

in the community. In Ontario, for example, more than 2,000 mental hospital patients requiring sheltered care have been placed in approved homes for special care and another 1,500, chiefly ambulatory, in approved boarding homes. In Saskatchewan the patient population in the mental hospitals has been reduced by at least 1,000 under a similar program of community placement.

Since 1961, six provinces—Nova Scotia, Ontario, Saskatchewan, Alberta, Manitoba and British Columbia—have replaced their statutes governing the admission and care of the mentally ill with new legislation designed to promote easier and more informal methods of admission and discharge and to establish machinery for periodic review of the status of medically certified patients.

A great part of the cost of care in hospitals for the mentally ill and mentally retarded is borne by the provincial governments, although a charge, according to ability to contribute, may be made in some provinces. Newfoundland and Saskatchewan provide complete free care; Manitoba covers minimum maintenance costs for all patients; in Nova Scotia the provincial hospital gives free care to patients requiring active treatment; and in Ontario all mental-institution treatment is included in the hospital care insurance plan.

Tuberculosis.—The fight against tuberculosis is one of the major programs of all health departments. Free hospitalization and free drug treatment, both on an in-patient and domiciliary basis, are provided. In two provinces extensive BCG programs are in effect and in the other provinces this prophylactic is provided to groups at special risk. Case-finding programs in the form of community tuberculin and X-ray surveys, surveys of high-risk groups, and the follow-up of all arrested tuberculosis cases are routine. These activities resulted in a steady decline in the Canadian tuberculosis death rate to 3.6 per 100,000 population in 1965. Treatment in hospital for tuberculosis patients has also greatly declined with the success of out-patient chemotherapy.

Cancer.—Health departments and lay and professional groups working for the control of cancer have been concerned mainly with four aspects of the problem—diagnosis, treatment, research and public education. In cancer detection and treatment, specialized medicine, hospital services and an expanding public health program are closely related. There are programs operating under health departments in three provinces; four others have provincially supported cancer agencies or commissions; and in the remaining provinces hospital-administered tumour clinics receive provincial support. Under the provincial hospital insurance plans, the benefits pertaining to in-patient care in the treatment of cancer are essentially similar in all provinces and include such special services as diagnostic radiology, laboratory tests and radiotherapy. Similar services for out-patients are covered either by hospital insurance or by federal-provincial cancer control grants. Comprehensive free medical programs for cancer patients are in operation in Saskatchewan and Alberta and for cancer in-patients in New Brunswick.

Venereal Disease.—Free diagnostic and treatment services are available in all provinces but the operation of government clinics is being increasingly superseded by the method of supplying free drugs to private physicians who are reimbursed for treatment of indigents on a fee-for-service basis.

Alcoholism.—Within the past two decades provincially supported programs of varying scope have come into being to prevent and control alcoholism. Some are administered directly by the health departments; others are the responsibility of official or semi-official alcoholism foundations. The first organized and most complete program is that of the Ontario Alcoholism and Drug Addiction Research Foundation whose sphere of activity includes public and professional education, basic and clinical research and the operation of treatment facilities for in-patients and out-patients. Treatment facilities for alcoholic prisoners are being developed by reform institutions in three provinces. Also, the rehabilitation program of various voluntary and religious organizations continues to assist large numbers of alcoholics.