

## CHAPTER XXVI.—PUBLIC HEALTH AND BENEVOLENCE.

Greatly increased attention has been devoted during recent years to public health and its related subjects, the work embracing, in addition to the supervision of the general health of the community, the maintenance of hospitals and institutions for the care of needy and indigent persons. In general, the administration of public health activities and the establishment and maintenance of such institutions is in the hands of the various Provincial Governments, under the powers given them in sec. 92 of the British North America Act, 1867. Under their control municipalities, societies and individuals generally initiate charitable and humane efforts, depending on the Government to some extent for financial aid and for competent uniform inspection of methods and standards. Exercising particular jurisdiction over some phases of the general health of the people of the Dominion is the Department of Health of the Dominion Government, while the Dominion Council of Health acts as a clearing house on many important questions related to the health of the people. This Council consists of the Deputy Minister of the Dominion Department of Pensions and National Health as chairman, the chief executive officer of the provincial Department or Board of Health of each province, together with such other persons, not exceeding 5, as may be appointed by the Governor in Council to hold office for 3 years. Of these 5 appointed members, four have in the past represented agriculture, labour, rural women's work and social service, and child welfare, while the fifth member is a scientific adviser on public health matters. (A fuller description of this Council will be found at pp. 908-9 of the 1926 Year Book.)

During recent years the increase of public interest in social and welfare problems has been very marked, and the Dominion Bureau of Statistics has been repeatedly urged to extend its statistical work in this field. The taking of the decennial census in 1931 offered an opportunity to initiate work along these lines, and a first approach to the problem, by means of a survey of the various types of institutions, after the manner of the United States Census of Institutions, covering hospitals, welfare institutions, etc., was decided upon when the schedules were drawn up.

The purpose behind the work is not merely to ascertain the numbers of men women and children committed to such institutions, but to obtain also pertinent facts and other information that will furnish a basis for the analysis of the social problems involved. In Canada at present, since most of these institutions are under Provincial Government control, comparable data do not exist owing to differences in methods of collection, to the fact that the provincial fiscal years extend over different months, and, in some cases, to the scarcity or absence of published information. The extent of these difficulties will be apparent from a perusal of Tables 1, 2 and 3, following, in which an attempt has been made to combine provincial figures in order to give statistics of institutions for Canada. In taking the 1931 census, arrangements have been made to take: (1) the usual census data for each individual who is resident in an institution; (2) special characteristics of the inmates which constitute them a social problem; and (3) general information as to plant personnel and finances for each institution.