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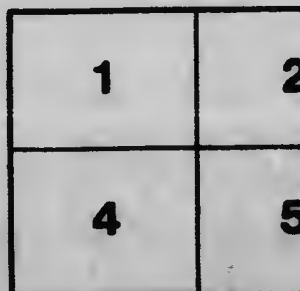
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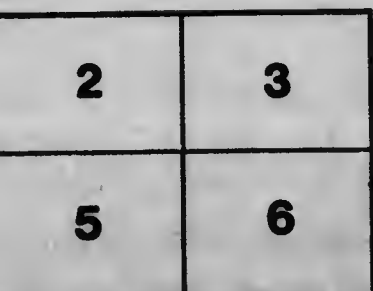
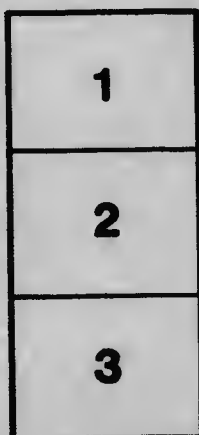
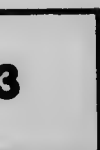
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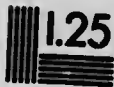
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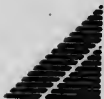
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The Crusade *for* Good Health

Report of an address by
JAS. W. ROBERTSON,
Chairman of Executive Committee



**The Annual Campaign for the Enrollment
of Members, as recommended by the
League of Red Cross Societies,
will be conducted in May 1921**

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The Crusade for Good Health

Report of an Address by Dr. Jas. W. Robertson

Chairman of the Executive Committee
Canadian Red Cross Society

Many people wonder why the Red Cross did not stop its work when the war ended. That was what it did after the South African War and it was expected to do the same after the Great War. The officers of the Canadian Red Cross did not intend to go on. They were eager to be demobilized, glad to think that having done their bit during the war they could with good conscience accept release from Red Cross duty and step back into the routine of private life. But the Red Cross was not to be allowed to stop. It was destined to take on the new obligations of a peace-time program, even before it had completed its war work.

Revealed by the War

The war had made vividly clear some things which a quarter of a century of peace might not have revealed with so much impressiveness. The war had given us a revelation, for it may fittingly be called a revelation, of the relative worth and ability of the ordinary man and woman. During the war the ordinary soldier, seaman and airman stuck to their duties and did them with a courage and endurance which have never been surpassed. The spirit of the race had not decayed. But the war had revealed also the shockingly poor physical condition of a great proportion of the men of the Empire. In the alleged progress of civilization, in the organization of industries, in the development of big business for creating and controlling wealth, regard for the intrinsic worth of human life—of men and women in good health living and working under wholesome conditions—had been to a large extent neglected. Think of the significance of this: During the last year of war, from the 1st November, 1917, to 31st October, 1918, the number of men called up to the army in Great Britain was 2,425,184. A summary of the results of the medical examination of them shows the following facts: of every nine men, three were fit and healthy, two were in infirm health, three might be described as physical wrecks, and one as a chronic invalid with a precarious hold on life. Since that was the physical condition of the men at their most vigorous age, what would be the condition of health among the women and children? In other countries, the examination of the men called to the colours revealed conditions somewhat similar. In Canada, of the 361,605 draftees under the Military Service Act, the medical examination found 181,229 of them, or about

ue-half of them, physically unfit for full service in the field. It is not reported that the disabilities were the result of active disease; they were evidently in most cases the consequence of poor nutrition, neglect of personal hygiene and unsanitary conditions of working and living.

Record of Red Cross Raises Expectations

It was inevitable that serious consideration should be given to such an alarming state of affairs in respect to health and that action should be taken for the purpose of remedying it as soon and as far as possible. Remembering the great part which the Red Cross had played during the war as an auxiliary to the governments, the minds of statesmen and others naturally turned towards it as an organization which could help the governments immensely in the efforts which they must make for the improvement of health and the prevention of disease. In consequence soon after the Armistice in 1918, with the approval and endorsement of the Governments of the five Great Powers (Great Britain, France, Italy, Japan, and the United States) a committee of their Red Cross Societies was constituted "to formulate and to propose to the Red Cross Societies of the world an extended program of Red Cross activities in the interest of humanity."

Conference of World Authorities on Health

That Committee of Five called a conference of medical experts who met at Cannes, France, in April, 1919. The conference is regarded as one of the most remarkable gatherings of authorities on questions of health ever held. It included many of the foremost men of America, France, England, Italy and Japan.

