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## Special Articles

### EVOLUTION OF LOCAL PUBLIC HEALTH: COUNTY OFFICERS

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The study of the evolution of local self-government, whether in England or in Canada, forms one of the most attractive fields of study, whether in the field of legislation or sociology. How it developed rapidly in England in the decades succeeding the first Reform Bill of 1832, and how Lord Durham's report in 1839, as worked out by Lord Sydenham, in 1841, became the foundation of our splendid system in Canada, are now matters of history. As has been pointed out in a previous article in the *PUBLIC HEALTH JOURNAL*, the evolution of public health in Canada, as in other countries, had in the pre-scientific period of modern medicine, to depend upon the occurrence of some epidemic, during which spasmodic, and often temporary, progress was made, whether in legislation or in the enforcement of health regulations.

In this Canada has not been different from other countries; but it may not be without interest to point out to the readers of the *JOURNAL* how existing legislation in Ontario has been brought about. A provision existed in the statutes of Upper and

Lower Canada for the establishment of a central Board of Health, by Order-in-Council; but this provision was repealed when the Provincial Board of Health was established under the Act of 1882. Its duties were to educate the public and advise municipal authorities on matters of health; while the latter were supposed to have a health committee of the municipal council, engaged in carrying out the laws regarding nuisances, etc, found in the Municipal Act. After two years' serious effort, the Provincial Board of Health had to report at the end of 1883 that there were but 50 local Boards of Health in 40 counties, and that there were 12 counties with no boards; that there were in all Ontario but four medical health officers, and but two sanitary inspectors (one of whom was paid).

As executive officer of the Provincial Board, I felt that unless some compulsory law were passed requiring municipal councils to appoint Local Boards, progress in local health work would be practically impossible.

Hence, an appointment was arranged