

Nees.

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| Mr. Abbott | Mr. Manning |
| Mr. Ackland | Mr. McLarty |
| Mr. Brand | Mr. Nalder |
| Mrs. Cardell-Oliver | Mr. Nimmo |
| Mr. Cornell | Mr. Owen |
| Mr. Doney | Mr. Perkins |
| Mr. Grayden | Mr. Read |
| Mr. Griffith | Mr. Thorn |
| Mr. Hearman | Mr. Watts |
| Mr. Hill | Mr. Wild |
| Mr. Hutchinson | Mr. Yates |
| Mr. Mann | Mr. Bovell |

(Teller.)

Question thus negatived; the motion defeated.

House adjourned at 11.1 p.m.

Legislative Council.

Thursday, 2nd November, 1950.

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The PRESIDENT took the Chair at 4.30 p.m., and read prayers.

BILLS (2)—THIRD READING.

- 1, Acts Amendment (Allowances and Salaries Adjustment).
- 2, Roads Agreements between the State Housing Commission and Local Authorities.

Passed.

BILL—FAUNA PROTECTION.

Recommittal.

On motion by Hon. J. G. Hislop, Bill re-committed for the further consideration of Clause 20.

In Committee.

Hon. J. A. Dimmitt in the Chair; the Minister for Agriculture in charge of the Bill.

Clause 20—Authority of wardens:

Hon. J. G. HISLOP: The amendments I have on the notice paper are designed purely for the purpose of arranging that when a search is made, as a result of action by a justice of the peace, it shall be carried out by a warden who is a member of the Police Force. I move an amendment—

That in line 16 of paragraph (a) of Subclause (3) the word "the" be struck out with a view to inserting the word "any".

Hon. G. FRASER: Is it the hon. member's intention to remove any power of search from the wardens, not only with respect to a house, but any place?

Hon. J. G. Hislop: Only after a justice of the peace has decided that a search shall be made.

Hon. G. FRASER: The hon. member has left complete power for a warden to commandeer anything that is showing, but not to go any further?

Hon. J. G. Hislop: Yes.

The MINISTER FOR AGRICULTURE: I strongly oppose the amendment. Dr. Hislop proposes that a search warrant shall be executed by police officers only. Let us take the position that has existed over the last few years with fisheries inspectors. Those inspectors have the right to go in and make searches, and there has never been any complaint about them. I would sooner have my premises inspected by a public servant—in this case the warden—than by some young police officer. The provision has acted well in connection with the Fisheries Act, and it should be carried out in regard to fauna. It is not proposed that any honorary warden shall have these powers, but fisheries inspectors will be ex officio wardens. It would be most inconvenient running around looking for a police officer, and I hope the Committee will not agree to the amendment.

Hon. J. G. HISLOP: I want some further explanation from the Minister. Does it mean that after a justice of the peace has ordered a search, a fisheries inspector has power to search?

The Minister for Agriculture: Yes; as it is now under the Fisheries Act. They have power to search at any time after a justice of the peace has ordered a search.

Hon. J. G. HISLOP: If that is so and it is done in one section of the Fisheries Department, then there is no use in asking for an alteration in another part. Therefore, I ask leave to withdraw the amendment.

Amendment, by leave, withdrawn.

Bill again reported without further amendment.

Reports adopted.

AGENT GENERAL.

Visit of Hon. W. H. Kitson.

THE MINISTER FOR TRANSPORT: We have with us this afternoon an old and honoured friend in the person of the Agent General for Western Australia, Hon. W. H. Kitson—a former Leader of this House. He is re-visiting the State, and it is with much pleasure that I move (without notice)—

That as Hon. W. H. Kitson, Agent General for Western Australia in London and a former Leader of Legislative Council, is present, he be invited to occupy the chair on the dais.

THE PRESIDENT: I have much pleasure in endorsing those remarks.

Question put and passed.

THE PRESIDENT: I shall suspend the sitting for a few minutes in order that members may meet the Agent General.

*Sitting suspended from 4.45 p.m.
to 4.55 p.m.*

BILL—HEALTH ACT AMENDMENT.

Second Reading.

Debate resumed from the previous day.

