- figure that out, that's nearly 51 years ago. At that time he was engaged in farming northeast of Bowsman and had not entered municipal life, but I think the following year he entered into municipal life and was elected as councillor in the Rural Municipality of Minitonas, and he served in the capacities of councillor and also reeve at intermittent intervals but continuously in either one of those offices until such time as he ran for the seat of Swan River -- I think it was in '32 -- and was elected to this House and served continuously until 1958. The last speaker has covered considerable of the facts of his life, but I knew George very personally as I was engaged myself in connection with roads and drainage up in that country working for the government and we had very close contact for many years. And I must say this about George that he was a very hard worker for his constituency. I think every Minister of Public Works who sat in this House during George's tenure of office would know that he was a hard man to turn down. If he wanted something for his community, he made life so miserable for them that he usually got it. In his whole life--George was inclined to be pugnacious. He rather enjoyed that -- a good argument -- and he made his arguments stick in every way wherever possible for the good of his community. He was a selfless man as far as he was himself concerned. I do not think he accumulated much of this world's goods through his own efforts but a great part of his life was devoted to the community in which he served and the people he served. And as I say, he was not a politician in some ways but one of the greatest campaigners that ever worked in this province. George's campaign for the next elections started the day that he was elected and continued all the way through, and no subject came to his attention no matter how small or how large but received his full attention and he was a doughty warrior in fighting for the rights of his people and the people of the community. And it's with very sincere regret that I rise to second this motion feeling the loss of an old personal friend who though we differed at lot of times --- we always parted on the best of terms.

MR. D. L. CAMPBELL (Leader of the Opposition) (Lakeside): Mr. Speaker, I think that what has been said by the Honourable the First Minister and the Member for Swan River has been very appropriate. Both of them know the late George Renouf intimately; both of them were able to appreciate very greatly the many qualities of mind and heart and initiative that he undoubtedly possessed. George, I would say, was one of the most colourful people to sit in this Chamber during my time here. He was, as both who have preceded me have mentioned, he was a bonny fighter. It's said that quite a few of the commercial institutions have a slogan that the customer is always right. Well with George's case the constituent was always right and as his successor in his seat has said he worked for his constituency and his constituents individually in season and out of season, and I think this must be said that though he was aggressive, as the Honourable Member for Swan River has correctly said, he was aggressive to the point of being quite emphatic at times and even argumentative, yet he never carried a grudge and he certainly worked just as hard for those who had opposed him as those who had supported him. Now as the Honourable Member for Swan River has mentioned he was a great campaigner and maybe that he saw in that good campaigning, but I think it was a higher motive in George's case. I think that he really had the philosophy that the minute an election is over that the member elected is the representative of all the people of the constituency, and George certainly took that injunction seriously. He was well liked here, Mr. Speaker, as you know. You were one of his intimate friends; perhaps no one in the House knows him any better than you did because you were very close to him. The vicissitudes of politics are such that I sat as a colleague with him and he sat in opposition to me so that I can speak of him from both points of view. And whether he was with you or agin you he was an excellent representative of that constituency, a constituency that when he first started to represent it was still to some extent pioneer. He was well able to represent it for that reason because as the First Minister has related he was himself a pioneer of the area. He had pioneered in two districts, near Bowsman first and later on down near Mintonas. He knew the problems, he knew the people. He was a good representative. He was a good man and this House lost a colorful character, the constituency lost a very, very fine member, when George decided to retire. So, Mr. Speaker, it's with sorrow but yet appreciation that our group joins in the expressions of appreciation for the service that

(Mr. Campbell, cont'd.).... George Renouf gave to his constituency and to the province as a good friend of many of us in this House and certainly we extend our sympathy to Mrs. Renouf and other relatives.

MR. M. A. GRAY (Inkster): Mr. Speaker, on behalf of my group I wish to endorse every word said by the last speakers in expressing our regrets in the untimely death of Mr. George Renouf, a fine gentleman whom I have the pleasure to meet at this House since I entered in 1941. He sat all these years on the right of me as a member of the Opposition and the government of that time. We discussed many problems together and his fine, wise words of advice comforted me all the time. Although he was a member of the Opposition for the years I have known him not only with the government but also with our group, nevertheless he was honest and sincere in his convictions and his periodic advice did not do any harm to me personally or his party. He was a champion of the old age pensioners and he respected that motion his group took; he was always for it. As a matter of fact, at one time, at my suggestion, he moved a resolution for the increase of old age pensioners -- that was in 1944. He was their friend. I met him quite often during recess and I asked him what he was doing here and he said, "My constituents want me to adjust many problems on their behalf." I can see that he was one of the builders of the progress of this province and the interest he took in his constituency in my opinion cannot be duplicated. He was a builder in the standard of our democratic system of government and paved the way for the young people to come into public life with less pain and hardship, and who knows, maybe his heartfelt interest in our way of life has given me personally a promise and opportunity of serving the people of this province. The last time I met him was the first opening of the session under the Conservative Party. When I suggested that he come into the House and sit at the right of the Speaker he said to me, "I will go into the gallery where my friends are." A servant of his calibre cannot be forgotten and all of us regret his death and extend sympathy to the family. May the Lord be his inheritance and may be reposed in his resting place in peace.

MR. E. PREFONTAINE (Carlton): Mr. Speaker, it is with some emotion that I rise to add my few words to this motion of condolences to Mrs. Renouf and family. George and I sat in this House for many years. We were not in agreement on all matters but a question cropped up in the course of years about which we were fully in agreement, and that question was whether coalition should be continued in wartime. We both believed that it was undermining our parliamentary system and was doing harm to both major political parties in this province. In the course of events after the election of 1949, six of us met at the St. Charles Hotel -- I don't know if I can divulge any secrets but I believe that it would not be improper at this time. Four of us only had been elected directly as supporters of the Manitoba Democratic Movement. Two others had the same idea; they were invited to meet us at the St. Charles; they came to the meeting and we decided that we should have a leader to lead us. There were six of us with those two, to lead us in the House. I was the only Grit in the group and there were five Conservatives. I made a motion that our leader should be the young man from Winnipeg South who had just been elected for the first time. There were other propositions; I lost out. Mr. George Renouf became our leader, my leader of the House, and my colleagues in this movement were kind enough to allow me to sit next to him in the front seat -- one of the front seats. And I enjoyed, Mr. Speaker, this session alongside George Renouf very, very much. I might say that it might be the session that I enjoyed the most of the 30 odd that I have been in this House, and when I realize that George is gone I believe it is a sad thing that men like that should go; of course Providence looks after those matters. But I remember clearly the fact that George was always accompanied by Mrs. Renouf. Everywhere we saw George, Mrs. Renouf was along with him. I never saw, I don't think, a more united couple, and Mrs. Renouf every time she saw me after the breakup of coalition and after we had rejoined our parties she used to point the finger at me and say: "Mr. Prefontaine I thought you would follow George in the Conservative Party." She was not very happy; I don't think she ever forgave me the fact that I didn't go along with the five others in the Conservative Party. Our small coalition was for one purpose, it achieved its objective in the short lapse of one year and we went back where we had come from, so I would like to unite with the others that have spoken, especially to offer my sincerest sympathy to this excellent woman, Mrs. George Renouf.

MR. H. P. SHEWMAN (Morris): Mr. Speaker, our Leader, the Premier of the Province,

(Mr. Shewman, cont'd.) . . . and the Honourable Member of Carillon have spoken of the late George Renouf as our leader, and during that session I was one of the members that had George Renouf for our leader. The first session that I was in the House was that session, and I owe a great deal to George Renouf and one would say it was George's Christian principles, I believe, and his whole desire for fair play that kept George in his seat in this House for so long, so along with the rest, I am very happy to have the association that I had with George Renouf during my term in this House.

HON. J. B. CARROLL (Minister of Labour) (The Pas): Mr. Speaker, I think the greatest tribute that one can pay to a man like George Renouf is the respect with which he's held by the people who knew him best. I have the honour to share the constituency which was George Renouf's with the member from Swan River and I happen to know something of the feeling that the people of that area have for Mr. Renouf. I think in many ways both Bert and I are inadequate to fill George's shoes because he was one of these men, as the member for Morris has said, whose principles were guided by the Bible. His motives were always of the highest and he was one of these individuals who worked always and at all times on behalf of his constituents. I think in touring the constituency with George on my first trip out in the south part of it, I was very much impressed with the way that people held George in respect. It didn't matter what their political beliefs might be, they always supported George because he always worked on behalf of each and every one of them to the best of his ability. I'm glad that the Member for Carillon has mentioned Mrs. Renouf because there has, I think, in many cases been a belief that she was not actively supporting George in his political work, but I do believe that she was an excellent support and an excellent help to George. She was, as has been said, his constant companion and she had a very keen interest in the affairs of his constituency and in the affairs of the province and I think this was a great help to George particularly during the last few years when his eyesight and his general physical health was failing. And I would like to pay tribute to her as well as to the deceased who has been a very great help to me in my start in political life.

MR. M. N. HRYHORCZUK, Q. C. (Ethelbert Plains): Mr. Speaker, along with the Honourable Minister who has just spoken and the Honourable Member for Swan River, I took over a portion of Mr. Renouf's constituency and although I had the pleasure and privilege of knowing him for more than a quarter of a century, I really didn't get to know the man until I came into this House and when I did take over a part of Mr. Renouf's constituency. What I did find, Mr. Speaker, was this, that there was good and sufficient reason for him remaining undefeated for 26 years -- which doesn't happen too often. He was not considered only as a representative of that constituency; he was a great deal more than that. He was a very close friend of all the residents in this constituency. He was a family counsellor, a legal adviser and whenever anybody had any problem of any kind in the Swan River constituency, they would generally go to Mr. Renouf and he always found time to look after their troubles, their tribulations and their problems, not matter how small they were and not matter how busy he was. He would always find time to try and find a solution and answer to the problems of those with whom he was so concerned. He was a very hard man to follow -- at least I found it impossible to make the contributions that he had made in that section of the constituency, because as I've said, he just gave all his time towards helping those that depended on him. And he was, Mr. Speaker, a public servant in the full sense of that word. And I, together with the others would like to extend my sincere sympathy and condolence to his family.

MR. SPEAKER: Honourable members please rise as a mark of respect to the late member.

MR. ROBLIN: Mr. Speaker, if I may say a word in my capacity as member for Wolseley before the Orders of the Day are read, I should like to inform you, Sir, that we have some visitors in the gallery today with whom I can claim a connection, because there are some 70 pupils of Gordon Bell High School under their teacher Mr. Mel Solar, who are visiting us today, and some of them at least have come from the constituency of Wolseley which I have the honour to represent here. I may say, Sir, that it isn't very often that I have the pleasure of making such an announcement but it does give me a good deal of satisfaction to give you that information today.

