obtained directly from provincial health and social service departments. Federal funds to cover some of the services are provided under terms of the Canada Assistance Plan, vocational rehabilitation for disabled persons, established programs financing, and other federal programs.

5.5.5 Mental health and illness

Among provincially operated health services, mental health activities are one of the largest administrative areas in expenditure and employees. In 1974, mental institutions reported operating expenditures of \$595.7 million, while their personnel numbered 52,814; corresponding figures for 1975 were \$681.9 million and 51,582.

No adequate measure of mental disorders exists, but in 1977 there were 129,397 admissions to psychiatric in-patient facilities. Separations numbered 131,650, and the year-end census of patients on books totalled 48,238. There has been a gradual decline in all of these indicators in recent years. Table 5.19 contains information on patient movement in the various types of psychiatric facilities. Beyond these hospitals and

clinics, however, are many other cases.

In 1977, 234 separate in-patient facilities and 148 psychiatric units in hospitals were caring for the mentally ill; most separate facilities are operated by the provinces. The majority of patients reside in the 42 public mental hospitals. Most mental hospitals have undergone successive additions to their original structures and many have pioneered new treatments for mental illness. Several provinces are arranging for boarding-home care with the federal government sharing the cost of maintaining needy patients in such homes under the Canada Assistance Plan. However, in each province most of the revenue of reporting mental institutions was provided by the provincial government or the provincial insurance plan.

Community mental health facilities are being extended beyond mental institutions to provide greater continuity of care, deal with incipient breakdown, and rehabilitate patients in the community. Psychiatric units in general hospitals contribute by integrating psychiatry with other medical care and making it available to patients in their own community. In 1977 the 148 psychiatric units, which had 4,349 patients as the year closed, admitted 54% of the total admissions to all kinds of mental institutions. Inpatient services in psychiatric units are covered under all provincial hospital insurance plans. Some provinces have small regional psychiatric hospitals to facilitate patient access to treatment and the complete integration of medical services. Day-care centres, allowing patients to be in hospital during the day and at home at night, have been organized across the country. Community mental health clinics, some provincially operated, others municipally, and psychiatric out-patient services are open in all provinces.

Specialized rehabilitation services assist former patients to function more adequately and are operated by mental hospitals and community agencies. They include sheltered workshops that pay for work and provide training, and halfway houses in which patients can live and continue to receive treatment while becoming settled in a job.

Facilities for mentally retarded persons include day training schools or classes, summer camps and sheltered workshops as well as residential care in institutions. These facilities provide for social, academic, and vocational training. Manual skills are taught in the training-school workshops and some people are placed in jobs in the community.

Emotionally disturbed children presenting personality or behaviour disorders are treated at hospital units, community clinics, child guidance clinics and other out-patient facilities.

The mental health problems related to heavy alcohol use stem from brain damage due to toxic effects of alcohol and from associated nutritional deficiencies, as well as from related emotional difficulties. Of equal concern is the wide range of physical health problems often leading to death, and social problems resulting from excessive use of alcohol.

In 1975, alcoholic psychosis and alcoholism accounted for 11,626 (19%) of the first admissions to in-patient psychiatric facilities in Canada. Although it is difficult to define