HON. H. K. WATSON (Metropolitan) [4.56]: I intend to support the second reading of this Bill. I cannot say that I agree with that part of it which proposes to introduce compulsory x-ray examination on a mass basis for the citizens, or any class of the citizens, in order to discover whether or not they have tuberculosis. So far as migrants are concerned, I feel that in the same way as they are examined under the Quarantine Act for smallpox or any other disease, so they should be subject to an examination for tuberculosis.

At the same time I do feel that in order to meet the necessity for examining migrants, particularly migrants from Southern European countries, that can be attended to under the Quarantine Act of the Federal Parliament or, if necessary, under this Act. In order to achieve that aim, it is wholly unnecessary to bring about and provide by legislation for the compulsory examination of the citizens of Western Australia. We find the voluntary system of examination is working extremely well.

In reply to some questions, which were asked by Mr. Baxter a few days ago, we learned that during the year ended the 31st December, 1949, over 31,000 people submitted themselves for voluntary examination, and since the scheme has been in operation no less than 83,000 have likewise submitted themselves for examination. I feel that those figures indicate that the existing law of voluntary examination is working satisfactorily and requires no further extension, particularly in view of the fact, if I understand the position correctly, that facilities for treating T.B. are at this moment taxed to the utmost.

If the compulsory examination provision is carried, there is one respect in which it might be modified and that is to give effect to the request of a religious denomination known as the Christian Scientists. Members know that it is one of the fundamental religious beliefs of Christian Scientists that diseases should be cured by spiritual means rather than material or medical means. We may have our own personal opinion as to the efficacy of these beliefs, but I do feel we should respect them. Just what would happen to a Christian Scientist if he got tangled up in a motor car accident, and what he would do in a case like that I do not know. But that is beside the point. As Mr. Strickland reminded the House, Section (c) of Article 55 of the United Nations Charter holds that the united organisation was to promote universal respect for, and observance of, human rights and fundamental freedom for all without distinction as to race, sex, language or religion.

Hon. E. H. Gray: What about the menace to other people?

Hon. H. K. WATSON: Human rights should be respected. It is one of the essential beliefs of members of this sect that they heal themselves or their colleagues by the exercise of mind over matter. Regarding the point raised by Mr. Gray, I would explain that the amendment I have placed on the notice paper provides that every such person shall be liable to take all such precautions and do all such acts and things as the Commissioner may at any time require or direct for the purpose of avoiding infection by tuberculosis or the likelihood of his infecting other persons. I also point out that, under the existing provisions of the Health Act, any person who is suspected of having tuberculosis may be required to submit himself for medical examination. Therefore I consider that there should be no compulsory examination, but if compulsion is to be introduced, we should respect the religious susceptibilities of our people or some of them.

It seems to me that a proposal to have a mass examination of the people is by no means likely to save the country from or necessarily prevent the spread of T.B. I should like to read an extract from an address which was delivered by Dr. James F. Brailsford, founder of the British Radiological Association and X-ray Director at Birmingham (England) Hospital as follows:—

Cheap mass examinations of those who have no symptoms are foolish. If a chest examination of someone who feels well shows a suggestion that something is wrong, there is always a temptation to do something about it.

Over 20 per cent. of the population has had some attack of tuberculosis and recovered without knowing anything about it. If they had been

x-rayed at a particular time, some small signs would have showed up and all their social contacts might have been disturbed, even their relations with their neighbours.

Moreover, mass examinations give a false sense of security. A few days or weeks after the examination discloses nothing, a real trouble may develop but, because of having been given a clean bill of health, the victims disregard real symptoms.

Mass examinations cannot be accurate; the results being that scores may be worried unnecessarily and all their plans for life disturbed without reason.

Hon. E. H. Gray: Why did the Services adopt compulsory examinations?

Hon. H. K. WATSON: I am informed that, although the Services carried out mass examinations, many members on their return from the war were found to have T.B., and this was not disclosed by the examination to which they were subjected when they enlisted. This goes to support the statement by Dr. Brailsford that I have just read. We should have regard to the existing provision in the Act, that if anyone is suspected of having T.B., he may be required to undergo medical examination. Bearing that in mind, and having regard to the people's response to the appeal to undergo this examination voluntarily, I consider that this House should not do something that will further restrict the liberties of the subject by compelling him to undergo this x-ray examination.