MR. CAMPBELL: Mr. Speaker, I am sure that the House does not need me to add to the welcome that the Honourable the First Minister has already extended to the visitors in

(Mr. Campbell, cont'd.).... the gallery but I can't help but recall that on the one occasion when I was privileged to introduce to the House some of the students and the one teacher from Flee Island School #527, located in the heart of the continent, that the Honourable the First Minister was kind enough to say, in the presence of those students and that teacher, that the area out there had a very good member. And I am delighted at this opportunity to return the compliment and tell the young folks from Wolseley that they're represented by a very capable man in this House.

MR. PREFONTAINE: Monsieur l'orateur, j'aimerais ajouter quelques mots de bienvenue pour les gentilles demoiselles et les messieurs de l'école de Wolseley qui sont ici en ce moment. Je suis certain, monsieur l'orateur que ces jeunes gens sont venus ici pour s'instruire autant que pour voir. En vous instruisant, vous constaterez que dans la Chambre du Manitoba on parle français. Je suis certain que tous et chacun d'entre vous comprenez le français, donc vous avez reçu par ces quelques mots un peu d'instruction que vous pourrez passer aux plus jeunes et à vos amis à l'école. Mes jeunes amis, le français est une langue importante et je vous conseille de l'apprendre bien afin de pouvoir vous en servir couramment toute votre vie.

TRANSLATION OF ABOVE: Mr. Speaker, I would like to add a few words of welcome to the pleasant young women and young men of Wolseley School who are with us at the moment. I am certain, Mr. Speaker, that these young people have come here to acquire knowledge as well as to watch. In acquiring this knowledge, you will note that French is spoken in the Manitoba Legislature. I am sure that each and everyone of you speak French, so with these few words you have received some knowledge that you can pass on to the younger ones or to your friends at school. My young friends, French is an important language and I advise you to learn it well so that you will be able to use it fluently all of your lives.

MR. SPEAKER: Orders of the Day.

MR. E. R. SCHREYER (Brokenhead): Mr. Speaker, before the Orders of the Day, I would like to ask a question of the First Minister. I'm sorry I didn't give him notice. He may take this as notice. I've been informed by certain municipal officials that the route of the proposed flood diversion channel has been drastically altered. The question is, is this true? Is it true that it is now proposed to drop the channel back into the Red River nine miles north of Lockport instead of at Lockport as originally planned?

MR. ROBLIN: I've heard nothing of this rumour, Mr. Speaker.

MR. SPEAKER: Orders for Return. The Honourable Member for St. John's.

MR. D. ORLIKOW (St. John's): Mr. Speaker, I move, seconded by the member for Seven Oaks that an Order of the House do issue for a return showing all correspondence and reports between the Minister of Labour and all employees in his department and the Deputy Minister of Labour and any other employee concerned with regards to the complaints of certain people clearing brush at Grand Rapids as to inadequate wages.

Mr. Speaker read the motion.

MR. CARROLL: It is my intention to refuse this Order for Return on the grounds that it is privileged information and I would refer you to Page 329 of Sir Erskine May's Parliamentary Practice, Thirteenth Edition. There appears here, Mr. Speaker, an ambiguity in the second part of it referring to the Deputy Minister of Labour and any other employees concerned. I'm presuming that that means employees of the government. If that's the case, Mr. Speaker, we're refusing the information on those grounds.

MR. RUSSELL PAULLEY (Leader of the CCF) (Radisson): Mr. Speaker, I realize that the rules do set out that the Ministry can refuse to answer questions and I personally am not surprised at the stand of the Minister.

MR. SPEAKER: The Honourable Member for St. John's.

MR. D. ORLIKOW: Mr. Speaker, I move, seconded by the honourable member for Flsher that an Order of the House do issue for a Return showing: All correspondence and reports between the Minister of Health and Public Welfare and employees in his department including health inspectors, community development officers, and the Deputy Minister of Health and Public Welfare and any other employees concerned with regard to the complaints of certain people clearing brush at Grand Rapids, as to their living conditions, inadequate housing, inadequate food, lack of sanitary facilities, etcetera.

Mr. Speaker read the motion.

MR. JOHNSON (Gimli): This is privileged correspondence and I feel that it would be inadvisable to table same.

MR. PAULLEY: May I just make one comment on this particular aspect of this question? Again, I realize that the rules do allow for a Minister to refuse to answer the question, but I would ask the Minister if there's any possibility of reconsideration in this regard because it is dealing with a question of health of the people of the Province of Manitoba and as I understand the rules, that questions should be answered or could be answered which are of very public importance which we feel the health and sanitary conditions at Grand Rapids certainly are in that category.

MR. ROBLIN: Mr. Speaker, I think that perhaps it would be well if we were quite clear about the reasons why information of this nature is withheld. If the House insisted, it's been said long ago, not by me, that if the House insisted on the production of papers which are confidential reports between the Ministers and his advisors, then all we would have would be a series of reports that would be framed for the express purpose of tabling in the legislature, which of course would defeat any useful purpose they might have. And that it is not reasonable, nor has it ever been the custom that I'm aware of in the long years of this House or other Houses in the British system to insist on the tabling of papers of a nature of this sort which are privileged. Now the question the Honourable the Leader of the CCF raises, leads to another comment though Sir, which I trust I may make, namely that the government is not desirous in any way of hiding behind this rule in the sense of the ministers not being responsible to this House for the conduct of their department. And when the estimates for this department are raised or at any time that the procedure allows for it, but certainly at that time, I suggest, Sir, that there can be the fullest questioning of the minister by the members of the House to elicit any information that they feel bears on the point and to give him the chance to exercise his responsibility for the conduct of his department. But it seems to me that that would be the best way of discussing this matter which is of public importance and which I feel will be discussed in full before we rise. I merely make that comment in order to keep the records straight.

MR. SPEAKER: The Honourable the Leader of the CCF Party.

MR. PAULLEY: Mr. Speaker, I beg to move, seconded by the honourable member for Fisher, that an Order of the House do issue for a Return showing: (a) The names of, and number of people employed in the Tritschler inquiry; (b) the rate of pay paid to each; (c) the total cost of the Commission to date.

Mr. Speaker presented the motion and following a voice vote declared the motion carried.

MR. SPEAKER: The Honourable the Leader of the CCF Party.

MR. PAULLEY: Mr. Speaker, I beg to move, seconded by the honourable member for Seven Oaks that an Order of the House do issue for a Return showing: (a) The number of people who have applied for assistance under the provision of the Medicare Plan as of February 1st, 1961; (b) The number of applications which have been approved.

Mr. Speaker presented the motion and following a voice vote declared the motion carried.

MR. SPEAKER: The Honourable the Member for St. John's.

MR. ORLIKOW: Mr. Speaker, I move, seconded by the member for Seven Oaks that an Order of the House do issue for a Return showing: (1) The terms of reference given to Dr. Stewart Martin with regard to the dispute at Grand Rapids.

Mr. Speaker put the question.

MR. CARROLL: Mr. Speaker, I intend to refuse on the grounds that a member does not ask for information which is set forth in documents equally accessible to the questioner. I'm going to be much more helpful to the member on this question than I was on the one previously because I'm going to refer him to the Manitoba Gazette, Volume 90, Number 4 dated February 4th in which the terms of reference are set out on the first page.

MR. SPEAKER: We have a motion before the House, do we.....

MR. ROBLIN: Would the member be good enough to withdraw it under the circumstances.

MR. ORLIKOW: Certainly, Mr. Speaker.

MR. SPEAKER: The Honourable Member for Inkster.

MR. GRAY: Mr. Speaker, I intend to let the matter stand again because I noticed in the votes and proceedings the Notice of Motion of my questions. I think perhaps I'll go on today.

(Mr. Gray, cont'd.) First of all I'll make a motion -- I'm sorry -- I'm just trying to explain because I'll use this argument in my closing of the debate Mr. Speaker, I beg to move, seconded by the honourable member from Fisher that this House request the government to petition the Federal Government for an increase of old age and blind pensioners in the province from \$55.00 to \$75.00 per month.

Mr. Speaker presented the motion.

MR. GRAY: Mr. Speaker, my presentation will be very brief because I feel that this resolution does not affect directly the province although indirectly the people of Canada, and secondly that I have tried to prove which I haven't got the information that the Social Security Plan is not doing entirely justice to those who apply for old age pension and to those that \$55.00 a month under the present high cost of living is definitely not sufficient. Before doing it, I'd like to read just one paragraph or a few lines of the classic address made yesterday by the honourable member from St. Vital. He says, "I've been intrigued ever since I became a member of this House with some remarks that were made on March 23rd, 1959, by the honourable member from Inkster on page 202 of Hansard of that year in which he said, 'All progressive legislation put in the statute books. . . . the CCF and in the earlier days of the Independent Labour Party', this, I think, is a pretty wide claim that has been repeated many times with little variation by himself and by his Honourable Leader". Mr. Speaker, I could challenge the honourable member that the statements in 1959 and the statements prior to that year were correct or better still, I could bet him a little profit to the government on this issue. But even if he doesn't agree with it, the fact that we have advocated progressive legislation and they were implemented many years later indicate that we were right and we were not the only people that submit pious resolutions. It wasn't a pious resolution although being pious is not a crime, but it was a resolution.

Now coming back to my request I have no apology, Mr. Speaker, to bring it up again. First time I brought it up the amount at that time paid to the old age pensioners on a means test, if you please, in other words a means test means that the person had to prove that they had no other income except sometimes supplemented by so-called charity, was \$20.00 a month. Now the honourable members in the House realize, and I do not have to prove to them or they can prove themselves by going into the chain stores or the grocery stores, and find that \$20.00 a month in 1927 and \$20.00 a month in 1941 was better than \$55.00 today. Food was cheaper; at that time they could buy meat for five or ten cents a pound; they could buy potatoes for 60 cents a bushel; they could buy bread for six cents or five cents a loaf; and they could buy milk for less than ten cents a quart. What is it today? I don't need to tell you. Go into the stores and see it for yourself. And I hope that every member here realizes now that \$55.00 a month is definitely not sufficient. They could not get a room which is not unsanitary, no, not air-conditioned in a poor tenement home, they couldn't get a room for less than \$25.00 a month. Then they only have \$30.00 a month left for food, for clothing, for necessary incidentals and everything else that a human being requires not to live but to exist. In my humble opinion seeing the people daily, watching their livelihood, I think that I could safely say that it is too much to starve and too little to live. Then probably the Minister of Health and Public Welfare will come up with this deal on the social security or social allowance. I agree, Mr. Speaker, this is a good bill. I have personally complimented him on this bill but from what I hear -- I haven't got the facts because the return of my questions have not yet been placed in this House and I probably will speak later about it-- but what I hear is very, very little and above all it comes under a means test which is the worst assertion I have heard in the English language and I have my experience with the means test. I still remember the unemployed situations between 1930 and 1940. I was in the midst of it. I was then a member of the City Council and a member of the Unemployment Relief Committee, and I was also a member of the Commission appointed by the Provincial Government at that time. And a means test means that the man has to come at that time in a cold shed, wait for hours before he can be interviewed and then assigned to him so many loaves of bread, so many potatoes, a half an onion, no fruit, no oranges, very little meat in the amount that was allotted at that time. It was still worse. They had to go and bucksaw the wood for the relief they received which at that time we had tried to abolish it. The Council at that time said, "No, let's put them on a means test as hard as we can. If he's hungry, if his family is hungry you will have to do it." Whereas you could have had a machine and

(Mr. Gray, cont'd.) . . . cut all the wood that all the unemployed could do in one day. I remember it very well what means test means. I remember very well what the provincial old age pensions system does with a man who has to apply under the means test. They have an application with about 50 questions had to be filled out but that's not enough. Then they send every year an affidavit for him to swear -- for him or her to swear -- that they didn't have any other income except the small amount that they are allowed. And this year's scheme as good as it would be has helped a little but they're still under the means test but however I want to get the figures before I deal with that particular help before I discuss it.

