ANNOTATIONS

DOCTORS' STRIKE

Medical Care and Conflict in Saskatchewan

ROBIN F. BADGLEY AND SAMUEL WOLFE

Toronto, Macmillan of Canada, 1967, and New York Atherton Press, 1967, xiii + 201 pp.

This book is an account of Saskatchewan's 23-day doctors' strike of 1962, its development, its settlement and its effects.

From 1944 to 1964, Saskatchewan, with its cooperative government, initiated a series of publicly financed health services. Proposed in 1959, fought over in an election in 1960, enacted in 1961, and implemented on July 1, 1962, the program for universal payment of all doctors' bills led to the doctors' walkout. The preludes to the conflict, the impasse, the conduct of negotiations and the strike itself are discussed. The strike was settled by the profession's acceptance of the principle of universal coverage through taxation, and the government's rewording of its original legislation.

The plan has not led to a decline in the number of doctors. More doctors are in group practice, and more doctors with longer training are in urban practice. More check-ups are being done, more counseling is being carried out and more surgical procedures done, often by doctors untrained in surgery. The individual doctor, based on a survey, now accepts the plan, though the profession itself officially opposes it. All political parties in Saskatchewan now favor the plan.

The health services in Canada, the United States and Great Britain are reviewed. Canada and the United States have, for many years, perceived a need for a system of tax-financed hospital and medical care insurance as part of a system of social security. A "have-not" province, Saskatchewan, pioneered both hospital and medical care insurance.

The authors emphasize that medicare by itself will not reduce the inequities between the rich and the poor. Programs to improve the lot of the 20 to 40 per cent of the population who are poor in Canada and the United States, must be tied in with medical care for the latter to achieve its potential.

The authors critically evaluate the process of becoming a doctor and present-day lack of major innovations in medical education to equip young doctors to be prepared for the society they will face when they enter practice.

ESTUDIOS DE DEMOGRAFIA

CLYDE V. KISER (EDITOR)

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