

services to local health departments and to hospitals, conduct studies of local problems and needs, and assist in the training of health personnel. Through local health departments conducting generalized public health programs, maternal and child health services are available to a high proportion of the population. The basic staff consists of a medical officer of health, public health nurses and sanitation inspectors. Programs and services for mothers and children may include prenatal education, home visiting, child health conferences and school health services. Other health personnel—dentists, nutritionists, health educators and social workers—share interests in the promotion of family health.

Dental Health.—All provincial health departments have dental health divisions that administer programs varying under local conditions but directed almost entirely to health education and the care of children. Training of dentists and dental hygienists in public health, the operation of children's preventive and treatment clinics, and health education are primary concerns in all provinces. Water fluoridation projects involving a total of 4,050,100 people are in operation in eight provinces and in the Northwest Territories. Four provinces—Alberta, Manitoba, Ontario and Nova Scotia—have set up, in conjunction with their dental schools, special courses for dental hygienists. In all ten provinces clinical care is provided for children in remote rural areas. A locally sponsored plan in which the cost of dental services for children is shared by the community and the provincial health department is in operation in more than 90 communities in British Columbia.

Nutrition.—Services include technical guidance, education, consultation and research. In some provinces, school lunch programs are sponsored and dietary supplements distributed. Five provinces have special nutrition divisions; in other provinces, consultants in nutrition function under a broader grouping of departmental services.

Health Education.—A basic concern of provincial health authorities is to stimulate public interest in important health needs, and in most provincial health departments a division of health education is established for this purpose, directed by a full-time professional 'health educator'. The division may also provide consultative services to the management of the department, to local health authorities and to voluntary associations.

Public Health Laboratories.—The public health laboratory was one of the earliest provincial services developed to assist local public health departments in the protection of community health and the control of infectious diseases. Public health bacteriology (testing of milk, water and food supplies), diagnostic bacteriology and pathology are the principal functions of the laboratory service, with medical testing for physicians and hospitals steadily increasing in volume. Efforts to co-ordinate public health and hospital laboratory services and measures to bring laboratory facilities to rural areas are among the recent developments.

Subsection 2.—Services for Specific Diseases or Disabilities

Mental Health.—Treatment programs for the mentally ill have centred mainly around three types of facilities: the mental hospital, the psychiatric unit in the general hospital and the organized community mental health clinic. These facilities, however, no longer have separate and distinct functions. New emphasis on the role of the community and its resources in the treatment and rehabilitation of the mentally ill is affecting the whole program of in-patient care. Utilizing the basic clinical facilities of general hospitals and mental hospitals, the community program is extending its scope and usefulness through the provision of day-care centres, sheltered workshops, half-way houses, and foster home and boarding home care. More than 60 general hospitals in Canada have organized psychiatric units, providing bed accommodation for more than 2,000 patients. Further planning in community-based services concerns the development of small regional psychiatric hospitals from which a comprehensive community program will emanate. Examples of this type are the new 150-bed hospital in Yorkton, Sask., a 68-bed psychiatric hospital in Selkirk, Man., and the developing community facilities for in-patient, out-patient and day care in Ottawa, Sudbury and Windsor, Ont.