HON. L. CRAIG (South-West) [5.5]: The principal part of the Bill is that which has been discussed by Mr. Watson, namely, whether or not members of the community generally should, under pressure, undergo examination for tuberculosis. The Commonwealth Government has publicised the whole country with a view to encouraging people to take steps to help the department to wipe out this white plague. If this plan is to be successfully carried out, the co-operation of every person will be required, and I feel that no one individual should be permitted to prevent the plan from being effectively carried out. People suffering from leprosy, irrespective of what their religion may be, are compelled to submit themselves to treatment. Similarly, people who are found to be suffering from venereal disease are compelled to undergo treatment.

Hon. N. E. Baxter: Provided they are found out.

Hon. L. CRAIG: That is so. Consequently, I say that people who are suffering from T.B. should not be permitted to be a menace to the rest of the community.

Hon. H. K. Watson: That is provided for in the existing law.

Hon. G. Fraser: How could you suspect anyone of suffering from the disease?

Hon. L. CRAIG: When the country is undertaking work involving the expenditure of millions of pounds to fight this greatest scourge of all, we should not permit a few individuals to mar its success. Those who would resist examination would be those who might have the disease; the healthy person would not resist it. It is the person who feels that he might have the disease and is afraid of being segregated that would resist examination.

We are taking tremendous steps in the hope of wiping out tuberculosis. All the cows in the country from which milk is supplied to the metropolitan area are being examined in the hope of preventing the spread of this scourge. I do not think it would be of much use examining the sources of food supply unless we eliminated the risk of contamination by human beings handling food. There might be only one or two, but I ask whether they in a community of many thousands should be allowed to resist the attempts of the community to wipe out this dread disease.

I have questioned various prominent physicians on this point and the answer has been, "I think every one should be compelled, if necessary, to submit to this examination." I am not at all sure about the attitude of the B.M.A.; nor are the physicians whom I have consulted. If we are going to do anything at all, we ought to do it properly and not allow one or two people to resist the attempts of the whole Commonwealth to wipe out the disease. I respect the scruples of other people, just as much as does anyone else, but should a few be permitted to be a menace?

One might as well argue that a sufferer from leprosy should be allowed to decline examination. He might reason, "Once it is known that I have leprosy, I shall be shunned by everybody." That might be so, but is it sufficient excuse for such a person contaminating perhaps a hundred other people? It is not, and the few have to give way to the needs of the many. This is too important a matter to permit of a very small minority resisting the attempts of the whole community to wipe out this scourge, which is the greatest menace threatening us, when only by proper attention and treatment can it be eliminated or practically so.

Reference was made by Mr. Watson to the x-ray examination of servicemen. He said that it had not proved to be 100 per cent. effective as some of them had returned from the war with lungs affected. Of course nobody would expect such examinations to be 100 per cent. effective. Another point is that the disease could have been contracted at the war. Even if the percentage of effectiveness was not 100, surely it would be better that it should be 99 than that it should fall as

low as 70 per cent! Everything we can do to clean up this scourge should be done, but no one or two or three people should be allowed to thwart the attempts of the community to combat the disease.

HON. G. FRASER (West) [5.12]: I support the second reading of the Bill. The only part on which I wish to speak is the one that has received attention this afternoon, namely, the provision for compulsory x-ray examinations. I appreciate the speech of Dr. Hislop on the question and was interested in the letter giving the opinion of the B.M.A., one portion of which stated—

It would be to the advantage of the health of the community if every person were x-rayed.

I do not propose to enter into any argument as to whether this means the examinations should be compulsory or voluntary, but we should take notice of the advice that has been given to us and decide whether these examinations shall continue to be voluntary or shall be made compulsory. Dr. Hislop laid stress on the point that compulsory examination would destroy the confidence existing between patients and their medical advisers. I cannot see any connection at all between that and compulsory x-ray examinations, because it would not be the patient's medical adviser who would make the x-ray examination or have anything to do with it.

Hon. L. Craig: There is the agreement between the Commonwealth and the States for these examinations.

Hon. G. FRASER: I am dealing with the phase mentioned by Dr. Hislop.

Point of Order.

Hon. J. G. Hislop: On a point of order, Mr. Craig stated that apparently x-ray examination was mandatory under the scheme between the Commonwealth and the States. Could we have proof of that?

Hon. L. Craig: We have proof in the Minister's statement.

Hon. J. G. Hislop: Can we be assured of the nature of the Minister's statement?

