science, how far to better sanitation, and how far to the improvement in the general conditions of living, as a result of the increase in the productive power of humanity, is in dispute, but concerning the facts there is no doubt.

Perhaps the most impressive testimony regarding this decline in the death rate is furnished by the mortality statistics of Sweden, where vital statistics have been kept with great accuracy for the whole nation ever since 1750. There, the crude death rate declined from an average of 27.4 per 1,000 in the decade 1751-60 to 14.3 in the decade 1911-20 and to 11.7 in 1935.

Similarly, in England and Wales, the crude death rate, which was $22 \cdot 5$ per 1,000 in the 60's, $21 \cdot 4$ in the 70's and $18 \cdot 2$ in the 90's of the past century, declined to $15 \cdot 4$ in the first decade of the present century and $12 \cdot 1$ in the third; it was $11 \cdot 7$ in 1935. In Scotland, again, the average rate was $22 \cdot 1$ in the '60's, $21 \cdot 8$ in the '70's, $18 \cdot 6$ in the '90's, $13 \cdot 9$ in 1921-25, $13 \cdot 6$ in 1926-30, and $13 \cdot 2$ in 1935.

There will always be years of specially high mortality, for instance 1918, when the death rate in Ontario, the most populous of the provinces of Canada, was 15.3 per 1,000, owing to the influenza-pneumonia epidemic, as against 12.0 in 1917 and 11.9 in 1919. Over a period, however, these abnormalities are reduced to negligibility, and it remains generally true that from decade to decade there is a decline in the crude death rates of the countries of the white man's world.

As for Canada, while the period elapsed since the introduction of complete and comprehensive vital statistics in 1920 has been too short to establish a definite downward trend, the rate of 12·4 per 1,000 for that year, in the eight provinces then included in the registration area, was substantially higher than in any subsequent year. A decided improvement is shown in the deaths and death rate of Quebec for the years 1933-36. This has been in evidence ever since 1926, but latterly Quebec has shown a lower rate than any of the provinces farther east.

Subsection 1.—General Mortality.

Summary statistics of total deaths and crude death rates in recent years are given in Table 32, p. 191, for Canada, by provinces. The absolute number of deaths as well as the crude death rate was higher for 1935 and 1936. In fact total deaths were greater than they have been since 1930, but the death rate was increased very little over the 1933 level although the advantage gained in 1934 was lost. A rising trend in the western provinces, where rates in the early '30's were unusually low, largely accounted for the increase.

Age Distribution of Decedents.—The numbers of males and females dying in the nine provinces in 1935 and 1936 are given by single years of age up to 5 and by quinquennial age groups thereafter in Table 16, together with the percentage of deaths occurring in each group in each of these years.

The quartile and decile ages of decedents for the years 1926, 1934, and 1935 are given for each sex and for the two sexes combined in Table 17. The fifth decile and second quartile (or the median) both mark the middle points of the arrays, and the deciles, dividing each half into five groups, give a more detailed picture of the age distribution in each half than do the quartiles. It is shown very definitely that the average ages of decedents have been increasing steadily. The method of construction and interpretation of this table is given on p. 163 in connection with a similar one showing quartile and decile ages of married fathers and mothers.