

**2.—Amounts Available under the New National Health Grants, Years Ended Mar. 31, 1954-58**

Year Ended Mar. 31—	Child and Maternal Health	Medical Rehabilitation	Laboratory and Radiological Services	Total
	\$	\$	\$	\$
1954.....	500,000	500,000	4,300,000	5,300,000
1955.....	1,000,000	1,000,000	5,100,000	7,100,000
1956.....	2,000,000	1,000,000	6,000,000	9,000,000
1957.....	2,000,000	1,000,000	6,800,000	9,800,000
1958.....	2,000,000	1,000,000	7,800,000	10,800,000
<b>Totals.....</b>	<b>7,500,000</b>	<b>4,500,000</b>	<b>30,000,000</b>	<b>42,000,000</b>

The financial terms of the three grants are as follows:—

**Child and Maternal Health—**

Specified sums are extended to the Yukon and Northwest Territories and \$10,000 is made available to each of the provinces; the balance is allocated 50 p.c. on the basis of the average number of births over the previous five years and 50 p.c. on the basis of the average number of infant deaths over the previous five years.

**Medical Rehabilitation—**

Specified sums are extended to the Yukon and Northwest Territories and \$10,000 is made available to each of the provinces with the balance allocated on the basis of population. Projects submitted by the provinces must form part of a co-ordinated program, bringing together components of the rehabilitation process. Training and equipment projects are eligible for federal payment in full amounts spent by the province; provision-of-service projects are payable by the Federal Government to the extent of one-half the amount expended by the province. While the terms do not specify that provincial services must be maintained at the level existing at the time the grant is established, emphasis is placed on the fact that it is not intended to make rehabilitation a federal field of action but rather to assist the provinces in meeting what is, basically, their responsibility.

**Laboratory and Radiological Services—**

Distributed solely on a basis of population beginning at 30 cents per capita and increasing by five cents per capita per year for five years. Where services are concerned, the grant is on a matching basis, the costs of approved projects being shared equally by the Federal Government and the province; where training and equipment is involved, payment of the full amount expended may be paid from the federal grant. While the aim is to encourage extension of services, it will also assist the provinces in improving their existing services. The terms of the grant require that these be maintained at at least the standard and to the extent existing at Mar. 31, 1953.

**Health Advances with National Health Grant Support.**—Since the inauguration of the Program, it has been possible with the national health grant expenditures and with parallel increases in health expenditures by provincial and local governments, to achieve new levels in the extent and quality of Canadian health services. The progress made with the assistance and stimulation of the national health grants extends into many health areas and takes many forms. A partial summary of achievements follows.

Extensive surveys of provincial health personnel, facilities and services have been undertaken by all provinces. Information gained has already resulted in numerous program changes and, as the process of collating and analyzing the data from these surveys and other sources, such as the Canadian Sickness Survey, continues, a basis will be provided for further health planning in Canada.

Federal hospital construction grants have supplemented provincial and local funds in the construction of over 400 hospitals and hospital additions including general, mental, tuberculosis, chronic and convalescent hospitals. Under the