Hon. L. Craig: I am repeating what the Minister for Health said in another place, namely, that it was an integral part of the agreement between the State Ministers and the Federal Minister that there should be compulsory x-ray examinations. I take it that the statement by our Minister for Health can be relied upon as being accurate.

The President: Are you satisfied, Dr. Hislop?

Hon. J. G. Hislop: Yes; I wanted to know and shall probably refer to it later.

Hon. G. Fraser: I would point out that in the case of many agreements reached between the States and the Commonwealth the representatives of the States agree with the Commonwealth, but that agreement is

subject to ratification by the Parliaments of the States concerned. Possibly that is the case in this instance.

Debate Resumed.

The PRESIDENT: The hon. member may proceed.

Hon. G. FRASER: I was dealing with the relationship of the patient to his medical adviser and I cannot see that that question will arise, because it will not be the medical adviser who will do the x-ray examination. That will be done by the Public Health Department and there will be no connection between the patient and the doctor in regard to it. This disease is the white scourge and we should take every precaution against it. Reference has been made to the huge sums of money being expended by Governments in an endeavour to eradicate this disease, and I mentioned recently, during another debate, the financial assistance that the Commonwealth Government is giving to sufferers from T.B. Would the Commonwealth go to that expense were it not necessary? Of course not.

It was pleasing to me to see the attempt that is being made by the Health Departments of the various States to eliminate this disease from the community and I am glad that the campaign has so far met with a large measure of success. It must be admitted that that success has been attained under a system of voluntary x-ray examination, but it is impossible for any such scheme to be fully successful if large numbers of people are allowed to exclude themselves from examination. Many people who may have a suspicion that they are suffering from the disease will never go near a chest clinic for voluntary examination. They are afraid of being told that they are suffering from T.B. and of being sent to hospital to receive treatment for the disease. Those are the people who constitute a danger to the community.

I venture to suggest that most of those who have attended the chest clinic have gone there feeling quite certain that they were free from the disease, and probably the vast majority of them have been certified as being free from infection, but I know of one person who thought he was free from infection and went to the hospital for an x-ray examination for a duodenal ulcer. While there he asked to have his chest x-rayed, being quite confident that there was nothing wrong with him in that regard. Unfortunately, when the plate was developed he was found to be suffering from T.B. and he is at present receiving treatment at Wooroloo.

There may be in our community thousands of people who would come under the same heading and who would get the shock of their lives if an x-ray examination proved them to be infected. Fortunately such people, if compulsorily x-rayed, would be found to have the disease in its early stages and that is where the value of

compulsory examination would be most apparent, because it is well known that when the disease can be tackled in its early stages the chances of cure are greatly enhanced. I do not suggest that we have progressed to the extent of being able to cure this disease outright, but I believe medical science has advanced sufficiently to be able to arrest it.

Under a system of compulsory x-ray examination a large number of sufferers will be discovered in the early stages of the disease and prompt treatment will add many years to their lives. As things are at present, a person who is ordinarily in good health has no knowledge that he has developed T.B. until he becomes really ill. The result is that when the disease is diagnosed it is in an advanced stage, and that is the problem with which we are faced. It is impossible for the average individual to have any idea that he is suffering from T.B. unless he undergoes an x-ray examination.

To hear Mr. Watson suggest that anyone should be exempted from the compulsory examination, if it is decided upon, was surprising. I know of no other law in this State, intended to apply to the community as a whole, that contains an exemption for any particular sect or class, and I think it would be dangerous to include such a provision in this legislation. If we did so we would be leaving a danger spot of infection in our midst. I realise that we must have consideration for the beliefs of those who do not think as we do, but there is a limit to the consideration that can be given in that regard when we are dealing with a matter such as this.

Our electoral law, for instance, gives exemption to no-one, though it is well known that there is a religious sect the followers of which, in order to comply with the law, vote after the sun has gone down on polling day. Those people are not granted exemption. I cannot understand the attitude of the hon. member in that he and some others are prepared to condemn people of a certain different political faith. They would kick them out of the Civil Service and do almost anything to them, because of a difference in belief, and yet he and those other members are not prepared to place a complete ban on the mingling of T.B. sufferers with the rest of the community. If I were given the choice between the two, I would rather have the red scourge in our midst than the white scourge.

Hon. H. K. Watson: You would prefer the red scourge to the white scourge?