Now what is the situation today, Mr. Speaker, on the old age pensions? There are 50,000 unemployed, not unemployed, old age pensioners who have come under the Federal Government's responsibility and there's about 5,000 under the Minister's and if you add the others like the blind and the others, it comes to about 7,000. In other words there are 57,000-- if I am not correct you can correct me; I think I am right -- 57,000 people that have to have a handout. True, there are many of them who do not need old age pension and they take advantage of it. What I already said a year ago that those people pay back in income tax, but even some of them do not. The percentage is small. If you take the figures, Mr. Speaker, of 1952 when the transfer from the provincial responsibility was made to the Federal Government responsibility, the transfer of 18,000 and since 18,000 who did not have any other income -- that's definitely because they were under the means test and if you add to it 1,200 a year which are being transferred since 1952 I venture to say that at least 75% need additional help at least. Can we let 50,000 or 45,000 people suffer, because the argument is that you are feeding those who don't need it? I don't think so. I think the Honourable Acting Speaker would agree with me that there is a passage in the Bible that saving one person is just like saving a nation. We can't let 75% people suffer. They are here; it's our responsibility, and Mr. Speaker, I'm going to repeat the statement I've made every year that these are the people who came here, mostly immigrants, and worked for \$10.00 a week or 50¢ an hour and I'm a witness to it because that's what was my wage at that time, and do you ever think to comfort our lives with what we have today. They dug the sewer, they build the railways, the tunnels, paved the streets, everything to make our life now a life for this generation a little bit happier and better. Are they to suffer in their old age? They're not quitting their jobs; they're fired! Nobody wants now a man over 60 and this is 65 and 70. Nobody wants to employ them -- there's so many young people seeking jobs. How can you expect when at the age of 60 and 65. They're being laid off at 60. They lose their jobs and livelihoods at 60 and live or exist between 60 and 65 on the handouts of their children and many of them cannot afford to do it. Perhaps some of them can, but I say that no one is to suffer for the faults or mistakes of the others.

This is the situation so what I'm asking now is so simple that I cannot conceive how can anyone be against. We recommend or we suggest to the Federal Government, raise the Old Age Pension; that would be a saving to the Social Allowance Act -- they wouldn't have to pay out, and a saving to the province because they will get \$20.00 a month more; they will not go down to the office of the Social Allowance Act and stand in the doorway with their hat on and beg, gimme. And what's the average -- \$3 or \$4 or \$5 a month, but that could be corrected, I'm not sure because I asked for this information, but it's my guess. So I feel that this resolution is so-- the only fault with this resolution, Mr. Speaker, is because I'm introducing it on behalf of my party. That's the only fault that the other members may think. Why give in? But actually there's absolutely not a single argument against it particularly the liberal convention adopted it and there are quite a few requests and suggestions were made in Ottawa by high officials of both parties to this proposition.

So once more I take the liberty of bringing this to the attention of the House. I don't think any further arguments would change your mind but personally I feel that this resolution should be carried and I hope it will be, providing that the Minister of Health and Public Welfare goes for a holiday for a month, and I

MR. ROBLIN: Cheer up, cheer up.

MR. GRAY: . . . and reserving the right, Sir, to go to the base and deal with all the arguments against it, and believe me, I assure you that I will not deal with the arguments in favour. I'll only deal with the arguments against. I leave the case before this House.

MR. SHEWMAN: Mr. Speaker, I wish to move, seconded by the honourable member from Brandon, that the debate be adjourned.

Mr. Speaker presented the motion and after a voice vote declared the motion carried.

MR. SPEAKER: Second reading of Bill No. 12. The Honourable the Member for River Heights.

MR. W. H. SCARTH (River Heights) presented Bill No. 12, An Act to Amend the Winnipeg Foundation Act 1943 for second reading.

Mr. Speaker presented the motion.

MR. SCARTH: Mr. Speaker, the Bill itself needs I think a little explanation. As regards clause 1, it is asking power to the Foundation which heretofore was restricted in its investments to those provided by the Manitoba Trustee Act into the larger scope provided by the Canadian and British Insurance Companies Act. I don't wish to go into all of the scope of the second Act, that is the Canadian and British Insurance Companies Act, except it is a much wider provision and better returns are often made. The second provision Sir, is that whereas at the present time members of the Advisory Board are confined to Winnipeg, this allows outside of Winnipeg members to belong. Then the third provision, Sir, to Section 12 provides that a wider distribution of the trust fund itself, not restricted to purely educational or cultural purposes.

Mr. Speaker put the question and after a voice vote declared the motion carried.

MR. SPEAKER: Second reading of Bill No. 13, An Act to Amend an Act to Incorporate the Town of Tuxedo. The Honourable Member for Winnipeg Centre.

MR. JAMES COWAN, Q. C. (Winnipeg Centre) presented Bill No. 13, An Act to Amend an Act to Incorporate the Town of Tuxedo for second reading.

Mr. Speaker presented the motion.

MR. COWAN: Mr. Speaker, this Bill simply incorporated into the Town of Tuxedo a narrow strip of land 39 1/2 feet wide which is part of the roadway along the eastern boundary of Assiniboine Park and at this session of the legislature the City of Winnipeg will also be asking to have its Charter amended to exclude this narrow strip of land from its boundaries.

Mr. Speaker put the question and after a voice vote declared the motion carried.

MR. SPEAKER: Adjourned debate on the proposed motion of the honourable member for Arthur and the proposed motion and amendment thereto, the Honourable Leader of the Opposition and the amendment to the amendment, the Honourable Member for Gladstone. I believe at this time I was expected to make a statement on the conduct of the debate.

I would read you my ruling on the objection raised by the Honourable the Leader of the CCF Party. On Monday, February 20th, the sittings of the House, a point of order was raised by Mr. Paulley, Leader of the CCF Party, on a matter of the relevancy on the Throne Speech Debate. It was the former practice that debate was not restricted to the subject matter, the main motion or the amendments. Members debated any particular subject matter which they chose. Members of the Select Special Committee on Rules of the House which has now completed its work, did consider Rule No. 30. Opinions were expressed on both sides of the question. Rule No. 30 was adopted by the Committee; minutes with respect to this Rule are as follows: Rule No. 30. This rule deals with the relevancy of the subject matter and after a lengthy discussion of matters of relevancy especially on the debate on the motion for an address to the Lieutenant-Governor in reply to the Speech from the Throne, the committee felt that the amendment and the sub-amendment in future be worded in order to permit the observance of relevancy. Some members of the committee also felt that they would be agreeable to the abandoning of a recent practice whereby there would be no restriction on the subject matter in discussion on the amendment or sub-amendment to the motion in reply to the Address. It was a former practice of this House to permit a wide-open debate on the main motions and amendments. New rules have been adopted and are now being used in this House. The new rules place a time limit on the debate of both the main motion and the amendments on the Throne Speech. It would appear that honourable members, when speaking, do not confine their remarks to the subject matter of the amendment and by using their allotted time they may prevent other honourable members from debating the subject matter of the amendments submitted by their own party, which would appear to be undemocratic. New rules of debate are now in force; we will build new usages and customs of our own and precedence will be established for guidance of future speakers. I would think that some responsibility rests with the mover of motions and amendments in this House. The sub-amendment submitted by the Honourable Leader of the CCF Party deals only with one subject matter. It is not difficult to tell when a member is out

(Mr. Speaker, cont'd.)....of order and debate can be well controlled. The motion submitted by the Honourable the Leader of the Opposition is wider in scope and more difficult to interpret; it may well be a matter of opinion if members..... in speaking to the motion or not. It is not for Mr. Speaker to advise what motion should come before the House provided they are in order. It would, however, appear that an opened end resolution would permit very wide debate while one dealing with well defined subject matter would be restricted. In ruling if the honourable members confine their remarks to the subject matter of the debate, I am influenced by the fact that members who do wish to debate the subject matter of a motion will have the right and the time provided by our rules, to do so. Our ruling is that they confine their remarks to the subject matter of the motion before the House.

The Honourable Member for Gladstone.

MR. NELSON SHOEMAKER (Gladstone): Mr. Speaker, your ruling will not affect my speech in any way, shape or form, because I didn't intend to talk about agriculture or roads or anything else but health. Now, in rising to take part in this debate, Sir, I would like first to congratulate you upon your retention to the highest office within the gift of this Assembly and upon your usual fine appearance here today. I would like, also, to congratulate the Member for Arthur constituency and the Honourable Member for Cypress because I did agree in part with what both of them had to say. It isn't often, Mr. Speaker, that we at this side of the House agree with members in the government benches but on this occasion I certainly do agree with two points in particular, and I would like to read you from Hansard of February 15th, Page 9, and the Honourable Member for Arthur is speaking, and it's very brief, and I refer to this one particular paragraph and he says, and I quote: "And I wish to point out, Sir, that professional groups are making their contribution to this plan and in so doing have shown their responsibility to those in need. As mentioned in the Speech from the Throne, the financing of the Manitoba Hospital Services Plan will be brought before this legislature for consideration." And I'm still quoting, "Now it is my firm belief, Sir, that a deductible clause or deterrent, if you will, would put a break on the rising costs of hospital services." Now I agree with everything that I have read and quoted from Hansard as the statements made by the Honourable Member for Arthur. I agree with that wholeheartedly. The remarks that the Honourable Member for Cypress made relative to the proposed highway No. 28, I agree with what she says: "Let's get on with the job". And I'll have more to say about that when we do come to roads.

