CHAPTER XXVI.—PUBLIC HEALTH AND BENEVOLENCE.

The rapid increase in the numbers committed to our various institutions, such as mental hospitals for the insane, feeble-minded and epileptic; the alleged increase in juvenile crime and the extension of social work in this field; the increasing number of institutions caring for the aged and incurable, as well as for dependent, neglected and handicapped children, have been marked features of the twentieth century. In this new and important field statistical data are collected and results analysed and published in leading countries. Although the difficulties encountered in building up statistics with a uniform application have been many, these statistics are now being collected on a Dominion-wide basis either at the decennial census or by annual returns.

In any comprehensive study of the situation it is essential that, besides health and hospitalization records, social statistics should also receive attention. Statistics regarding the number of children placed in foster homes, free family homes, number of children adopted, number of children cared for in day nurseries, institutional care of juvenile delinquents, numbers of dependent, neglected and handicapped children receiving institutional care, as well as fuller and more accurate data concerning inmates in our mental institutions, institutions for the feeble-minded, county asylums, county almshouses, poorhouses, etc., are becoming absolutely necessary to the proper drafting of social legislation and in order to deal with the problems of civilization, growing more complex day by day.

As public and private charity work together for the amelioration of conditions among the dependent and neglected, the proper treatment of defectives and the reclamation of the delinquent, the problem is made more difficult of statistical measurement, although the tendency to-day in most parts of Canada is to remove the responsibility of social work from the shoulders of individuals and private agencies and to regard it as more in the nature of a public responsibility. The growth in recent years of cordial relationships between governmental bodies and social welfare workers in the fields of school care and child welfare movements is manifested in the number of child welfare Acts in force in the various provinces of Canada.

Section 1.—Administration.

In Canada, speaking generally, the administration of public health activities and the establishment and maintenance of institutions is in the hands of the Provincial Governments, under the powers given them in Sec. 92 of the B.N.A. 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