

of illness from all causes, considering methods for an equitable distribution of the costs of illness, studying the needs of the people with respect to general health services and the necessity of co-ordination of those now existing. An advisory committee is associated with the Board, and consists of representatives from medical, hospital and allied organizations.

Alberta.—The Department of Public Health was established by an Act of the Provincial Legislature in 1919. The Department includes the following Divisions: Communicable Diseases; Sanitary Engineering and Sanitation; Public Health Education; Laboratory; Public Health Nursing; Hospitals, Municipal Hospitals; Hospital Inspection; Social Hygiene; Vital Statistics; Mental Hygiene; Dental Hygiene; Tuberculosis Control and the following institutions: the Central Alberta Sanatorium; the Provincial Mental Hospital, Ponoka; the Provincial Training School, Red Deer; the Provincial Auxiliary Hospital, Claresholm; and the Provincial Mental Institute, Edmonton.

Free clinics for venereal diseases are maintained in the principal cities and in the two provincial gaols. Educational work on social hygiene is carried on by means of lectures, moving pictures, bulletins, and radio talks.

British Columbia.—The Provincial Board of Health, responsible to the Provincial Secretary, administers the laws relating to public health in British Columbia. Its Branches comprise the following: Sanitation, Venereal Clinics, Laboratories, Tuberculosis, Infectious Diseases and Public Health Nursing, and Vital Statistics. The Sanitation Branch has directed numerous recent efforts to the prevention of the spread of communicable diseases by touring motorists, and to the control of campers and squatters along the coast. The Laboratories Branch, in addition to the analysis of specimens, distributes various vaccines and antitoxin. The Tuberculosis Branch has been very much enlarged, the province being organized into districts under the direction of a medical officer and specially trained public health nurses. The educational part of the work is accentuated, and home visits are emphasized in order to educate the people to the dangers of infection.

Section 2.—Institutional Statistics.*

Under authority granted by the Dominion Government in 1930, the Dominion Bureau of Statistics has since co-operated with the provincial authorities through its newly created branch of the Census of Institutions, and collects, on a Dominion-wide basis, statistics for the following types of institutions: (1) *hospitals*—institutions primarily engaged in the prevention and cure of physical sickness and disease, such as hospitals for the sick, sanatoria, and institutions for incurables; (2) *mental and neurological institutions*—for the treatment and care of mental ailments, such as asylums for the insane, institutions for the feeble-minded, epileptic, etc.; (3) *charitable and benevolent institutions*—caring for the poor of both sexes and of all ages, such as homes for the aged, county refuges, orphanages, etc.; and (4) *penal and corrective institutions*—having for their purpose the reclamation of the criminal and the reformation and training of delinquent boys and girls. Institutional statistics, as summarized in Table 1, may, therefore, be regarded as dealing with the four main types of social pathology, *viz.*, physical, mental, economic, and moral. They provide a body of statistical data which affords to students of social problems a fairly comprehensive view of institutional life in Canada.

Historical.—A brief historical sketch of the origin and growth of the several classes of institutions in Canada was given at pp. 1006-1009 of the 1936 Year Book.

* This section has been revised by J. C. Brady, Officer in Charge of Census of Institutions, Dominion Bureau of Statistics.