Now I don't suppose, Mr. Speaker, that there is a member of this House who has written as many letters to and received as many in reply from the Honourable the Minister of Health as I have and God help him if there has been any that have taken more liberty than I have in that regard. And I would like to now publicly thank him for the co-operation and the assistance and help that he has so generously extended to me. I really appreciate it. I appreciate too that it takes a great deal of courage to deal with such a cancerous monster as Health and Welfare and I really sympathize with him in that regard. Because in his department, it is a fact that it is an ever-growing, ever-demanding department and that the problems tend to grow with the population rather than lessen. Now everyone in this Assembly and indeed everyone in the province, Mr. Speaker, is more than aware of the unpopularity of the recent increase in Manitoba Hospital Services premiums and several members have already spoken on that subject. The public were generally outraged. Some of them could understand and comprehend that hospital costs and services had been increasing steadily over the years. And I know in the town of Neepawa for instance that hospital costs, that is the per diem rate in the Neepawa hospital has tripled in the last ten years, that is, there has been a 300% increase. And the report that was laid on our desks yesterday, the financial estimates of the Manitoba Hospital Services Plan, point that fact out -- that their hospital costs have been steadily rising. It points up the fact too, that we can't expect any let-up in this direction.

I am sorry, indeed that I was not able to attend the session Friday evening at 9 o'clock because I had other commitments at that time so that I didn't hear what the Honourable the Minister had to say. I do take both daily papers however, and I read them pretty thoroughly, the report that the Honourable Minister made, but to me it only indicated one thing -- or two things really. He suggested that we could expect a 70% increase -- in fact I think one of the daily papers headlined their paper by saying there would be a 70% increase in costs -- and in effect, what he did say was that if you think the costs are high now "you ain't seen nothing yet; just

(Mr. Shoemaker, cont'd.) wait till 1963, fellows, and then you'll get your eyes opened". But I think that perhaps he did fail in telling us the methods that we might use to control or limit the costs in some fashion. That is, he didn't come out and say that we should have a deductible or we shouldn't have one and so on. Now, I have already stated, Mr. Speaker, that the people by and large were outraged and provoked, to say the least, at the increase in premiums. They were provoked because of the fact that this government preached up and down the province prior to the last two elections and informed the public that they could rest assured there would be no tax increases. Now I know perhaps that they don't consider premiums taxes, but I do, and I'm certain that the public do. That is the fact, that is the point that makes the people provoked, there's no doubt about that. It had certain other far-reaching results, too, Mr. Speaker, because I'm satisfied that it one of the things that caused the defeat of our school money by-law in Neepawa back in June, I believe it was.

Now, it's perhaps unfortunate that it was timed to that, but it so happened that about two or three weeks before our money by-law, the people in the area, the people in the Beautiful Plains Division had just received their new real estate tax notice, and you know which way the taxes went, Mr. Speaker. They didn't go sideways or down, and there was only one other way for them to go. Now following right on the heels of that, Mr. Speaker, came the announcement of the increase in hospitalization premiums. And the two together, the people being as tax-conscious as they presently are, those two factors together, I'm satisfied, resulted in the defeat of our money by-law. Now the increase in premiums also caused grave concern to the municipal men and in some cases resulted in over-expenditure. I know that in Neepawa they were over-expended -- their social allowances, or their social welfare budget was over-expended. And the people, too, it appears to me certain people took such strong exception to the increase in premiums that they either refused on the grounds that they couldn't pay them or they refused because they wouldn't pay them, resulting from the increase. Now, I have before me the Neepawa Press of Friday, December 9th and I just want to read you one brief little story here. It's headed "One Out of Five Didn't Pay their Premiums". "Finance Chairman G. A. Howden reported Monday night to Town Council that one in five of those people due to pay their Manitoba Hospital Services Plan premiums at the Municipal Office (some pay through pay-roll deductions) failed to do so during the payment period that ended December 2nd. Council was told that there was \$3,693 unpaid as of that dead line. Secretary George H. Bates estimated, however, that about half was for people in the Plan claim should pay through the town office but who were not actually under this jurisdiction. In making his comment the Finance Chairman said, "It isn't an indication that the community is exactly flush."

Now I don't know how the figures stand today, Mr. Speaker; they may have paid them all but my guess is that there's still quite a few of them who are still delinquent in that regard. I do know, Mr. Speaker, that in the Town of Neepawa there are a good number of people who now actually pay more in Manitoba Hospital Services premium than they do in real estate taxes, and to me that's a pretty serious situation, Mr. Speaker. Now you take a family of four where a man and his wife, that is, and two members of the family that are over the age limit to be considered in the family group, they would pay \$144 a year in premiums, \$72 for the man and his wife -- the annual premium I'm talking about, Mr. Speaker -- \$72 for the man and his wife, \$36 for each of the two children, making a total of \$144, and that's just exactly half of the premium because the Federal Government pays an additional \$144 making a total of \$288. Now it takes about a \$10,000 home in Neepawa to equal or produce \$288 in real estate taxes so it seems to me that we've gone just about as far as we can go so to speak in increasing the premiums. Well, Mr. Speaker, the members opposite, the honourable members opposite are always chiding us for failing to say what we would do in similar situation, and I am prepared to tell them for one thing that I would go along with this, a deductible plan of some kind as suggested by the Honourable Member for Arthur. I believe that a deductible plan was envisaged back in the spring of 1958 prior to the implementation of

MR. PAULLEY: I wonder if the Honourable Member will permit a question? With regard to your last statement is that your personal view or that of your party insofar as the deductible?

MR. SHOEMAKER: Well, that's my personal opinion, Mr. Speaker. Mr. Speaker, as I said before I was interrupted there, I believe that the government of the day envisaged that

(Mr. Shoemaker, cont'd.)... there would be a deductible in the plan prior to implementing it, the municipal men or certain municipal men were called in to meet with the government, and if my memory serves me correctly I believe the Honourable Minister of Education was then president of the Urban Association. Now I'm just recalling this from memory, Mr. Speaker, and I may be wrong, and I believe that he was one of the men that voiced strong opposition to a deductible of any kind.

HON. STEWART E. McLEAN, Q. C. (Minister of Education) (Dauphin): Mr. Speaker, on a point of order, that statement is not correct.

MR. SHOEMAKER: Thank you very much. Now -- well I'm still in favour of a deductible Mr. Speaker. The people of this province were quite accustomed to a deductible when they had Blue Cross and a good percentage of the people in this province had Blue Cross programs prior to the introduction of the plan, and on page 23 of this report that was laid on our desks yesterday it does, I believe, set out the advantages and disadvantages of a deductible under the heading "Co-insurance" and I'm not going to repeat what is there because it's quite a lengthy report but I'm in favour of the advantages as reported on page 23.

Now, Mr. Speaker, whether the government members know it or not there is already a deductible feature in our plan and I would like to refer you to a little pamphlet that I hope is still up-to-date and it's headed "Manitoba Hospital Services Plan" and it's an important information about the plan that's what it's headed I guess. Down here under the heading "Benefits Outside Manitoba" it tells you that if you happen to be outside of the Province of Manitoba if you break your leg when you're riding horseback down in Texas and you land up in a hospital that contains less than 100 beds, they'll pay \$11 a day. If you get into one of the deluxe hospitals with 500 beds you pay \$15 a day -- the government will pay \$15 a day, over 500 beds they'll pay \$18 a day and you have to pay the rest. Well that's a deductible; there's a deductible feature in it there.

MR. JOHNSON (Gimli): Mr. Speaker, before the honourable member goes further there I would advise him that that has been changed; this is what we inherited. The new scheme is in the book presented yesterday.

MR. SHOEMAKER: Yes, that's very fast service. There probably is a deductible. I don't intend to ask the Honourable Minister this question now but my guess is that if you landed up in a hospital in Texas -- we'll go back there, it's nice and warm there, as well as it gets here at times, Mr. Speaker -- and they charge \$50 a day I don't suppose the plan would pay \$50 a day in Texas, nor in Arizona or any other state.

MR. JOHNSON (Gimli): Mr. Speaker, is the honourable member suggesting we subsidize American hospitals?

MR. SHOEMAKER: No, I'm not. I'm not suggesting that at all. All I'm suggesting, Mr. Speaker, is that there is a deductible feature or clause in it presently. And then there is the semi-private -- I don't know whether that's been changed, Mr. Speaker, but if you choose or if the doctor says to you, "listen my friend, because of your condition I think that you should go into a private ward or a semi-private ward, you will have to pay if you choose to go into a private ward about \$7 a day I believe, and in a semi-private \$3.50 a day." You certainly have to pay that and I say there's nothing wrong with that. Now who do you think gets the money, Mr. Speaker? 90% of it goes to the government and probably that's the way it should be but the people of this province are not aware of that fact and I understand that something over a million dollars goes into the plan as a result of the -- well, Mr. Speaker, I don't want to get into an argument on that but it tells us in here -- I think it gives us the figures in this report. Now with the introduction of the plan, Mr. Speaker, I suggest, and I have done this before, that the attitude of the Administration Boards has changed slightly and I'm not being critical of the Boards when I make this statement, but I know from my own experience on the Board at Neepawa that to go back some 10 years ago we used to spend about half of our meeting time in going over delinquent accounts and wondering, "well what are we going to do in collecting these accounts". Today there is no problem in that regard and when we draft budgets or when we used to draft budgets ten years ago, we were pretty cautious because we knew the implications of increasing the cost of care. Today, and it's only natural that it would be so, it's a lot easier, Mr. Speaker, to prepare a budget when someone else supplies the money, and now what's to be done about it I don't know but it is a fact that the attitude of the Boards has changed slightly

(Mr. Shoemaker, cont'd.) . . . because of that fact.

