HOW A MEDICAL HEALTH OFFICER CAN BECOME A COÖPERATIVE SOCIAL FORCE IN RURAL DISTRICTS

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IMAGINE that it may not be without value to the younger public health officials and other workers to have a retrospect presented of the evolution of public health organization and methods of work during the thirty-five years since the first Provincial Board of Lealth in Canada was established in Ontario, in 1882, and which has become the model for most others in Canada. The Ontario Public Health Act of 1884 based upon the Consolidated Public Health of England of 1875, has also become the model upon which the public health acts of the several provinces have been based.

The first public health legislation which I am aware of in Canada was that of 1833, which provided in Upper Canada for the formation of Local Boards of Health by Order-in-Council during epidemics. It was the outcome of the cholera in 1832. In 1849, when under the Baldwin Lafontaine Government, the Municipal Act of the United Provinces of Upper and Lower Canada was passed, by which townships, villages and towns became the units of municipal governments; an Act was also passed providing for a Central Board of Health being appointed by Order-in-Council, to continue during the period fixed in Order, whenever public health necessitics demanded. It will be remembered that 1848–1849 were also cholera years. Under this Municipal Act provision was made for health committees being appointed and health by-laws being passed by each council.

Such then was the situation in Canada until 1882 when the first permanent provincial board was formed and until 1884, when the Ontario Public Health Act was passed providing that each municipal council should annually appoint a local board of health