One of the conclusions of the conference was in the following terms:

"Recognizing the prevention of disease and the protection of the health of the people as a primary responsibility and function of the Government, a non-political organization such as that of the Red Cross, will be able by the education of the public and many other ways to stimulate, support and aid the Government in its health-work."

League of Nations and League of Red Cross Societies

Following the Conference at Cannes, it was agreed by the five Great Powers, and the other nations participating in the Peace Conference at Paris, to include in the Covenant of the League of Nations an article whereby they agreed to encourage and promote Red Cross Societies which would carry on a peace-time program. Article XXV of the Covenant reads as follows:

"The members of the League agree to encourage and promote the establishment and co-operation of duly authorized voluntary national

Red Cross organizations having as purposes, the improvement of health, the prevention of disease, and the mitigation of suffering throughout the world."

As a next step, the League of Red Cross Societies was organized at Paris, May 5th, 1919. Its purpose is to associate the Red Cross Societies of the world in a systematic effort to anticipate, diminish and relieve the misery produced by disease and calamity.

The Chairman of the Board of Governors of the League of Red Cross Societies has issued the following statement:

"The Red Cross Societies of the United States, Great Britain, France, Italy and Japan for several months worked incessantly through their representatives to devise an agency which could adequately cope with world problems of disease and disaster.

"From the outset it was clear to us all that there was no institution in the world so well adapted to this task as the Red Cross, because of the peculiar hold which it has upon the hearts of all peoples, irrespective of differences of race and religion, because of its fifty years of honorable service in all quarters of the globe, because of the anxiety of its membership not to lose the opportunity for service when war service was no longer needed—because, in short, of the consensus of opinion, medical and lay, that the health problems of the world can never be solved by doctors alone, nor by governments alone; but must enlist the hearty volunteer co-operation of the peoples themselves; and no organization can mobilize the peoples of divergent views as can the Red Cross."

Canada Takes Her Place and Part

Thus it came about that Canada, as one of the signatories of the Peace Treaty, agreed to encourage and promote the establishment of its Red Cross Society with a peace-time program. An amendment to the Act of Incorporation was granted by Parliament in 1919 and in it the new and additional purpose of the Canadian Red Cross Society is set forth as follows:

"In time of peace or war to carry on and assist in work for the improvement of health, the prevention of disease and the mitigation of suffering throughout the world."

The Red Cross can best accomplish that purpose as a voluntary organization by taking the course which it followed during the war, namely that of being an auxiliary to the Government. We of the Red Cross must ever bear in mind that the responsibility for the enactment and administration of measures for the protection of the health of the people rests with the Governments. It has not become a duty of the Red Cross to formulate or to administer public health measures; but the world's foremost authorities have set it forth as part of the duty of the Red Cross to stimulate and maintain the interest of the public in health reform, to educate the

RED CROSS' NEW WORK.

The Canadian Red Cross Society will inaugurate its crusade for good health by a public meeting in Toronto on March 3, at which His Excellency the Governor-General will deliver an address upon the reasons and objects of this work.

In becoming a member of the League of Nations Canada subscribed to Article XXV, the Covenant, which reads as follows:

"The members of the League agree to encourage and promote the establishment and co-operation of duly authorized voluntary National Red Cross organizations, having as purposes the improvement of health, the prevention of disease and the mitigation of suffering throughout the world."

For this reason the Red Cross did not suspend its work after the war as it did after the South African war, but secured from Parliament in 1919 an amendment to its charter to enable it to carry out its new and additional duties. One revelation of the war was the shockingly poor condition of the men of the British Empire. In Canada medical examinations found 181,229 out of 1,605 draftees under the Military Service Act, or about one-half of them, to be physically unfit for full service in the field. The disabilities were not the result of active disease, but evidently in most cases the consequence of poor nutrition, neglect of personal hygiene and insanitary conditions of working and living.

The Red Cross has undertaken as part of its duty to stimulate and maintain the interest of the public in health reform, to educate the public, and thereby create public opinion in favor of supporting even better public health service. It does not desire to undertake or to compete with work already being carried on by official authorities or to assume work which is being done by other existing voluntary organizations. Its function is to strengthen and assist them financially and otherwise in the new work to which it has been called by the League of Nations.

The Globe, Feb 29/21

dealing with its own questions of health and sanitation. Each Provincial Division of the Red Cross is practically autonomous and, within the limits of the policy of the Society, may arrange the form or forms of its co-operation with the Provincial Government as seems to it necessary or expedient.

