

ances." We submit that the German system has proved a failure, after an experience of over thirty years.

In support of this, we would quote Dr. Brend's Report (1916) Page 5: "It is not perhaps quite accurate to say that no special investigation preceded the Insurance Act, for Mr. Lloyd George . . . during 1910 spent some weeks in Germany studying the system . . . But the German system could have been condemned at that time, and on its merits. Mr. Lloyd George's investigation must have been very superficial, for closer study of conditions in Germany would have shown that in that country, National Insurance, from the public health point of view, had been a failure, just as great as it has since proved in England. The general death rate in Germany has always been about 20 per cent. higher than in England, and after many years of sanatorium treatment, the death rate from tuberculosis in Germany was 50 per cent. higher than in England, where

no special efforts had been made. Infant mortality rate has always been very high, and between 1901 and 1910, the deaths of infants under one year in Germany averaged 187 per thousand births. Bad as is the British record, it does not approach these appalling figures."

Dr. Friedensburg, who retired about 1910 from the post of President of the Senate of the German Insurance office, after a service of 20 years, severely criticizes the system, of which the following charges are the most significant: (1) That State Insurance, specially designed to replace pauperism and charity, is itself merely pauperism under another form. (2) That the system fosters to an incredible extent, the German evil of bureaucratic formalism. (3) That the system has become a hotbed of fraud, and therefore a spreader of demoralizing practices and ways of thought.

The Connecticut State Report of 1919 gives the following extracts from an address on "Failure of German Compulsory Health Insurance—a War Revelation," delivered by Frederick L. Hoffman, LL.D.: (1) "Instead of substantially improving the economic conditions of the German wage-earners, the benefits provided through social insurance were never adequate to meet more than the requirements of a **minimum standard of life.**" (2) "Contrary to wrongful assertions concerning the physical progress of the German people under social insurance, the comparative statistics of physical well-being prove conclusively the prevalence of a large amount of constitutional disease, lack of disease resistance, want of normal physical development, etc." (3) "In the direction of sanitary reform the corresponding progress throughout the United States was measurably in advance of German achievements." (4) "The sickness rate among German wage-earners has not been reduced, but remains at a figure far above any corresponding conditions of ill-health disclosed by impartial investigations in this country." (5) "After all, the most lamentable consequence of social insurance in Germany has been the measurable lowering of the social and individual morality of the German people. The system in every direction has fostered dishonesty, deception and dissimulation. Imposition upon the funds, the drawing of sick pay during periods of unemployment as the basis of certificates of illness wrongly issued by attending physicians, had become the rule rather than the exception throughout Germany at the outbreak of the war."

In conclusion, their findings are as follows: "We must grant that some of the arguments presented to us in favor of a compulsory measure appeal strongly to the humane sentiment and are convincing to the extent that more should be done by the state to improve living conditions and prevent disease; but they have not brought conviction to our minds that any of the measures heretofore presented should be enacted in Connecticut. Upon the evidence which has been presented to us and after a careful study of investigations made elsewhere, we feel that our state should not be the first in the United States to experiment with a plan or system which has not operated effectively and satisfactorily in other countries, and which must of necessity involve the expenditure of a large amount of money—too large a burden to be imposed at the present time."

The root of the failures in former schemes for the improvement of public health, is from first to last the absence of expert knowledge among the framers and administrators of the measure, and their omission to obtain expert criticism of their proposals, or their disregard of this criticism when given.

A careful study of the working of Acts in Germany and Great Britain seems to show that these conduce to a development whereunder a large body of undesirable citizens is produced, and fostered; at the expense of the self-respecting wage-earners, and the country as a whole.

The inevitable result must of necessity be that all those, wherever now resident, looking for poor relief, will

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