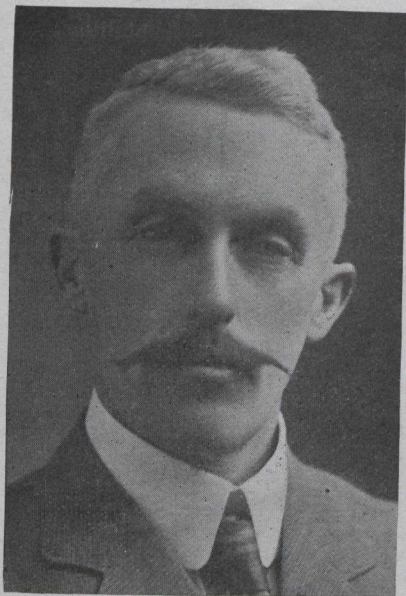


BIG MUNICIPAL MEN.

BY AJAX.

DR. H. A. STEVENSON, MAYOR OF LONDON.

Three essentials are necessary in the make-up of the good municipal man — common sense, a knowledge of human nature, and how to apply to both the sense and knowledge. To these might be added a sticking to the job. Many men who have been elected to municipal honors in Canada have given up the job at the end of the first term — they have found the work more onerous than honorary. And those who held on have not always been rewarded, the average citizen not realizing and consequently not appreciating their work or worth to the community, so that it is well to record the opposite when such becomes a fact. In Dr. Stevenson, the Mayor of London, and President of the Union of Canadian Municipalities,

is recorded a notable fact, for not only has he served as an alderman of his native city, but has served his fellow citizens as a member of the local Utilities Commission, a member of the Port Stanley Railway Commission and vice-president of the Hydro-Electric Association of Ontario. Surely such a record should be sufficient apprenticeship to the mayoralty. At least this is what the ratepayers of London, thought when they elected Dr. Stevenson mayor last year and re-elected him for a second term, this year. That the people's confidence has not been misplaced is illustrated in the mayor's splendid war work. A situation was created in London by the war, the same as in other municipalities, that required special attention and initiative. And Mayor Stevenson rose to the situation, and made London a leader in war work — another record that he may well be proud of.

Mayor Stevenson is a medical man — he took his M.D. degree in Toronto University, though he was partially educated in Montreal. As a military doctor he ranks as senior major. He is unmarried, probably being the only bachelor mayor in Canada; though a fine fellow like Dr. Stevenson ought to have been married long ago. But there is plenty of time for the mayor is but in his early fifties, and good men are too scarce to-day to remain in single life.

This year Mayor Stevenson succeeded as President of the parent municipal union Ald. Boyd, of Montreal, who had been appointed to the chairmanship of the Grain Commission of Canada. This year, too, the Union will hold its annual convention in London, so that Dr. Stevenson, as Mayor of this city and President of the Union of Canadian Municipalities has a heavy task before him, for, it is expected that this year's convention will be the most important in the Union's history. The subjects to be discussed are eminently national in character, and much depends on the conclusions as to whether or no the municipalities will take up the larger questions brought about by the war.

WINNIPEG PARKS.

According to the annual report of the Public Parks Board, Winnipeg has park properties to the extent of 673 acres, which cost for the land \$534,154. This area is divided into twenty-one parks and a large square of four acres. Included in one of the parks is a zoo, which must be paradise for the kiddies. The Park's Board also control the cemetery, which shows a surplus.

THE MUNICIPALITY AND VENEREAL DISEASE.

The first essential in the control of the venereal diseases, Syphilis and Gonorrhea, is the inclusion of these in the list of reportable diseases. As stated in our last bulletin, it was not feasible to make any attempt to control these diseases until we had some solution in sight. Now we know that they are curable in the early stages in the large majority of cases, and sufficient work has been done elsewhere to point out the obvious mistakes and pitfalls incurred in any campaign on propaganda having to do with the control of these diseases. We are therefore in a position to make progress if we had the first essential, making these diseases reportable ones just like Diphtheria or Scarlet Fever. If it is to the interest of the community to have measles reported, why not in the case of these other diseases that have been undermining the manhood and womanhood of the nation.

People are appalled at the tens of thousands of cases occurring among soldiers. It is doubtful, except in the case of Canadians, whether there has been any material increase in the number of cases in the army over that in civil life. The difference is this, that every case in the army is reported and therefore known, while in civil life the cases are not reported, and remain unknown. In the army because the cases are known they are treated early, and a large proportion cured, or arrested, whereas in civil life a large number of cases are never cured. The war has presented an opportunity for throwing a bright light on an area which had always remained in darkness; the amount of actual disease was approximately the same before as it is now. In the case of our own soldiers there has been undoubtedly a larger number of cases of venereal disease than among a similar number of men in civil life. More than ever, therefore will we need to know the cases of this disease occurring in order to insist that they become cured, where possible, and cease to be centres for the infection of others.

There are twelve states and one territory in the United States now demanding the reporting of Venereal diseases.

Though Venereal disease claims as many deaths and causes probably an infinitely greater amount of misery than Tuberculosis, nothing like the amount of money is being spent in trying to control the disease as is spent in stamping out Tuberculosis.

Thus, four years ago in the fifteen states where statistics of expenditure were available, \$5,859,000 was spent in the prevention of Tuberculosis, and \$11,000 in the prevention of Venereal disease. This, of course, is perfectly illogical. Persons with Venereal disease, whether innocent or guilty under the social law, are a menace to the public health. By the Department of Public Health no discrimination can be made. Such people are unfortunate, and from our standpoint must, if possible, be cured. If cases were reported we could insist that many of them accepting treatment at the Venereal disease clinics completed their treatment instead of stopping when half done. With this an accomplished fact, and with free diagnosis and treatment, we would have some of the essentials necessary to carry on a useful campaign to improve present conditions. — Health Bulletin of Toronto.

PROTECTION OF CHILD LIFE.

The importance of infant welfare work at this stage in the nation's crisis is daily becoming more generally recognized by all classes of the community. For many years our public health authorities have been sowing on what seemed very barren ground, but the outpouring of the nation's blood, the willing sacrifice of thousands of the best and most virile of the race, has caused the apparently lost seed to germinate, and there are now prospects of an abundant harvest. Had we looked after our infant life during the last forty years there ought to have been to-day between the ages of 18 and 40 another 1,300,000 men available for the fighting forces. In other words, we have allowed, through our blindness, thousands of men to die in their infancy, male babies born often healthy and in all respects capable in due time, if proper attention had been given them, or if their home conditions had been better, of growing up and doing their full duty to the nation as our splendid sons to-day are doing in the battlefields of the world. Because of ignorance which is curable, because of improper conditions around them which are removable, thousands of these fellow citizens of ours whom we shall 'too late' wished we had saved, now die within twelve months of their arrival in the world. — W. H. Edmunds, in Journal of the Royal Sanitary Institute.