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public and thereby create public opinion in favor of supporting ever better health service. As a voluntary organization with a nation-wide membership, it can do much to assist the official health authorities to influence multitudes of individuals to understand and advocate the continuous improvement of personal hygiene, wholesome sanitary environment, adequate Public Health Medical and Nursing Service, and all those measures and services which under modern conditions are so necessary and desirable.

War-Work Yet to Do

In undertaking its new work in time of peace the Red Cross gives up none of its former character. The Society will be as ready, and better able than before, to serve humanity should war again disturb the world. It will also maintain itself in readiness to give help to local, national or international authorities in time of pestilence, famine or other disaster. The war work of the Society is not yet finished. In ministering in various ways to the comfort of the men who have suffered physical disabilities, it has a duty to perform that will continue many years to come. Work of this sort is being carried on quietly and unostentatiously in all the provinces of Canada. Sometimes it means the service of a few sympathetic people in a village or small town. Sometimes it requires the aid of numbers of visitors and also careful organization in support of a lodge or other means of humanizing and socializing the otherwise too professional and official atmosphere of a hospital. In these and other respects the Red Cross stands ready to co-operate as auxiliary to the Militia Department, the Department of Soldiers' Civil Re-establishment and the Soldier Settlement Board.

Red Cross as Voluntary Auxiliary

As stated at the first meeting of the General Council of the League of Red Cross Societies, held at Geneva, March 2nd-8th, 1920, and attended by representatives of 27 different nations, the three principal duties of the National Red Cross Society in the field of health service should be:

- (a) To stimulate and maintain interest in public health work;
- (b) To support and, if need be, supplement the work of Government Agencies;
- (c) To disseminate useful knowledge concerning health through demonstration, education and otherwise.

Each Province in Canada has the responsibility of dealing with its own questions of health and sanitation. Each Provincial Division of the Red Cross is practically autonomous and, within the limits of the policy of the Society, may arrange the form or forms of its co-operation with the Provincial Government as seems to it necessary or expedient.

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Courses in Public Health for Nurses

Take an example from the Province of Ontario. Although more than one Department of the Government requires public health nurses, properly qualified, no provision had been made for an adequate course of instruction and training in Public Health Nursing. After conference between the Provincial Division of the Red Cross Society, the University of Toronto and others interested in health work in the Province, it was arranged that a course in Public Health Nursing should be given by the University. The Red Cross agreed to meet the expense for a period of three years. It also granted scholarships of \$100 each to ten nurses to enable them to take the course.

Similar provision for courses in Public Health for graduate nurses has been made by the Red Cross Provincial Divisions in other Provinces.

Nurses and Community Health Centres

Another example: When the Legislature of Ontario had voted a sum of money sufficient to provide eight public health nurses for service throughout the Province, the Chief Health Officer for the Province approached the Ontario Division of the Red Cross with a request for a grant of money whereby an additional number of nurses could be provided in order that the Province might get public health service in larger measure and at faster rate than was practicable by the amount voted by the Legislature. After consultation, the Red Cross offered to provide eight nurses to serve under the Chief Health Officer for the Province. The Red Cross pays the salaries and expenses of these nurses and thus properly plays its part as auxiliary to the official Health Department. These nurses work in pairs, one pair within each of the eight Health Districts into which the Province is divided. They are expected to stay several weeks in each place they visit and to promote the establishment of a Community Health Centre. The hope has been entertained that as a result there may be established about twelve Community Health Centres in each of the eight Health Districts of the Province within a year. That would be an advance which could properly be regarded as the beginning of a new era of Public Health Service in Ontario.

This is what Dr. J. W. S. McCullough, the Chief Health Officer of the Province, has said about those nurses and the outlook for service by the Maternal and Child Welfare Division of his Department.

"Their business will be to interest the local newspaper man, the clergy, physicians, teachers and influential members of the place in forming a Community Health Centre. Mothers from the adjoining rural neighbourhood will be encouraged to come to the meetings. For a month or longer the District Nurse will carry on her course of instruction and the Community Centre will

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be encouraged to establish a nurse to do similar and other public health work when our nurses move on to another locality. The District Nurse will have a small car to enable her to get about the country. Her work will be reinforced by a small and inexpensive exhibit, lantern slides, etc., and in addition we shall have a motor travelling exhibit and clinic manned by a doctor who will be a specialist in children's affections. To this clinic the mothers will be encouraged to bring their babies so that they may be examined as to their physical and mental and other conditions; and defects, if any, will be pointed out. This work will not in any way interfere with the physicians. We expect to be the ally of the local physicians and instead of treating cases, which is not our intention, those requiring attention will be referred to the family doctor. If the local Community Centre is unable entirely to finance the project of a visiting nurse it is hoped that our funds will permit of giving financial assistance in such places as seem to require it. The Board has no fear of failure of such a plan. It is felt that its value will be so rapidly demonstrated that the demand for visiting nurses will come from all over Ontario, and instead of our having to urge the need of further appropriations upon the government that the public will do this for us and that the members of the legislature will soon recognize that the greatest wealth of a country rests not altogether in its well-kept farms and the great industries, but upon a healthy, sturdy and vigorous growing race of children."