Now with a deductible, and by a deductible there's literally thousands of types of deductibles that you could suggest, you could go back to the \$15 a day or \$5 a day for the first three days or any kind of a deductible you like, with a deductible plan you would once again make the local hospital responsible for collecting a portion of the bill, and perhaps that might tend to reverse the situation that I spoke about a few minutes ago and the administrative boards would then, perhaps -- I'm not saying they would -- but perhaps they would give a little more consideration to keeping their budgets down. The most recent statistics that I have heard, and I don't suppose they're up to date either, Mr. Speaker, as regards the number of people that enter our hospitals or their percentage, but the last figures that I heard of were something like this; that one in seven persons will attend a hospital this year and they will stay for seven days. Now I may be away out on that because that may be out, but that is about the figures I think. Now if the patient had to pay for one day's care, then it would appear to me regardless of what it says in there, that the patients would be paying for 1/7 of the cost of the plan, and if that's so then the premiums -- we should be able to reduce the premiums by an equal amount. Now the Minister I do believe the other night pointed out the fact that administration costs were really at a minimum; they were about 4%. Now I agree with the Honourable the Leader of the CCF Party that perhaps they could be further reduced. The report before us tells us the amount of money that has been spent in advertising and I think it was something like \$37,000 in 1959 and around \$28,000 in 1960, and it's going to remain pretty constant for the next four or five years at about \$27,000 or something like that for advertising. The Leader of the CCF Party, he isn't in his seat now but you will recall him having said, Mr. Speaker, and in his remarks was pretty critical of the type of advertising that the government were doing in this regard. He suggested that the advertisements were making the hospitals sound so attractive that you were literally dying to get in there, as I recall it. Now perhaps rather than spend a lot of money on this attractive type of advertising making it sound so good that you wanted to get there, perhaps we should use some of the money in purchasing some "get-well" cards. Now I picked one up the other day and it isn't too bad, it says, "Get well quick. Like an actor wants the limelight, like a patient wants a nurse, like a program wants a sponsor, like a jockey wants a purse and like a baby wants a bottle, like a sailor wants the sea, that's exactly just how much I want your quick recovery." Now if we could get them out of the hospital about one day earlier than they are getting out now, that is reduce that seven-day period down to six, we'd be saving another 1/7 of the cost. And I believe that the Associate Hospitals of Manitoba had a program designed to do that last year. Now here's another little get-well card and I'm not a poet or an expert on this but that little girl that writes "Under the Dome" up there is an expert, and perhaps she could be drafted to design some of these cards that I refer to. And here's another one here. You could send one out like this, "It's been a pleasure having you and we're glad to pay your bill, but hurry and get better 'cause your neighbour's really ill." Or you could have this one, "Bed space is at a premium, six thousand dollar beds are few and there's a baby born each minute and we need this bed for two." And that would emphasize that there was a shortage of beds.

The Honourable Leader of the CCF Party has dared us to vote against this sub-amendment of his, and the Honourable Member for Selkirk has already told you what transpired at Ottawa as regards the Medical Plan -- our proposed Medical Plan -- so I'm not going to touch too much on that, Mr. Speaker. And you will certainly be glad to know that I have at last come to the sub-amendment and I appreciate the fact that you haven't ruled me out of order, Mr. Speaker.

Now have you noticed, Mr. Speaker, the wording of this cleverly designed sub-amendment. It is quite obvious that it strikes out completely the operative part of our amendment. Strikes it out completely. I suggest to you, Sir, that the CCF Party has deliberately drafted their sub-amendment in this fashion so that we would have to vote against it. Now this will put them in the position to go out in the country and say, "Well the Liberals are just bluffing as usual when it comes to favouring or implementing a National Health Policy." So they've designed this sub-amendment in this fashion. I have checked the journals, the last four of them, because after all, Mr. Speaker, this is the fourth time that this sub-amendment has been brought forward. Someone said, five, I think it's only the fourth consecutive time that it has. Now I

(Mr. Shoemaker, cont'd.).....checked the journals and I found that in March 1959 Mr. Stinson then Leader of the CCF Party moved an amendment and I quote, "That the following words be added to the motion as amended." You understand that, Mr. Speaker. He added it, he added it. He added it to the motion as amended. The same motion..... Well I refer you to March 1959 Journal. Again in June -- you will remember, Mr. Speaker, we had two sessions that year and an election -- again in June 12th, 1959, the journals reveal that they moved the amendment and I quote again from the journal, "That the following words be added to the motion as amended." They didn't delete any part of our motion. And in January 1960...

MR. SCHREYER: Mr. Speaker, may I ask the honourable member a question? Would the honourable member vote for our sub-amendment if it were added to their

MR. SHOEMAKER: I'm coming to that, Mr. Speaker, if he just gives me a little time. I know I haven't too much left. Again in January 1960, just a little over a year ago, Mr. Speaker, the journals once again reveal and I quote; "That the proposed amendment be amended by adding these to the

MR. SCHREYER: It wasn't your amendment -- will you read it when you finish the Just read it.

MR. SHOEMAKER: "We also regret the failure of the government with the same type of sub-amendment." Now I will answer the Honourable Member for Brokenhead, is it? Aye, the answer is in the affirmative. I would have been prepared to vote with it with certain reservations but wouldn't we, Mr. Speaker, be the laughing stock of the country if we in this group went out and voted against our own Leader -- and that's exactly what we would be doing in this case, exactly -- because they have struck out all the words after "government", they have stricken out every operative word in our resolution -- every one. Now as I said before, Mr. Speaker, we would not only look stupid, but we'd be the laughing stock of the country if we did a thing of that kind. And it is for those reasons only, and I'd like to repeat once again, Mr. Speaker, and make it quite clear, that I am in favour of a national health plan -- a national health plan not a provincial one, one that is not compulsory. That's the kind we talked about at Ottawa. One that has a deductible. That's the kind we talked about at Ottawa. But how in the world, Mr. Speaker, can we vote against our Leader, because that's what we would be doing, and support the CCF amendment as it now stands. And for that reason and for that reason alone, is the reason that I cannot vote against my leader and vote for the sub-amendment. Thank you.

..... Continued next page.

MR. RICHARD SEABORN (Wellington): Mr. Speaker, I would like first of all to share in the compliments extended towards you. The respect for your honesty and ability is evident in this House but unlike many of the other participants in this debate I would wish you good health and a long stay in the position you now so capably fill. Congratulations are in order too for the Honourable Member from Arthur and our fair lady from Cypress for the very admirable contributions they made as the mover and seconder for the Speech from the Throne. Before moving any further I would like to add a word of welcome to our new member from Pembina, and unless anyone may feel I'm a bit biased, I would also like to congratulate the Leader of the CCF Party -- I'm sorry he's not in his seat -- for the official recognition that was given to him by the other members of his Party.

Now, Sir, I was very perturbed over the tone of the speech given by the Leader of the CCF. There were so many things that he dealt with that I was at a loss at first on which subject I would concentrate. He knows my feelings regarding socialism. I have told him that in my opinion this philosophy could not be reconciled with the Christian concept of life. Now I do not want the honourable gentlemen opposite to take anything I may have to say personally, for I feel that all parties are guilty to a greater or lesser degree for the propagation of socialistic principles, therefore what I have to say in comparing the two philosophies I feel can be instructive to all who have a tendency to consider legislation with an underlying socialistic base. I'm going to attempt to show that I am correct in stating that the two philosophies are opposed to one another and the subject of socialized medicine is as good as any to prove my point.

I think you must agree that obedience to the great truths as revealed in our Bibles has given us this great land in which we live. A true home of the free and the home of the brave. It is a free country with a free economy and together with our great neighbour to the south of us, we are the greatest and most prosperous nations on earth. The liberty which we have inherited and which made possible our great role is founded upon certain great and mighty truths concerning the living God and concerning the individual as created by God. No doubt about it, man has a relationship to God. At no time in the history of our country has liberty been in greater jeopardy than at the present time. We've fought the two World Wars to preserve liberty on the earth, yet there is less liberty than there ever was before. We participated in those wars to also protect our own liberty, and we are having less liberty in our country than we ever had before. It is indeed strange, but there is a reason for it.

The present threat to our national life so far as our internal affairs are concerned is not Communism, it is Socialism. Socialism in various forms and shades is being offered to our Canadian people in most subtle ways. One of the most deceptive and alluring to the public is this present drive for socialized medicine. It is another effort by the Socialists to have the state play God to the citizens. Let me say quite frankly that Socialism is not Christianity. It never was, it never has been, it never will be Christianity. Those who today are offering to us Socialism in the name of Christianity or in the name of Christian principles are absolutely in error so far as the plain teachings of our Bible are concerned. The Bible's concept of society is that of free men. The Bible places the entire emphasis upon the individuals. It is the individual who is at fault. It is the individual whose heart is stained with sin. It is the individual who lies, who steals, kills and commits adultery. It is the individual who must love his neighbour. It is the individual whose heart manifests hatred and envy and jealousy and is responsible for the destructive forces which we see in our social life. If these things are to be remedied, the individual must be dealt with directly and specifically. It is the Christian faith which offers us the glorious message that the individual must be and can be changed. When the individual is changed, he becomes a new citizen, then he is the salt of the earth -- salt preserves and keeps -- it is absolutely essential to society. In the last few years the concept has more and more been accepted that the State should take over the responsibility and care for its citizens. A "cradle to the grave" program is gradually being pressed upon the State. We are told in so many ways and places that with such a program society will be improved and we shall have a better order. Nothing could be more deceitful and destructive than that concept. I will ask a question. The human body: Is it the responsibility of the individual or of the State? I will answer by stating that the human body is the responsibility of the individual and not of the State.

I want to deal with this subject of socialized medicine, not from the standpoint of figures

(Mr. Seaborn, cont'd.).....

as statistics and comparison, but I want to take you back to the very heart of the question, the claim of God upon the individual and the responsibility which that individual has to his Creator. Not only does God claim our bodies by virtue of creation but He claims them by virtue of redemption and there are many, many references in the Scriptures that speak of this. I would like you to consider one in First Corinthians, Sic, Verses 19 and 20 which reads: "What? Know ye not that your body is the temple of the Holy Ghost which is in you, which you have of God, and ye are not your own? For ye are brought with a price: therefore glorify God in your body and in your spirit, which are God's." What does this mean? It means that we are directly responsible to God for the care and use of our bodies. The Holy Spirit dwells in them. Shall we therefore delegate that care to the State? Shall the State assume any measure of responsibility whatsoever for our bodies when God has so clearly stated to His people in His words that the body is His. If you consider yourself a Christian man and a Christian woman, we are dealing here with truths that you must recognize.

Now let me go a step further with you. You will have noticed that the Apostles said: "Glorify God in your body and in your spirit, which are God's." He refers to the fact that man is made up of spirit and body. There are two substances, soul and body -- both belong to God. They are not, and never can be the property of the State. For the State to lay hold on them is to steal from our Creator. We would not think of ever turning our spirit over to the care of the State for it would destroy all the freedom of the mind and the soul. But the Apostle joins the spirit and the body together as they are; you cannot separate the body and the spirit. If we are to socialize medicine for the body, why not socialize the Gospel for the spirit? If the State takes one, why does it not take the other? The truth is that when the State steps in to take care of the body, it moves on to take care of the spirit. One is closer to the other than anyone realizes. May I point out that the Union of the Soviet Socialistic Republic does both. We are completely responsible for the development of our bodies and its protection; no one else is responsible. When you feel pain you are responsible to find out what the trouble is, and because of this responsibility for your own body, you are going to follow very definite rules of health, for if you do not you will suffer. You are the one who has to pay the price, in your body, in your happiness and in your comfort. You might ask where does the State come into this picture? The State does not come into it at all so far as the nurture of your body is concerned, but the State does have certain responsibilities which are God-given. They are recorded for us in Romans 14. The purpose of the State is to preserve order and law and not to bear the sword in vain; that is to protect the life and liberties of the people. The function of the State is very, very limited in the concept that God has given us in His Book. The highest glory of the State is to preserve the freedom of the people, not to take it from them, not to put burdens upon them which will oppress them. It is just at this very point that Socialism attacks.

