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  $27 \cdot 4$  per 1,000 in the decade 1751-60 to  $14 \cdot 3$ in the decade 1911-20 and to  $12 \cdot 0$  in 1936.

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  $12 \cdot 1$  in 1936. 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  $13 \cdot 4$  in 1936.

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  $15 \cdot 3$ per 1,000, owing to the influenza-pneumonia epidemic, as against  $12 \cdot 0$  in 1917 and  $11 \cdot 9$  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  $12 \cdot 4$  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, although for 1937 the rate has increased to such a point that it is little better than it was in 1932 (11.3 as compared with 11.4). On the whole, however, improvement has been in evidence since 1926, and 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. 151, for Canada, by provinces. The absolute number of deaths as well as the crude death rate was higher for 1936 and especially in 1937. In fact total deaths were greater in 1937 than they have been since 1920, and the death rate was higher than it has been since 1930, being  $10 \cdot 2$  as compared with  $9 \cdot 7$ in 1936 and  $10 \cdot 7$  in 1930. Increased rates for 1937 are common to all provinces except Manitoba and Saskatchewan, both of which showed unusual increases in 1936 over 1935.

Age Distribution of Decedents.—The numbers of males and females dying in the nine provinces in 1936 and 1937 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, 1935, and 1936 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. 121 in connection with a similar one showing quartile and decile ages of married fathers and mothers.