



Infant Welfare Work in War Time

In These Days of General Economy, the Geatest Measure is the Protection of Our Children

By MONA E. CLARK

THREE years of the great world-war are over, and the fourth is well begun. We Canadians have learned the meaning of sacrifice and courage; of saying good-bye to splendid boys, and of greeting worn-out men with the same brave smile. We have found our hearts; but have we learned that the heart must work hand-in-hand with the brain? Are we doing all that a young and vigorous warring people can do, to minimize the terrible results of war?

Twenty years hence, Canada will need a mighty race of men and women. She will need everyone of the Babies of To-day—the most valuable asset of our state. Now, what is Canada doing to safeguard this source of wealth, what is she doing in comparison with other countries? Since we have no Federal Bureau of Child Welfare, it has been necessary to make use of the excellent report of Dr. Grace L. Meigs, of the United States Children's Bureau, to obtain certain facts regarding the different roads which other nations have travelled, in their search for Better Babies.

Every country overtaken by war in 1914, has done a vast work in the protection of infancy and maternity. Strange to say, the nations hardest pressed,—France and Belgium—have done the most.

England is watching its birth rate and infant death rate, with as great concern as its casualty rate. Due chiefly to measures passed in the House, for the welfare of babies and mothers, the Infant Mortality rate for 1916, was 91 per 1,000 births, the lowest for any year of the war. Lord Rhondda, President of the Local Government Board, declared, in the spring of this year, that the lives of 1,000 babies can be saved each week, by the still greater efforts which are being made. With this splendid goal in view, the Motherland has much to be proud of.

With the far-sighted alacrity that characterizes the French race, Paris, within five months of the declaration of war, had made public provision for its babies, before, at, and after birth.

In Belgium, such strenuous efforts have been made to save both mothers and children, that conditions are now slightly better than in normal times. In the face of the terrible conditions existing there, this is probably the most encouraging triumph that Infant Welfare work has made.

Dr. Langstein, director of the movement for the protection of infancy in Germany, says, "It is just as important a patriotic task, to serve children who need care, as to serve the soldiers in the field."

Even Austria, a country slow to move, has had to close many of its institutions since the war, because mothers, by reason of Government grants, are able to remain at home with their children.

Our American ally has not fallen behind, and in fact, has gone so far as to institute

government investigations in various cities, to learn why their infant death rates are so high, why certain diseases are so prevalent, and what are the best methods to be followed in improving conditions. So intense is the interest in the welfare of children, that a nation-wide association has been formed, through whose efforts the death rates in certain localities have been reduced 50 per cent.

Canada's Part

CANADA has done something for the cause too, probably even more than the meagre vital statistics given us, would indicate. Montreal has established a splendid system of milk distribution; Ottawa has a staff of visiting nurses working under the supervision of the local Board of Health; Winnipeg and Calgary are doing excellent work. Hamilton has gone even further, and is a striking example of the results that could be effected if the whole of Canada were roused to action. This city has formed an association for Better Babies, which is maintained by private support and which last summer induced the Provincial Board of Health, to make a survey of the Hamilton

babies, such as has been made by the Federal Bureau at Washington.

But with the larger cities, Child Welfare work ends. We have no Federal Bureau, and only one or two Provincial Governments—the Ontario Board of Health being a very potent factor—are interested, in the movement. In Ontario alone, 1 in every 10 children dies before reaching its first birthday. This rate, for a young country, is high, particularly so when every life is a necessity, as in these times.

Certain definite measures must be taken, if Child Welfare work is to have any far-reaching effects in the Dominion of Canada.

1. The law providing for the registration of births, should be enforced, that a basis may be laid for the formation of intelligent plans.

2. The establishment of the system of MOTHERS' PENSIONS throughout the country, should be recognized as the prime factor in keeping together the mother and her child.

3. Public Health nursing for prospective and nursing mothers and for children before and during school years, should be extended to the smaller towns, and to the rural and isolated districts.

4. The training of voluntary nurses, to take the places of our public health doctors and nurses now at the front, should be regarded as an absolute necessity.

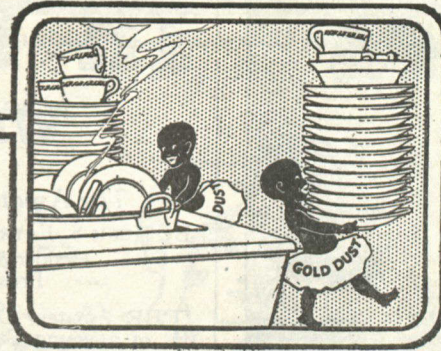
5. Child Welfare activities should strive for correlation, since success results only through united effort.

In conclusion, let Canada show an increased solicitude for the lives and welfare of its children.

Babyhood

What is the little one thinking about?
Very wonderful things, no doubt;
Unwritten history!
Unfathomed mystery!
Yet he laughs and cries and eats and drinks,
And chuckles and crows, and nods and winks,
As if his head were as full of kinks
And curious riddles as any sphinx!

—J. G. Holland.



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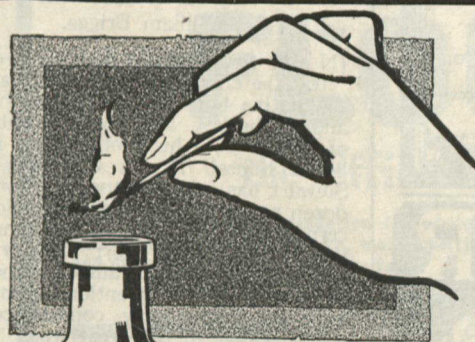
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