I want to place our finger on the very heart of the Socialistic ideology. Socialism comes in and says that the State has a responsibility for all the welfare of the people. That welfare is manifested in many ways, but at the moment, I am considering state medicine. The State comes along with the idea that in order to improve the health of everybody, we will introduce a comprehensive health insurance plan, or it could be called as it is elsewhere, a national health service. It is a program whereby people are to be compelled under the police power of the State to do certain things so far as their bodies are concerned. The State steps into a place where God has never placed it. The State comes in between God and individual in the matter of the individual's body -- and don't let anyone try and tell you that when this happens, the State is not also on the way to taking over in the matter of the spirit. You cannot separate them. The State then takes from the individual certain responsibilities that God has placed upon him. The State helps to make a more irresponsible citizen. Anything that removes man from God makes man irresponsible and immoral. When the State takes these responsibilities from the individual, the individual must look to the State and not to God. This, then is the essential anti-Christian nature of Socialism, and that is why the Christian church would be vigorously opposed to it right down to its very foundation.

The Canadian people face a decision and they ought to know exactly what the decision involves. I do not believe that any free people ever entered the gate of a collectivistic state where the price was written across the top. Only a fool would do that. It has never been done that way. The Canadian people have a decision to make as to whether we are going to remain

(Mr. Seaborn, cont'd.)..... free, go back to freedom, or whether we are going to go on into a controlled collectivistic state of a socialistic nature. The way we are led into that State is inch by inch, step by step, fraction by fraction, until this liberty is taken and that right is gone, and we finally find ourselves locked up in a collectivistic vice. That is the decision we must make. It ought to be plain; it ought to be clear what is involved in it, how it involves you, how it involves your children and how it involves the future welfare of this great country in which we live. The time to fight it is at the little inches here and there.

Why is it that many of our people are interested in such ideas such as socialized medicine? Why does it appeal to anybody? Do you know the answer to that question? The heart of man is of such a nature that he is constantly trying to evade his responsibility to himself and to his God. From the very first day he was created, man has been shifting responsibility, shifting responsibility, and again shifting responsibility. When the appeal is made to take funds from the government collected forcibly from all the people and give free medicine, men think that here's a chance to get something for nothing and they will not have to worry about medical expenses any longer. No need to take care of the body now. You can dissipate, you can abuse your body, it will not cost you a cent. You can go down to a clinic of the government and they will give you medicine to neutralize it all. The heart of man is constantly shifting responsibility. The heart of man wants something for nothing and when a deal is made which makes it seem that he is getting something without paying for it, he will grasp it, unless -- and this is a very important exception -- he fears God and loves freedom from the State's corrupt power.

When you endeavour to encourage the government to engage on a comprehensive health insurance plan, which is but a polite way of asking for socialized medicine to be made part of our socialized hospital plan, you are threatening the freedom of our doctors. Their freedom is at stake; their freedom is our freedom. It is not their battle alone, it is a free people's struggle. Many of the doctors in this country are afraid, they are frankly scared, and I do not blame them. God is on the side of freedom; the word of God tells me so, and that is how it must be dealt with if our beloved country is to be saved. If this insidious thing is going to be defeated, it is going to be defeated by men and women who love liberty and love God, and who want to keep possession of their own bodies and have the privilege of calling the doctor of their own choice, and if they do not like one doctor they want the privilege of calling another. Do you know one reason why we are continually asked to have this socialized medical insurance? It is because they say there are some neglected areas in the country where the level of society is low. They do not tell us that we have the best health of any nation on earth. Of course there are problems in needy places, but let us meet them as free men. The remedy for the threat of socialized medicine is just not some counter-proposal by the physicians. The remedy so far as the doctors are concerned is the determination to take the great principles as they see them in medicine and follow them out in their participation in and support of the historic christian faith which gave us all our freedom. "Socialized medicine" Lenin once said, "is but the keystone of the arch in the socialistic state." The appeal to the needy and their health, the emotional sentimental appeal is used to confuse the mighty issues as they concern our freedom and the freedom of our country. May God help us.

MR. SPEAKER: The Honourable Member for La Verendrye.

MR. STAN ROBERTS (La Verendrye): Mr. Speaker, I would like to take this opportunity to congratulate you and wish you well in your customary position. I'd like to offer my congratulations also to the mover and seconder of the Reply to the Speech from the Throne, and to the new Member from Pembina, my congratulations. I realize that the Honourable Member from Pembina arrived here under rather strenuous circumstances -- an election fought hardly in snowstorms and through many millions of words spoken on behalf for and against. There was one road in Pembina constituency which was not staked, I think it was the only one in Pembina which wasn't staked, between Manitou and Somerset, and the Honourable Member for Ste. Rose has lost confidence in my driving as have two members of the press who were riding with me one night when we, because there were no stakes on that particular road, got lost. The most interesting happening to me during the by-election in Pembina was the day when it was, as had been for several days, storming rather strenuously and I almost struck a surveyor on the side of No. 3 highway between Morden and Manitou, and so I stopped

(Mr. Roberts, cont'd.) and asked him if I was on the right road to LaRiviere -- which was a dirty question I must admit -- because he said I was and I said: "Why are you driving stakes in the frozen ground today in this snow storm?" as he was wiping off the lenses of his machine, or whatever they call their transit -- and he says: "Well, don't you know there's a by-election on in Pembina". I think that this situation of stakes in Pembina for the coming winter must be a great help in lighting kindling fires for the people of Pembina.

To the Member from River Heights my congratulations also for his location in the House this year. He obviously is much more successful with the ladies of the House than he is with the ladies of River Heights, whom I suspect at the present time, and have heard from very reliable sources, are somewhat annoyed with him.

On the subject of the Throne Speech and its references to medicine, I would like to make passing reference to the decision of the government to divide the Departments of Health and Welfare into two departments. I believe this is a very worthwhile move. I think a necessary move. I feel and have felt for some time that the present Minister of Health has worked very diligently and has had too much to do. Both departments, I think, will be full departments, the Departments of Health and Welfare, and so I'm heartily in favour of this decision.

The Honourable First Minister is probably not more likely to take advice from me than I am to take advice from him. However, I might point out that at a recent meeting of the Manitoba Medical Association held at the Medical College near the General Hospital, the Honourable Member from Portage la Prairie accredited himself very well speaking on medical problems and probably would make a very good Minister of Welfare. I cannot say the same for the gentleman who represented the CCF Party on this occasion because the three of us representing our parties got along reasonably well until we met the public of the association and I have a feeling that the representative of the CCF Party set the cause of socialized medicine back at least 40 years that night.

The subject of hospitalization premiums will be probably the most spoken of subject during this session of the Legislature. Much has been said; much more will be said. I think it's notable that this government which has been so anxious to show leadership on so many problems in the past have failed completely on this one. This is not a popular problem. The problem of what to do with premiums, why they go up, how much they must go up, are not popular problems. I think it's notable that no mention was made of how premiums are going to be adjusted, and I'm saying this with reference to the remarks made by the First Minister at various meetings, one of which I attended in Pembina, and regarding what he hoped to do with the premiums of the hospitalization plan. And so no mention was made in the Throne Speech on this subject, but then, of course, no mention was made either of the Manitoba Flag or the Colombo Plan or many other things that seem to be mentioned outside of the House and aren't mentioned inside of it. I hope not. I hope that this does not mean that this is a sales tax coming up because I think that the province still holds the Honourable the First Minister to the pledge he made not long ago. This across the board increase on hospitalization premiums, in my opinion, is a terrible hardship. I think that this is the problem as all are familiar and are aware of, that it hits those who can least afford to pay the very hardest, and this principle, the principle of ability to pay is lost completely.

I think that surpluses in a fund at this time are a dangerous thing. I have spoken against and continue to speak against the raising of the premium at such a rapid rate all at one time. I do not agree that a surplus in a fund of this nature is good economics. I do not believe that any person who is in a position to handle a fund of money for a specific purpose wishes to have a surplus with which to do it and still do it economically. If you are going out tomorrow to buy a new car and you have a surplus of money to buy it with, you're going to buy all these extras that come with the car, but if you have to operate on a tight, tight budget, then I'm sure that you will buy the standard model which will operate just as long and just as well without all the frills. This principle can be applied to the buying of all sorts of equipment. It can be applied to the handling of hospital equipment and it can be applied to the salaries that are paid to people who work for hospitals, and it can be applied to all the expenses that are associated with the hospitalization plan and for this reason chiefly I do not believe that a surplus should be built up in this fund at this time in order, presumably, to offset what may be a shortage later on.

The forecast in the past and up until just now has been that the hospitalization plan would

(Mr. Roberts, cont'd.)..... increase the cost of it at the rate of about 10% a year. Now it appears that the rate of increase of the hospitalization plan will be closer to 15%. I hope this just doesn't mean loose purse strings. I hope this just doesn't mean that not a tight enough rein is being kept on the cost of operating the hospitalization plan, for I feel that these things as we all know can run away, and they can run away all the quicker, more quickly, if there happens to be a surplus in the fund and everyone knows that surplus exists.

Another remark made by the Honourable Minister of Health and Welfare when he was speaking on Friday on this subject, he suggested that the hospitals were in danger of losing their local autonomy. I feel that this is worth mentioning, particularly in view of the fact that not long ago the Honourable Minister of Education said that our school boards, and the Honourable First Minister himself within the past month or so, as reported, said that the school boards of Manitoba were in danger of losing their autonomy. I think that these are dangerous.....

MR. ROBLIN: Mr. Speaker, I really don't think I said that.

MR. ROBERTS: The Honourable First Minister was reported by the Manitoba Farmer's Union as saying to them that because the education plan was running away in costs then the First Minister felt that the government, if this continued, would have to step in and cut -- to take away some of the autonomy of the school board in order to -- (Interjection) -- I'm sorry I didn't bring the quotation with me. The Honourable the Minister of Education was reported in speaking to the school trustees, and I read it in this House last year this very subject, of how you said at that time that if this cost kept running away from the school board, the cost of keeping up the education plan, then the Department of Education, the Minister of Education would have to take away some of the autonomy.

HON. STEWART E. McLEAN, Q.C. (Minister of Education) (Dauphin): Mr. Speaker, on a point of privilege, I never made any such statement.

MR. ROBERTS: I read it on the record last year, and I'll read it back again before the estimates are through. Oh here's the Minister of Health now. The Minister of Health said on Friday that the local hospital boards were in danger of losing their autonomy. I hope he doesn't deny this statement too because this one I can dig up in a minute, and these are all particularly interesting statements in view of the progress report of the Municipal Enquiry Commission, the Fisher Commission, which states point blank in its progress report that in any re-organization of local government it is to be hoped that the autonomy and responsibilities of local government will be increased rather than diminished.