Hon. G. FRASER: Definitely, because the red scourge is in the open and can be dealt with, whereas T.B. is under the surface and cannot be seen. The only way to eliminate the white scourge is by compulsory x-ray examination. I am just as keen as is anyone else to protect the rights of the ordinary individual, but I

would not hesitate to use compulsion where it is so greatly needed for the good of the community.

Hon. J. G. Hislop: We are all with you in that.

Hon. G. FRASER: Not in regard to compulsion.

Hon. J. G. Hislop: It is for the good of the community.

Hon. G. FRASER: I do not think Dr. Hislop says it is necessary for the examination to be compulsory for the good of the community.

Hon. J. G. Hislop: I say that.

Hon. G. FRASER: I cannot dovetail that statement with what Dr. Hislop has previously said. All the evidence we have had from medical authorities is that it would be to the advantage of the health of the community to have the x-ray examination.

Hon. J. G. Hislop: But not to enforce it by compulsion.

Hon. G. FRASER: Dr. Hislop does not believe in compulsion in this regard, but I do, because it is the only way in which we can find out who is suffering from the disease. I do not know what the percentage of sufferers in the community would be, or whether it has been worked out from the figures of those who have passed through the chest clinic.

Hon. L. Craig: Immigration figures should give an indication.

Hon. G. FRASER: I do not think that would be a fair comparison as those people come from countries where they have been living under conditions entirely different from those obtaining here.

Hon. L. Craig: I am referring to the figures of those who have been tested before they left those countries.

Hon. G. FRASER: The same possibility of arriving at a figure would be found in relation to persons who went into the Services, but some of those who were certified as free from the disease before they went away were found, on their return, to be infected. I do not suggest that that was the fault of the original examination, as I believe that in the majority of cases they contracted the disease while on service. I and members of my family had an x-ray examination about 12 months ago and, in the letter that conveyed to us the information that we were free from infection, we were informed that it would be in our interests to be examined every six months.

One can therefore understand how soldiers, who were free from the disease before leaving this country, could become infected while they were away. Those facts could not be used as an argument that the examination was bad in any way. On giving careful consideration to all the opinions I have heard expressed on this question by both professional and laymen,

I believe the only thing to do in the interests of the community is to vote for this Bill with its provision for compulsory x-ray examination. All the Governments in the Commonwealth have for years been attempting to eliminate T.B. from the population, and we should do everything possible to help them by making x-ray examination compulsory.

It will no doubt be said that if x-ray examination is made compulsory there will not be sufficient hospital accommodation for the treatment of all those who will be discovered to be infected. There is something in that but, in such an event, it will be the responsibility of the various Departments of Health to provide the necessary accommodation. If we leave things as they are, the position will not improve. I understand that some patients have been discharged from Woorlooloo, though not quite cured, but I would suggest that they have been discharged because of their own wrongful actions. If the Bill is passed, the Health Department will know that it must face the position and, although at first hospital accommodation may lag behind requirements, I feel certain that eventually sufficient hospital beds will be provided for those certified as suffering from tuberculosis. I support the second reading.

HON. N. E. BAXTER (Central) [5.30]: Although I intend to support the second reading of the Bill, I shall object very strongly later in the proceedings to Clause 6 which has caused most of the debate. That clause provides for the compulsory x-raying of every person over the age of 14 years, yet we were told by the Minister, when he introduced the Bill, that it would cover only certain persons who were in close contact with the public.

However, the Bill clearly states that it will apply to all persons over the age of 14, which will mean that wholesale screening will be conducted in spite of the Minister's assurance. My objection is that although we can screen these people wholesale, we have nowhere to put them if they are declared to be active sufferers from the disease. The other night the Minister said that of 249 beds available in the Woorlooloo Sanatorium, 244 was the daily average occupied. One can see from that that it is utterly impossible to accommodate any greater number of persons.

Hon. H. S. W. Parker: They need not go to a hospital, of course; they can rest at home.

Hon. N. E. BAXTER: The hon. member says that they need not go to hospital and that they can rest at home! I will not reply to that, but I do know that tuberculosis cannot be successfully treated at home.

The Minister for Transport: It all depends on the stage reached.

Hon. H. S. W. Parker: It has nothing to do with treatment.

