

citizens. A somewhat similar situation obtained in Saskatchewan which, in addition to establishing geriatric centres, has made considerable use of the provisions of the National Housing Act for the building of hostels for the aged in connection with public housing developments. British Columbia, with large numbers of retired persons, has seen the development of considerable numbers of voluntary institutions and of boarding and nursing facilities operated under private auspices.

Recent Trends and Developments

In recent years, the trend throughout Canada has been towards specialized institutions both for health care and for sheltered accommodation. Within these broad groupings, different types of facilities for the aged have multiplied. There are, in most provinces, at least four main categories of welfare institutions for the aged: boarding houses, hostels, homes for the aged and nursing homes, in addition to specialized health care facilities in geriatric, chronic, general, tuberculosis and mental hospitals.

In all provinces there are provisions for public support and supervision of welfare institutions, and in some provinces financial aid is available for the construction of new institutions under public or voluntary auspices. In addition to broad-scale measures designed to assist the institution and benefit its residents as a whole, the provinces, and in some cases the municipalities, have provisions for needy persons requiring institutional care. These latter provisions usually form part of general assistance programs which are also supported by sharing provisions of the Unemployment Assistance Act.

Since 1956, the federal government has shared, under the Unemployment Assistance Act, in approximately half the payments to needy persons being assisted in various types of welfare institutions referred to in the Act as "homes for special care." These homes include the traditional types of welfare institutions, as well as homes for the aged, nursing homes, boarding homes, and hostel accommodation. Over 30,000 persons in homes for special care are currently covered by the sharing provisions of the Unemployment Assistance Act, and federal reimbursements to the provinces for needy residents exceed \$25 million annually.

This federal measure, and the Hospital Insurance and Diagnostic Services Act, in addition to providing federal funds for the maintenance of both health and welfare institutional services, have assisted in the rationalization of institutional accommodation. One of the most significant trends in the period during which these Acts have been in effect is the accelerated development of specialized institutional accommodation and services and better defined utilization procedures.

Facilities and Utilization

Available statistical data on facilities for the institutional care of aged persons derive from a number of different sources and must be considered as incomplete and not fully accurate. However, some information is presented in Tables IV-1 to IV-4 which is reasonably valid for the purpose of estimating the overall provision of beds with the various forms of institutional care, including both health and welfare institutions.

Table IV-1 shows the estimated number of beds by province; Table IV-2 indicates the percentage distribution; and Table IV-3 relates the bed estimates to the population 65 years of age and over in each province.

In aggregate, the estimate is that, inclusive of hospital facilities, approximately 109,400 beds, representing about 77.2 beds per thousand population 65 years of age and over, were allocated for the institutional care of aged persons in Canada in 1962-63. In other words, on any particular day, nearly eight of