On the subject of Medicare which has received a great deal of attention lately, I wish only to say that the philosophy of the help to those who need help is sound. Unfortunately, the difficulty of Medicare as we all are aware is that in order to be a recipient of Medicare you have to apply through Social Assistance. How about the thousands and thousands who are in need of Medicare and who do not wish to lower their pride. I think this is a very serious problem. So while I wish to congratulate the government for bringing Medicare into the province, I would like to point out also that this is not, in my opinion, the whole answer. Because all the people who live in Manitoba whether they are indigent or whether they are marginal cases and not eligible for Medicare, have the right to the very best of medical care, and if we are going to provide the equality of opportunity to every person in Manitoba, that opportunity to the very best of education which they have the right to, then we should also provide to them the opportunity for the very best of medical care. Well, what is the best way to get a sound medical care program. In my opinion it is to vote Liberal at the next Federal election.

MR. CAMPBELL: Hear! Hear!

MR. ROBERTS: The federal plan as mentioned yesterday by the Honourable Member for Selkirk embodies the very most important principles of a prepaid medical insurance plan. And that is, first of all, that the greatest burden of the cost of it falls on those who are best able to pay for it. -- (Interjection) -- Best able to pay for it.

MR. DAVID ORLIKOW (St. John's): I've been trying to, I can't.

MR. ROBERTS: I have a copy right here; I'll give it to you. The freedom of the doctor, the freedom of the patient and the fee for service basis upon which the medical plan as drafted by the Liberal Party, federally, make it the most logical and the most forward looking medical plan that has been proposed. I think that an opportunity to show some leadership exists today

(Mr. Roberts, cont'd.)..... for the Government of Manitoba. I think the Government of Manitoba should pay a great deal of attention to the sub-amendment as drafted by the CCF Party. I think that an opportunity to draw up a medical plan and to propose it and to promote it on a Federal-Provincial basis is one which should be seriously considered.

I think that we have an opportunity as Manitobans to look around the world and to see the plans that are being used in other countries. We have this particularly great opportunity of judging others which have not been successful in all the things that we want preserved in our plan, and we have the opportunity of looking into other countries, and I'm thinking particularly of countries such as Sweden and Australia which have developed plans which contain in them the very finest parts of the freedom of the individual which we wish to include in a plan. And so I would like to urge the government today to pay very great attention to the amendment -- sub-amendment as drafted by the CCF Party.

However, Mr. Speaker, I would like to speak briefly on a subject raised by the Honourable Member for Gladstone, in that, in my opinion, sincerity is the greatest single quality of a politician. Unfortunately all politicians are not sincere. If a politician has a cause which he espouses and which he sincerely wishes to come true, above all else then he in sincerity encourages all people and all members of this House to vote for it. Otherwise it will never come true. If, however, for reasons of his own, he discourages other members to vote for his cause so that if they do, then they do vote for it, then it is no longer his exclusive cause and actually becomes closer to reality, then in my opinion, he is insincere in his cause. I feel that the greatest evidence of insincerity which I have seen since entering this House has just taken place. As has been explained by the Honourable Member for Gladstone, each year for the last four sessions, the previous Leader of the CCF Party and the present member of the CCF Party have brought in sub-amendments to the Liberal amendment presented by the Leader of the Opposition. -- (Interjection) -- I'm coming to that! Now, for the first time, the Liberal Party here is in a position to vote for your amendment - a medical plan.

MR. ORLIKOW: I decline.

MR. ROBERTS: The Liberal Party of Canada has gone on record, and all of us, most of us were at the Ottawa convention. The Liberal Party of Manitoba is preparing itself -- the Liberal Party of Manitoba is preparing a policy on this matter for the April convention and it is well known to the Honourable Leader of the CCF Party that I am a supporter of prepaid medical care, properly and duly set up. And so for this reason we as a group are now in a position to support an amendment calling for medical insurance, and the CCF Party Leader is perfectly well aware of this. So what was done? The sub-amendment was drafted in such a way as to make us look foolish to vote for it. In the last three sessions as has been pointed out, the sub-amendment was drafted in a manner so that the sub-amendment was added to the amendment made by the Leader of the Opposition. This year the sub-amendment was worded in a way deleting all the words of the amendment of the Leader of the Opposition. The very deletion of the words make the sub-amendment impossible to vote for, because voting for the sub-amendment would mean that we as a party were not prepared to support the Leader of the Opposition's amendment which reads: "This House regrets that your Honour's government with many of its pre-election promises unfulfilled has added greatly to the burden of Manitoba taxpayers both provincial and municipal and at the same time has drastically increased the provincial debt". I ask you, Mr. Speaker, does the Leader of the CCF Party not agree with our amendment, that he couldn't attach his own on the end of it. I ask you, did he not deliberately set his sub-amendment, deleting our amendment so that he would put us in a position so that in order to vote for his sub-amendment we would have to vote against our own amendment.

MR. PAULLEY: Mr. Speaker, on a point of privilege, it seems to me I allowed my honourable friend, on one or two occasions, to, in a vale sort of a manner, to accuse me and my party of insincerity. But I chose to use those words because at that time I did not want to raise any point of privilege. I know full well that my honourable friend is in a campaign and I allowed the choice of his words to go on realizing that. But, Sir, I want to object, most strenuously, to the last inferences that this sub-amendment was produced the way it was and the deletion of the motion of the Honourable Leader of the Opposition had any influence on it at all. There are parts in the honourable leader's motion which are not acceptable to we of the CCF, and I would suggest to the honourable member who is speaking at the present time

(Mr. Paulley, cont'd.).... that he refer his remark directly to the sub-amendment. It will be revealed what our stand is in respect of the amendment at the time that it's under consideration for a vote. I regret very much, Mr. Speaker, that my honourable friend is taking this attack on us.

MR. SPEAKER: Are you through with the speech?

MR. ROBERTS: Yes, I have completed my speech. I have completed what I wished to say, Mr. Speaker, on this occasion on it. We'll have an opportunity to speak on the amendment itself during the I have no opportunity of voting for your sub-amendment, as you know. If I had the opportunity of voting for your sub-amendment, I, as many other members of my party, would be delighted to do so.

MR. SPEAKER: The Honourable Member for Logan.

MR. PAULLEY: Mr. Speaker, might I just direct one question at the honourable member who has just spoke? Then in your opinion simply because we will not accept all of the, the whole of your amendment, then you're going to vote against us.

MR. ROBERTS: I would also answer that by asking you a question. Do you believe that the Government of Manitoba has fulfilled all of its election promises, has not increased the burden to taxpayers, both provincial and municipal, and has not drastically increased the provincial debt which you have deleted from the whole amendment?

MR. PAULLEY: Mr. Speaker, in answer to that, if I may, I may say that any forward looking government in the Province of Manitoba at this time would have to increase the provincial debt.

MEMBERS: Hear! Hear!

MR. SPEAKER: The Honourable Member for Logan.

MR. L. HARRIS (Logan): Mr. Speaker, I would like to extend to you my best wishes in your high office. But gather your flowers as you may, because after the founding convention of the New Party, you won't be there too long. I also wish to congratulate the mover and seconder in Reply to the Speech from the Throne. I wish to give welcome to our lady member from Pembina and wish her well in this House.

Now, Sir, I will go on to comprehensive medical care. It is in the thoughts of the average Manitoban because of the high cost. The average man feels we could have complete coverage for one-third of what it costs today. For example, Mr. Speaker, I have the Manitoba Hospital Plan, the MMS plus a medical insurance at work, the total cost of the three is \$232 per annum. Now, Mr. Speaker, I do not ask for something for nothing; I am willing to pay for it but not through the nose. Eight countries have enacted legislation prior to 1900 and 44 countries followed suit at various times up to '57. This shows clearly that Canada and the United States remain in splendid isolation as the two richest countries in the world still without health insurance. Mr. Speaker, I would like to give you some facts on the British National Health Service Plan. Some of the main facts about the NHS, as I will call it from now on in, need to be stated. It is, of course, not free. The estimate cost for 1959-60 is 2 billion, 300 million dollars. This will be met by a direct contribution that will bring in 110 million pounds. For instance, men 18 and over pay 33 cents a week of which 11 cents is paid by the employer; in small part by charges payable for drugs and for such things as elastic stockings and dentures and in great part by the transfer of 563 million pounds from the general taxation revenues. In the total, the cost of the NHS works out roughly to \$45 a year for each man, woman and child in Great Britain. This means that Britain is spending about 3 1/2 % of the gross national income on health -- about the sum she spends on education. That much said, it should be emphasized that the full medical care under the NHS is the unqualified right of every Briton, whether he has paid a penny or not. There is no compulsion and little regimentation. Everyone 16 year of age and over can choose his own doctor. A doctor can decline a patient; a patient can phone ahead for an appointment and get it. He can call the doctor to his home if necessary. A patient can call in a doctor who practises entirely outside the NHS; or he can become the private patient of a doctor who practises within and without the service. Machinery is available for patients to register complaints against doctors with the Minister of Health. Complaints average one mild one a day, one serious complaint a week. If a complaint is found to be justified, action is taken by the British Medical Association's disciplinary bodies. Doctors practice in complete clinical and professional freedom, but they cannot buy or sell their practices. And they can establish themselves

(Mr. Harris, cont'd.).... in an area only after consultation with the governing authorities. The term "socialized medicine" annoyed the Ministry of Health, the British Medical Association and individual doctors almost as equally. In discussing the NHS with at least 100 people from all classes I never heard the word used. It puzzles Britons that in Canada and in the United States ignorance of the NHS is so widespread that opponents of state medicine are still able to suggest the British scheme is in some way politically oriented. "Do you speak of socialized education, socialized police forces, socialized atomic power stations?" one Englishman said. No one party, no one political party in Britain can seriously claim individual credit for the present NHS. All parties have played a part in its evolution, are committed to it and accept it wholeheartedly. Although some sections of the BMA -- one talked of a strike. It was mainly over money, not principle. Although the present comprehensive health service has been in operation only 12 years, Britain has in fact had a national health service for 47 years, the historic panel system. Now, Sir, I would like to say when I was there, 40 years ago I would say, on this panel system, we had a doctor, and all I paid for that doctor during that time was two cents a week, and in that two cents there was free drugs. Now some of these things ought to be commended, and some of these things, I think, we should bring home to ourselves in this Canada of ours. What has been done in other countries across the world? We've heard here today people condemning this and condemning that. Our people don't ask you for anything for nothing. Like I said here, we are willing to pay for what we have, but we want, what we want too, and maybe the doctors think that we are trying to dominate them in any sense or form. I don't think so. That is a fear that has been removed from the doctors in Great Britain. There are doctors there that have dedicated their lives to the care of the people, and I know that you have some doctors that come away and give bad impressions, but that doesn't go for them all.