Hon. N. E. BAXTER: The hon. member said they could be treated at home. They cannot be treated at home successfully. A man with a wife and six children may not know that he has T.B., but after being screened and informed that he is suffering from the disease, in order that he may be successfully treated, he has to go to bed for complete rest, and he has to be fed. I know that from experience of people who have been x-rayed and sent to Woorlooloo.

Hon. H. S. W. Parker: He would not need x-raying.

Hon. N. E. BAXTER: He would need to be x-rayed, if he is not a case that has been x-rayed.

Hon. L. Craig: Not all sufferers have six children, you know.

Hon. N. E. BAXTER: Where are we going to treat a sufferer if there is no hospital accommodation? Last year 52 active cases were discharged from Woorlooloo Sanatorium, not because of any action of their own but because they could not be cured and had to leave to make room for other people who could be cured. I am not speaking without knowledge of this subject. I have investigated the position and my information has been gleaned from people who have been in the Sanatorium.

Hon. A. L. Loton: Do you mean to say that they have been turned loose on the community as incurables?

Hon. N. E. BAXTER: Yes, quite a number of them are incurable. One can quite realise that after hearing that 275 active cases of T.B. are loose in the metropolitan and country areas.

Hon. G. Fraser: They are not as dangerous as people who are suffering from it and do not know it.

Hon. N. E. BAXTER: They are every bit as dangerous. Does the hon. member think that these people would stay at home all the time? They mix with the community.

Hon. E. H. Gray: They ought to be stopped from doing that.

Hon. N. E. BAXTER: How will we do it? Have we a law to stop them?

Hon. H. S. W. Parker: Yes, we have.

Hon. N. E. BAXTER: Some of them have been discharged from the Woorlooloo Sanatorium. What law have we to stop them mingling with the people?

Hon. H. S. W. Parker: The Health Act.

Hon. N. E. BAXTER: What are we going to do? Put them back in the Woorlooloo Sanatorium?

Hon. E. H. Gray: They should stay at home.

Hon. N. E. BAXTER: We would need a large Police Force to enforce that.

Hon. H. S. W. Parker: Do you not think that more attention should be given to the provision of further accommodation?

Hon. N. E. BAXTER: Certainly! Something should be done about this great scourge. We cannot put the cart before the horse. Do members think that anyone would buy a horse if he did not have a paddock to keep it in? That is exactly the position here; we have no accommodation. We must build additional hospitals and provide more accommodation for these people in order to give them proper treatment. I think Dr. Hislop will bear me out that these people are entitled to treatment if they are told they are suffering from T.B., and not be told that they must go home and be waited upon by their wives. I do not know whether members have ever been to the Wooroloo Sanatorium and seen how patients are treated. Some of them have to be fed and cared for like infants. A woman with even three or four children who has been burdened with the added responsibility and worry of looking after her husband who is a T.B. sufferer, will be more subject to go down with the disease herself.

It is all very well for members to object and cry "lone wolf" on this question. I think Mr. Parker stated that it would be a relief for one to know that one was suffering from T.B. I would not call it a relief! It would be a great shock to some people. I can assure members that one of the worst things that can happen to a person when he is informed he is suffering from T.B. is for him to worry about it, and that is what is going to happen to a great many people if we do not provide adequate accommodation for them during treatment.

To emphasise my point I will relate a little story. A man was sent to the Wooroloo Sanatorium and he was extremely worried, not because he had T.B. but because of something else. Every attempt was made to get that man to respond to treatment but unsuccessfully because he was in such a worried state. There are numbers of such people who, once they have been told they are suffering from tuberculosis and know that they cannot enter a hospital, become greatly worried.

However, in this particular case I am relating, one nurse spoke to this man quietly and after about four days she discovered that his trouble was caused by worry over some domestic upset in his life. Finally, the doctors were able to get him into that frame of mind when he ceased worrying and today that man is responding to treatment quite well. I have told that story to indicate that a sufferer of the disease who is worried over himself and attempts to obtain treatment at home has little chance of recovery.

Hon. H. S. W. Parker: There is the other side, where a person suffering from the disease is running around the streets with the chance of someone else contracting it.

Hon. N. E. BAXTER: There are 275 of them running around the streets.

Hon. H. S. W. Parker: There will be more if they are not discovered by screening.

