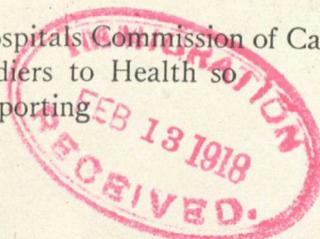


SALVAGING WAR'S WASTE

The System Successfully Employed by the Military Hospitals Commission of Canada for Restoring Wounded and Disabled Soldiers to Health so that They Can Become Self Supporting

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I WENT in, a fragment. I came out, a man."

A fine upstanding man, he is, too—this tall Canadian soldier who speaks. "Went into what? Came out of what?" I asked.

He smiled in gentle toleration of my ignorance. "The big machine called the M. H. C.," said he. "The machine that takes in disabled fighters at one end and sends them out able bodied men at the other." I found out afterward that one of his legs had been taken off close to the hip. It seemed to make little difference to his walk, and none at all to his spirits or his capacity. "I'm not going to let it," he said. "Why should I? A little thing like that!"

Officially, the letters "M. H. C." stand for Military Hospitals Commission. With equal truth, they signify "Making Healthy Canadians."

In Europe, the wounded Canadian soldier is cared for by the Canadian Army Medical Corps and the Canadian Red Cross. These act in close coöperation with the kindred organizations of the mother country. In fact, of the 22,000 invalided Canadians in the British Isles at the present time, about half are in non-Canadian Hospitals; though it may be added that the Canadian Hospitals caring for the other half make room also for a considerable number of non-Canadian soldiers.

From the time of their arrival in Canada—for the most part at Halifax in winter, but generally at Quebec in summer—until their discharge from the army, or until the close of their reëducation following discharge, the men are cared for by the Military Hospitals Commission.

The Commission carries on its work in a great chain of institutions stretching from

Cape Breton Island at the eastern to Vancouver Island at the western end of the Dominion. The first institutions opened were mostly large private houses, lent, and some of them furnished, by individual citizens and local organizations. For greater efficiency and economy in management, as the number of patients increased, it was found necessary to secure larger institutions, though most of the earlier and smaller convalescent homes have been retained.

Practically all the invalids returned to Canada have reached the stage of convalescence. Most of the Commission's institutions therefore are Military Convalescent Hospitals. These number fifty-two with accommodation, available or in sight, for more than 12,000 men. There are also nineteen sanatoria for tuberculosis, with similar accommodation for about 1,430. All but four of these sanatoria had been erected for consumptives before the war, and still treat civilian patients—caring for the soldiers either in an allotted part of the old premises or in new buildings added by the Commission. Finally, the Commission has secured a certain proportion of the accommodation in twenty-one general hospitals. These receive soldiers who relapse, or who develop fresh complaints requiring "active" rather than convalescent hospital treatment.

The trains for "walking" cases consist of standard and tourist sleeping cars, with dining cars for meals. For cot cases, special hospital trains are provided, and these are believed to surpass anything of the kind existing elsewhere. Both the Government Railway and the Canadian Pacific Railway have transformed a number of standard sleepers into hospital cars. Wide doors enable the men to be carried in on stretchers. The