

4.—Expenditure and Cost per Patient-Day for Mental Institutions compared with other Health Institutions 1932-53—concluded

Year	Tuberculosis Sanatoria			Totals		
	Hospitals	Expenditure ¹	Cost per Patient-Day	Hospitals	Expenditure ¹	Cost per Patient-Day
	No.	\$'000	\$	No.	\$'000	\$
1932	34	5,133	2-29	617	43,775	1-85 ²
1942	39	8,115	2-60	649	77,001	2-35
1943	38	8,619	2-76	673	84,367	2-45
1944	37	8,935	3-02	649	95,508	2-70
1945	40	10,189	3-17	613	102,735	2-85
1946	41	11,483	3-49	613	117,564	3-15
1947	42	14,223	4-27	685	147,117	3-81
1948	41	17,043	4-85	709	174,542	4-41
1949	44	19,166	4-98	763	202,397	4-90
1950	49	22,893	5-01	806	228,671	5-33
1951	55	26,815	5-78	828	265,139	5-99
1952	55	29,184	6-07	825	279,047	6-18
1953	59	32,204	6-25	851	316,469	6-81

¹ Excludes capital expenditure; includes outpatient expenditure. ² Includes patient-days of newborn; includes only days spent in institutions which reported finances. * Estimate.

An obvious factor contributing to the rise in hospital expenditure is the increase in population and the consequent increase in admissions. From 1932 to 1954 the population of Canada increased by 44.5 p.c. and the number of admissions to mental institutions rose by 210.4 p.c.

From 1948 a total of over \$37,000,000 has been made available to the provinces by the Federal Government for the expansion and improvement of preventive, diagnostic and treatment services in the field of mental health. Of this amount over \$24,000,000 or 65 p.c. was actually expended. Nearly half the expenditures were used to develop institutional services.

CLINIC SERVICES

Mental health clinics are playing an increasingly important role in combating mental disorders. They are operated by a variety of agencies, including provincial health departments, municipalities, mental institutions, general hospitals, school boards and voluntary organizations. There is no uniform pattern of operation—some are operated on a full time basis, some part time, and some travel from place to place.

During 1954 a total of 88 mental health clinics were in operation in Canada. Statistics, available for 77 of the clinics, show that more than 208,000 interviews were held with 41,258 patients, an average of just over five interviews per patient and that more than two-thirds of the patients had not attended the same clinic during a previous year. Although comparative figures are not available for earlier years the preponderance of new patients indicates that these clinics are providing a needed service to the community. In 1954 they employed a staff of 759 persons, 26.6 p.c. of whom were nurses, 23.0 p.c. were psychiatrists, 17.0 p.c. were social workers and 14.0 p.c. were psychologists.

It is quite apparent that statistics alone cannot give a full picture of the developments taking place in the field of mental health, that the quality of services available and their relationship to those needing treatment is of equal importance in any study of the problem. Each province attempts to meet its need in its own way but across Canada there is general evidence of increasing emphasis being placed on research, on improved methods of treatment and on the training of personnel, the ultimate goal of which is to mitigate the prevalence of mental illness and thereby to decrease the demand for hospital beds and facilities.