Hon. N. E. BAXTER: That is so, but why not pick up some of these 275 who are on the loose now and provide accommodation for their treatment and so put them away, too? We already know of them, but we do not know of the others as yet, who, when discovered to be suffering from the disease, will increase their numbers.

Hon. H. S. W. Parker: You are anxious to put them away, but you are not anxious to seek out those who have the disease.

Hon. N. E. BAXTER: I am just as anxious as the hon. member to find out those who have it, but I am concerned about providing accommodation for them when we do find them out. I want to see this question handled in a proper manner and not go about it in the same way as would a person buying a horse without having a paddock to put it in. I am sufficiently sympathetic towards anybody who is suffering from a disease of any nature to realise that they should be given proper treatment, but I am not going to agree with this policy of doing the last thing first.

Reference may be made to the chest clinic. The figures which the Minister for Agriculture gave in answer to a question I submitted showed that 83,000 persons have been x-rayed at the Perth Chest Clinic since its inception. That is quite a large section of our population, and last year alone there were 31,000 odd who were x-rayed at that clinic. The figures indicate that people are interested in getting x-rayed.

From the figures supplied as to the number of cases admitted to Wooroloo last year, I should say that of the people x-rayed the percentage discovered to be actually suffering from T.B. would be .4 per cent., which is not a very great number. Those people have been treated. Based on the shortage of accommodation for T.B. sufferers, the following is an extract from "The West Australian" dated the 1st November:—

The Government was considering a proposal for the establishment of a 200-bed hospital in the metropolitan area for persons suffering from tuberculosis.

The Government was considering a proposal! I should think that the first action to take in this matter would be to approve of and allocate finance to build this 200-bed hospital and then, when it is

well on the way, introduce compulsory T.B. x-ray examination. That is the correct way to go about it; not go from the back to the front. We should try to go forward. Several members have referred to leprosy and venereal disease. I do not think our Health Act provides for compulsory examination to discover whether people are suffering from leprosy or venereal disease.

Hon. Sir Charles Latham: A known leper walking around the streets could be arrested.

Hon. N. E. BAXTER: How do we know that there are no lepers walking around the street? It is exactly the same with T.B. sufferers. We do not know how many of those cases exist. How do we know that there are no venereal disease cases unless people are examined? If we are going to introduce compulsory x-ray examination to ascertain whether people are suffering from tuberculosis, why not introduce compulsory examination in regard to leprosy and venereal disease? I think it will be agreed that leprosy and venereal disease are as serious as tuberculosis.

Hon. L. Craig: A person knows whether he is suffering from leprosy or venereal disease.

Hon. N. E. BAXTER: A person may know, but he can spread it amongst the people much more easily than he could T.B. I raise these points merely to illustrate to, and impress upon, members that we should do things in the correct manner. I think it was Mr. Fraser who said that if we had T.B. screening and we discovered the number of people suffering from the disease, we would then be forced to build more hospitals. We have a progressive Government, but unfortunately it does not show its progressiveness in this amending Bill. I think the debate on this question will do more towards getting T.B. beds provided than will the whole of these compulsory examinations. I intend to support the second reading but will oppose some of the provisions at the Committee stage.

HON. E. M. DAVIES (West) [5.41]: There appears to be quite a good deal of heat engendered in the debate on this very important and vital question. I think that each and every one of us agrees that it is necessary that ways and means should be sought to discover the number of people who are suffering from T.B., and particularly those who have it in its early stage. It is all very fine to say that certain treatment is necessary, but until such time as a person is made aware of the fact that he has contracted tuberculosis he himself does not assist in its arrest in any way, because he does not take the necessary rest that is essential in the treatment of this particular disease.

I feel that by the adoption of a system of compulsory examination for tuberculosis, many people who were not aware

that they were suffering from the disease, even though in its early stages, could be so informed and the normal methods of treatment put into effect. Although in some instances complete cure may not be possible, treatment is essential for the protection of the individual concerned. Should he know that he had contracted the disease, he would himself take all the necessary steps in his own interests, and he would see to it that he had as much rest as possible, apart from receiving treatment from the medical fraternity. Where necessary, he could be accommodated in a hospital for such purposes.