In 1913, David Lloyd George, the Chancellor of the Exchequer, gathered up the various private group plans started by the trade unions and large employers of labour here in the previous 25 years, and introduced the National Health Insurance Scheme. This provided a general practitioner and drug service to medium and low-paid workers; their dependents were not covered. The British Medical Association was actively hostile to that scheme, almost as Canadian and American Medical Associations are hostile today, nearly 50 years later, to the incipient national schemes in North America. The British doctors are individuals, however, and accepted the panel scheme in 1913 and made it work satisfactorily. For the first time all doctors had a measure of financial security. It shows that the NHS doctors, as a group, swamp all other professional men in the earning power at the age of 50. Consultants, that is specialists without working through the hospitals, topped the craft with an average of 3,400 pounds at the age of 50. General practitioners average 2,400 pounds. In the other professions at the age of 50, lawyers average 2,200 pounds; professors 1,900 pounds; engineers 1,400 pounds, architects 1,250 pounds. The Manchester Guardian slyly contrasted the quiet reception of the report received from the profession with the emotional dispute over the pay that had led to the appointment of the Commission three years earlier. Most of the disputes that remain between the doctors and their employer -- to use another term not favoured by the profession -- lies in the field of providing the public with even better health service. Progressive G. P.s want their maximum list of patients to a doctor cut eventually to 2,500 patients from the current figure of 3,500 without loss of income to enable them to spend more time with a patient, or rather more time with cases that might repay more reflective study. Also to give them more opportunity to keep up with the constantly changing medical schemes. The national list average is currently only 2,270, though of course this figure represents the United Kingdom as a whole, and includes such diverse regions of Birmingham and the Hebrides. Thank you very much ladies and gentlemen.

MR. S. PETERS (Elmwood): Mr. Speaker, first of all I would like to offer my congratulations to you seeing you in your seat again, but I've heard many here offer you congratulations from this side of the House and the other, and some of them said they would like to see you in for a very long time or hope to see you there, and on this side you're going to be there a very short time. That brought me back to the very first session that I sat in, the First Session of the 25th Legislature, and the big hassle and hullabaloo that we had that day about you taking your Seat, and I thought, being a new member at that time, at last we're going to

(Mr. Peters, cont'd.).... have a permanent speaker. I was hoping that by this time we would be able to congratulate the Speaker and say to him: "Well, you'll be there till somebody up above calls you." I'm sorry to say, Sir, that that is not a fact yet. I would also like to congratulate the mover and seconder in reply to the Address of the Speech from the Throne. I'd also like to welcome the new Member from Pembina.

Now, Mr. Speaker, there's been a great deal of talk on our amendment. Why some people think its good and some people think it isn't. Some people say that we should have a voluntary insurance plan. That would be fine if it would work, and if the people could afford it, but I have a case here of a person that is covered by a private insurance company for supposedly a comprehensive health plan, and in the policy they will be covered for the basic fee of the Manitoba Medical Association and that goes very fine when you go to your own general practitioner, to your own family doctor, but when you have to go to see a specialist or somebody else, then they forget about the basic fees of the Manitoba Medical Association. The insurance company pays \$10.00 for a specialist. The person has to go to see a specialist -- they go to see him, they get a bill -- paid on your behalf by the insurance company, \$10.00; you owe me \$5.00. That's private enterprise and private insurance. Now, Mr. Speaker, there are many things that have been said about hospital plan, health plan in different places, and I would like to make a few remarks. In my opinion the biggest costs of a comprehensive health plan is hospitalization and drugs.

We've had a series of articles in the Free Press in the last few weeks about the cost of drugs. If you remember, Sir, last year I mentioned those facts here in this House of the high cost of drugs that was brought out by the Kefauver investigation being held in the United States. That didn't seem to impress anybody in this House. I would like to read, Sir -- and this was published in February of 1960 from the Packinghouse Worker -- a publication published by the Local Union that I belong to: "The staggering profit figures on the U.S. drug industry recently spotlighted by the Kefauver Committee roused many Canadians to demand the facts about the prices they have to pay for prescription drugs in this country." The International Union of Electrical Workers District 5, for example, wrote to the Prime Minister Diefenbaker demanding an inquiry under the Combines Investigation Act and many other organizations have taken similar action. The Minister of Justice has tried to spread some oil on these troubled waters by announcing the instigation of such an enquiry, but these proceedings could drag on for months and years and at the end of it all it is unlikely even that most shocking figures produced would result in any action which could benefit our sick people. Price controls are the obvious short term solution with the eventual goal of the equivalent of the British Health Plan under which prescribed drugs are dispensed without cost to the patient, the only charge being one shilling, about 12¢, for the bottle. Until that day comes we must contribute to a swollen profit of the drug companies, financing their mammoth advertising and public relations programs, not to forget the dividends, while we pinch our pennies on the food budget to pay for the lifesaving drugs we need. What to do? Firstly we have to realize that most drugs are available either by their brand name or their generic -- and that was a new name to me -- and in brackets here it has the scientific name so now I know what I'm talking about. The only difference between the two is the name and the price. Take for example that bottle on your bathroom shelf containing a cheap acetic acid tablet, if it has a label saying aspirin you probably paid 70¢ for 100; if it has the other label on you pay 25¢ for 100; and it goes on, Mr. Speaker, to list the different drugs, and I'm not going to bore the House by reading out the list. I could stay here for an hour reading out the list but I thought that it would be of some interest to some of the members in this House.

Now, Mr. Speaker, I would like to say a few words in regards to hospital insurance and some of the points that were brought up here by the different members and the national health scheme that was discussed by some of them. The Honourable Member from Selkirk, he's not in his seat now, said yesterday, that he was at Ottawa and that they had discussed this and that they were going to bring in this health plan when Canada was ready for it. I gave that quite a lot of thought, Mr. Speaker. Then somebody on the other side of the House said the CCF - they have a crystal ball. Well, I looked into my crystal ball, Mr. Speaker, and I analyzed the Honourable Member from Selkirk's remarks and I looked in my crystal ball and the crystal ball says - "That plan will be a platform of the Liberal Party the day after the

(Mr. Peters, cont'd.)..... next federal election is announced". It isn't now, but it will be then. Another thing, Mr. Speaker, with private insurance plans for health, if the head of a family dies, that insurance dies with him. His family is left stranded; he could have been paying into it for years. I know of many cases where this has happened and it's a strain on the family. Now the Honourable Member from Neepawa, he said he would put in a deterrent charge -- (Interjection) -- Gladstone - I'm sorry Sir if I erred in the name of this constituency, but I would say this, that I disagree with him wholeheartedly, because the one reason that we fought for hospital insurance is that it was a right of everyone to have it regardless of their position or financial standing. Now people cannot, many people in the lower income bracket, cannot afford to pay for this hospitalization premium that we have now. Then on top of it you put a deterrent. The person gets a condition where they should go to a hospital and probably have a slight operation or some hospital care; he doesn't go to the hospital because there is a deterrent charge. Finally his condition becomes worse and worse till eventually he's got to go into the hospital as an emergency case and has to spend probably three or four or five times as long in the hospital as he would have had he gone into the hospital immediately.

Some questions that have been asked of me, Mr. Speaker, in my constituency, is people that are sending their children to school to be educated and they become at the age of 19, they immediately have to dig up another \$3 a month for that child. It's hard enough for them to try and educate that child then they've got to dig up another \$36 a year for hospital insurance. That's bad enough, but in many cases, where people are trying to educate their children, if there are two, which makes it that much worse, I think that the Minister of Health should take note of and see that it's remedied immediately. Another point that was brought to my notice is people paying their hospital insurance and become unemployed and go on unemployment insurance and can't afford to pay their premium. What happens? They eventually have to pay it or they won't -- they'll be prosecuted or something will happen, but if they're delinquent in their payment, they're not eligible for hospital care, if they need it -- they're penalized 30 days or whatever it may be.

Another thing, Mr. Speaker, is standard ward coverage -- that's the coverage that we are allowed under the Hospital Plan. You can have semi-private if you have the money, or you can have private if you wish -- and I understand if you go to the hospital as an emergency case, wherever they put you that will be covered by the Hospital Plan -- but if they decide to move you into a public ward or a standard ward and you refuse to go, then you have to pay the full cost. But that's not my argument. My argument is this, Mr. Speaker, that having to go to the hospital for a hernia, a person goes there and tells them he wants standard ward coverage. They tell him - "We haven't any room, you'll have to go on the waiting list.". But the minute that he says, "Well, I'll take semi-private", they've got room. I don't think that's fair, Mr. Speaker. There are hospital beds empty. I was in the Misericordia Hospital myself not too long ago visiting a fellow and there was about ten beds in a ward that were empty. Still if you went there and asked for standard ward, they didn't have it, but if you were willing to pay the extra money, they would let you in. That is something, Mr. Speaker, that I think the Minister will look into.

One other point I want to make here is, I think it was the Honourable Member from River Heights, that said the economy couldn't stand a national health scheme. Maybe it wasn't, but he went on to remark about what my Leader had said, that we're spending too much money for defence and he went on to say that we had to have this money for defence so that we could throw back more at whoever was going to throw at us. But, what are we going to throw? Go out to Bird's Hill and get a handful of gravel and throw it at them. We haven't got anything to throw at anybody. Let's not kid ourselves. The Honourable Member from St. Vital read out from the Canadian Medical Association program -- I think it was Clause VI - "That each patient has the right to have all information pertaining to his medical condition kept confidential except when the public interest is paramount.". I think he said that. Well, Mr. Speaker, here, and this is a publication of July - August, 1960 - Canadian Labour, official journal of the Canadian Labour Congress, and it says: "MD's violate ethics code. Doctors employed by the industry violate the codes of ethics by supplying management with confidential information on the health of employees, Toronto and District Labour Council delegates have charged. Murray Cotterell, Publicity Director of the United Steelworkers of America, told the council

(Mr. Peters, cont'd.)..... his union had evidence that this information is given to employers without permission of the employees in some sections of Ontario. Cotterell's statement came after the Council's Welfare Services Committee outlined the Canadian Medical Association Code of Ethics for industrial physicians. One clause forbids the doctor from divulging confidential medical information without employee's consent. Don Montgomery, the Steelworkers' Toronto area supervisor suggested employers have a good deal to say over doctors they employ. The company puts the finger on the doctor and all the ethics are for naught, added Bert, Steelworker representative. Montgomery cited the case of a Toronto firm which fired its doctor when he protested that the company's rising accident rate could be traced to an efficiency drive." So there, Mr. Speaker, I don't think that the Code of Ethics of the Canadian Medical Association holds much water.

I see now, Mr. Speaker, it is 5:30 and I think Mr. Speaker, may I call it 5:30?

MR. SPEAKER: I call it 5:30 and leave the Chair until 8 o'clock this evening.