

ParticipAction, and an effort in employee-fitness programs seek to increase public awareness of the need to be fit and the enjoyment to be found in physical recreation and sports.

Resource development. The development of resources for sport and recreation, particularly human resources, is a traditional mainstay of the program. Sport Canada and Recreation Canada provide contributions to national sport and recreation associations for administration, leadership and skill development. Many administrative services are available from the National Centre for Sport and Recreation, which is supported by the program. Recreation Canada makes special contributions to the Atlantic provinces and the territories, as well as assisting Indian and Métis organizations.

Training. Game Plan, a major co-operative effort involving the federal government, the provinces, and the Canadian Olympic Association is designed to provide additional funding for the extra training and competitive experience that Canadian athletes require for international competition. Grants-in-aid for student athletes and the Canada Fitness Award are also well-known programs throughout the country which provide programs for the average participant.

Competitions. Support is available for competitions at the developmental and elite levels. This support includes payment of the travel costs of athletes, coaches and officials to national championships. A major part of the support for the Canada Games and Arctic Games comes from the Branch. Sport Canada also provides contributions for the travel costs of athletes to some major international competitions.

5.1.6 Federal-provincial co-operation

Since the federal and provincial governments share the responsibility for dealing with health matters in Canada, a formal structure has been established for federal-provincial collaboration and co-operation in the health field. The following are its elements: Conference of Ministers of Health; Conference of Deputy Ministers of Health; Federal-Provincial Advisory Committees on Community Health, Health Insurance, Health Manpower, and Health Standards; and the secretariat. The role of the four advisory committees is to facilitate the work of the ministers and deputy ministers, and to assist them in achieving their objectives, in identifying major issues, and in solving problems. They may set up groups to deal with particular subjects requiring more detailed study.

The very broad terms of reference of the Conferences of Ministers and of Deputy Ministers of Health involve all matters relating to the promotion, protection, maintenance, and restoration of the health of the people of Canada. Normally, the Conference of Ministers meets annually, and the Conference of Deputy Ministers meets twice a year. The last two ministers' conferences considered an overview of major health problems, objectives, and goals, the Nutrition Canada survey report, a proposed national health-status survey, physician supply, acupuncture policy, the proposed legislation on cannabis, the federal working document *A new perspective on the health of Canadians*, the federal-provincial financing arrangements, mental health, alcohol abuse, Indian health and family planning.

5.2 Provincial and local health services

The responsibility for regulation of health care, operation of health insurance programs and direct provision of some specialized services rests with the provincial governments; some health responsibilities are delegated to local authorities. Although each of the provinces assigns primary responsibility for health to one department the pattern of distribution of function varies from one province to another. In Alberta, Manitoba and Quebec, health and social services are combined within the same department. Other provinces maintain liaison between departments responsible for these related services.

In a number of provinces, health insurance plans and some specialized programs are administered by semi-autonomous boards or commissions. Some of these report directly to a minister of health; others are under the jurisdiction of a deputy minister. In provinces such as New Brunswick and Ontario health insurance programs are operated directly by the health departments.

In each province, both institutional and ambulatory care for tuberculosis and mental illness is provided by an agency of the department responsible for health. Increasing attention in these programs is directed to preventive services. Programs related to other particular health