

narily associate with childhood, e.g. whooping cough and measles, assume the proportions of killers of both children and adults when they break loose in isolated bands. Possibly one of the most remarkable examples of the susceptibility to disease of people living in isolated communities is a report of an epidemic of tuberculosis in a residential school at Norway House. In this case it was found that the cook had an open lung cavity discharging live organisms. Another peculiarity of the health problem of the Indians is their proneness to trachoma. This disease is prevalent particularly among the Western Indians, to the extent that it has been necessary to employ a specially qualified trachoma control officer.

16. Since most contagious diseases are readily transmissible from person to person under unhygienic conditions of living, and tuberculosis is outstanding in this respect, it is probable that the health conditions of the Indians cannot be adequately remedied until their economic status and mode of life are greatly improved.

17. Careful investigations initiated by the service have confirmed a generally held opinion among medical officers caring for the Indians, that poor nutrition plays an important part in lowering their standard of health. Eating habits are in many cases dictated by the necessities of the hunt, which sometimes lead to intervals of semi-starvation. With the coming of the whites they have shown a natural desire to secure foods which are to them luxuries, such as white flour, bacon, lard and other high calorie foods which do not provide the essential elements for a balanced diet. Their infant mortality rate is high and this may be associated in some measure with their inability to secure or properly prepare suitable food for children. They have little idea of hygienic methods of preparing or caring for food. Among the Indians, in contrast to the Eskimos, and especially among those who have adopted white man's food, dental disease is very extensive and is probably an important contributor to their poor health.

IV. *Difficulty and Complexity of Providing Services*

18. Inaccessibility and dispersal are the two major factors that dominate the problem of providing health care for Indians and Eskimos. This is true in even the settled parts of the country where very frequently the reserves are relatively isolated and served by poor roads. Many of the bands are not large enough to require the full-time service of a doctor or a nurse. Unless it happens that two or more reserves are within a few miles of each other the only way to provide medical attention has been to retain the part-time services of a nearby doctor.

19. In the majority of instances the homes on the reserves are not suitable for the care of sick people. This means that a higher proportion of sick Indians should be hospitalized than would be in the case of the whites. This involves in many cases providing food, clothing, and transportation, to and from hospital, and because of the condition of many of the homes hospitalization must be of longer duration and there remains a greater chance of relapse on return to their homes. This is in part a reflection of the general economic position of the Indians and is one of the important factors contributing to their lower standard of health. It is also apparent that the health and welfare of the Indians and Eskimos are interdependent.

20. The two factors of inaccessibility and dispersal assume greater importance in the unsettled thousands of square miles of the hinterland, where ease and mode of travel are dictated by weather and season. Practi-