It is of vital importance to the whole community that those unfortunate enough to have contracted the dread disease should be aware of the fact. If that were done, I am quite certain a great percentage of those affected would take all the necessary precautions to ensure that they were at least not potential carriers of the disease which might possibly be spread among those with whom they came into contact. I think we all agree it is necessary that people should be made aware of their condition, and I see no great objection at all to asking them to submit to examination. Many have already voluntarily visited the clinic for that purpose, and some have discovered that they were suffering from tuberculosis in its early stages. It has been possible to arrest the disease in those circumstances.

Hon. N. E. Baxter: But only by means of hospital treatment.

Hon. E. M. DAVIES: There are other methods that are applied, and I do not think Mr. Baxter need labour that phase. In any case, he took exception to members interjecting when he was speaking, and he should take a lesson from his own remarks. I believe the introduction of a system of compulsory examination will reveal that a number of people are suffering from the disease. By means of early treatment it will be possible for them to receive proper care and eventually they will be able to return to their ordinary occupations and earn their own living.

Should compulsory examination be delayed, the effect will be that eventually many who could be readily cured during the early stages of the disease will find that it has advanced to a more serious condition. I support the second reading of the Bill because I think it is a step in the right direction to ascertain the condition of the health of the people generally. It was mentioned during the debate this afternoon that the system was adopted in connection with the Armed Forces, and although the examinations were not made voluntarily, they disclosed that many of the men had symptoms of the disease. In many instances the trouble was arrested, and the men were able to return to civilian life and once more take up their ordinary occupations. I trust the House will agree to the Bill.

HON. A. L. LOTON (South) [5.50]: I support the second reading of the Bill because I am firmly of the opinion that in the interests of the community at large the compulsory examination of all citizens should be carried out at the earliest possible date. The points raised by Mr. Craig have a considerable bearing on the matter. In recent years, legislation was introduced making it compulsory for all dairy cattle in certain areas to be examined for tuberculosis. That has proved very satisfactory. Unfortunately, when the legislation was before Parliament it was not applied to all cattle in the agricultural areas. I know that at that stage the matter of finance had to be borne in mind, but if the whole of the cattle in the State, apart from those in the North, had been brought under the legislation and examined for the presence of tuberculosis and the necessary compensation provided, far greater progress would have been made in that regard than is apparent today.

In certain areas, cattle are being condemned, but no compulsory examination is provided for those who tend the cattle. It seems to me that on one hand we endeavour to prevent the spread of tuberculosis by a rigid examination of dairy cattle, and on the other hand we allow those who come in contact with the cattle to remain unexamined, and yet they can deal with new cattle brought to the dairy. I hope that when the Bill is passed, as I am confident it will be, in future mobile clinics will be provided for work in country districts.

For some years that system has been in vogue in Victoria and has been applied particularly to the industrial sections of the community. It will be in the interests of the whole State if mobile clinics tour the country areas and take the necessary screenings. I also hope that the screenings will be dealt with by one central authority for checking purposes. If that is not done, it will be possible that different specialists will be looking for different defects whereas if they were all dealt with by a central authority it would make for more uniformity, and better recordings would be achieved.

The statistics quoted by the Minister in reply to a question by Mr. Baxter showed that 83,000 people had voluntarily attended the chest clinic in the metropolitan area. From that it would appear that no great opposition is likely to be experienced to the move suggested. I notice that a certain number of people have been directed to attend, apparently because they were suspects. I do not know how many members of this House have submitted themselves voluntarily to examination. I doubt if anyone has done so.

Hon. G. Fraser: I have.

The Minister for Agriculture: Has the hon. member himself?

Hon. A. L. LOTON: Has the Minister done so, seeing that he is interested in dairying?

The Minister for Agriculture: I should have done so.

Hon. A. L. LOTON: At any rate, if it is made compulsory we shall all have to submit ourselves to the test. Now that the Commonwealth Social Services Department is providing substantial payments for those who have contracted this dread scourge, all who suffer from it can afford to submit themselves for treatment. I disagree with the views expressed by Mr. Baxter that we should have hospital accommodation provided before we require people compulsorily to submit themselves for examination. I know that many cases in the early stages of the disease could be treated more satisfactorily in their own homes than in hospitals. I have pleasure in supporting the second reading of the Bill.

On motion by Hon. E. H. Gray, debate adjourned.

BILLS (2)—FIRST READING.

- 1, Traffic Act Amendment.
 - 2, Agriculture Protection Board.
- Received from the Assembly.

House adjourned at 5.57 p.m.