

Section 1.—Administration.

In Canada, speaking generally, the administration of public health activities and the establishment and maintenance of such institutions is in the hands of the various Provincial Governments, under the powers given them in sec. 92 of the British North America Act, 1867. Under their control municipalities, societies and individuals generally initiate charitable and humane efforts, depending on the Government to some extent for financial aid and for competent uniform inspection of methods and standards. Apart, however, from the actual organization of provincial Health Departments and of the administrative bodies charged with the management of hospitals and other such institutions, particular attention is given to the same branches of public health work in all the provinces. Important, and reflecting most clearly the benefits accruing from such work, are the provisions for medical inspection of school children. These are carried out in some cases by the district or sub-district medical health officers, and in others by public health nurses whose activities are confined to this work alone. In addition to the continual supervision exercised over the health of the children, expert advice and assistance are supplied freely to children, teachers and parents. In many cases dental inspection is provided for. While this work has been carried on upon a considerable scale for only a few years, great benefits have already resulted from it, notably general improvement in health and sanitary conditions and in the control and prevention of epidemics.

In other directions also, governmental activities through Departments of Health have produced numerous evidences of their value, which may be illustrated by an examination of the death rates from various communicable and other diseases, such as are shown in the Vital Statistics chapter of the present volume. In Ontario, for example, the rate of deaths from tuberculosis decreased from 85.6 to 52.9 per 100,000 between 1913 and 1930, and that from typhoid fever from 19.4 to 2.3 per 100,000. While some other rates have increased, it may be noted that increases are not general in the case of communicable diseases and that, in respect of tuberculosis especially, the cities of the province show the lowest mortality rates. The reason for this is the fact that public health work is more advanced there than in the towns and rural areas.

Exercising particular jurisdiction over some phases of the general health of the people of the Dominion is the Department of Health of the Dominion Government, while the Dominion Council of Health acts as a clearing house on many important questions related to the health of the people. This Council consists of the Deputy Minister of the Dominion Department of Pensions and National Health as chairman, the chief executive officer of the provincial department or board of health of each province, together with such other persons, not exceeding five, as may be appointed by the Governor in Council to hold office for three years. Of these appointed members, four have in the past represented agriculture, labour, rural women's work and social service, and child welfare, while the fifth member is a scientific adviser on public health matters. (A fuller description of this Council will be found at pp. 908-9 of the 1926 Year Book.)

Subsection 1.—Public Health Activities of the Dominion Government.¹

The Act of Parliament (18-19 Geo. V, c. 39, An Act respecting the Department of Pensions and National Health) creating the Dominion Department of Pensions and National Health, clearly defined the functions of that Department, which is

¹Revised by Dr. J. A. Amyot, Deputy Minister, Department of Pensions and National Health, Ottawa.