Instances from Other Provinces

This is not the place in which to make extended reference to all the kinds of service which the Provincial Divisions of the Red Cross are rendering to the public in co-operation with the official Public Health authorities in their respective Provinces. But it is appropriate that I should cite an example from each to illustrate the fact that the principle of voluntary auxiliary aid is being applied according to the particular needs of Provinces and localities. The peace-time work of each Provincial Division will be dealt with adequately elsewhere.

The British Columbia Division has undertaken to train and maintain twelve nurses for Public Health work in rural districts; in Alberta earnest efforts have been made to provide and maintain nursing and hospital service in outlying districts; in Saskatchewan special relief work was administered for the Provincial Government and Nursing Outposts have been established; in Manitoba nursing stations have been established in unorganized districts and are being carried on under a joint committee of three representatives of the Red Cross and two of the Provincial Board of Health; in Quebec the Red Cross has encouraged the establishment of health centres and meets the expense of providing a course in Public Health for graduate nurses at McGill University; the Red Cross in New Brunswick has provided the money

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for the training of nurses in Public Health duties and has undertaken educational Public Health work throughout the Province; in Nova Scotia the Red Cross operated two Public Health Caravans during July and August and has assumed the responsibility for the maintenance of several Public Health nurses; in Prince Edward Island the Provincial Division has arranged to provide one Public Health nurse to carry on educational and organization work throughout the Province.

Public Health Work in Toronto

It is the duty of the Red Cross leaders and other workers to inform themselves of what the Public Health authorities in their several localities are doing and what kind of help they need and want from the Red Cross. Take, for example, the City of Toronto. Comparatively few people in that city itself, and certainly not many of the general public of Canada, know that Toronto stands in the very front rank among all the cities on this continent in its Public Health Service. The following facts illustrate something of the great progress which has been made. Some ten years ago the Toronto Health Department dealt chiefly with regulations which were regarded as sort of police supervision of sanitation. It now deals chiefly with true public health work of an educational and preventive nature.

Some of the most striking advances within the ten years period are as follows:

	1909	1919
General death rate (per thousand of population)	15	11.4
Infant death rate (per thousand living births)	139	86
Typhoid death rate (per 100,000 population)	44.2	2.6
(This decline coincides with improvements in sanitation, milk and water supplies.)		
Tuberculosis death rate (per 100,000 population)	130	84
Public Health Nurses	2	99
Child Welfare Clinics	0	22
Expenditure	\$84,750	\$535,000
Expenditure per capita	\$0.27	\$1.19

There is what might be regarded as a comic-economic side as well as a serious health side to the question of the supervision of the milk supply of the city. In 1911 the inspection of the milk supply showed the addition of water in 41 per cent of all samples examined and that to such an extent that 8 per cent of all the city's milk was really water and not even good water. That has now been almost entirely corrected. Someone has sought to soothe the expense-of-

it critic by asserting that had the watering of the city's milk continued, as in 1911, the citizens would now be paying for water in their milk an amount equal to the total expenditure of the Health Department.

Medical inspection of schools was introduced in 1910. Each pupil is given a complete physical examination twice in his school life and special examinations are given as required.

Dr. C. J. Hastings, the very capable head of the Health Department, states that he considers that 99 per cent. of the progress is due to the education of the public in the necessities and possibilities of health reform. He says he will welcome the assistance of the Red Cross towards improvement and progress.

Plan of Working Together

What has been accomplished in Toronto by the official Public Health authorities can be done in other places in Ontario and throughout Canada. The Red Cross can now do its share in helping to create public opinion in favor of health reform; it can foster a desire, an ambition, a determination to secure for the community the greatest practicable measure of efficient health service. The first step every Branch of the Red Cross should take, in preparing its peacetime program every year, is to inform itself of what the official Public Health service is doing in its area. The next step is to enquire of the official health authorities what form of help they desire from the Red Cross. The third step is to give such help as fully and as heartily as may be practicable. The Red Cross may then go on with any further or other form of proper voluntary activity which its Executive may approve and its funds may permit. Thus by intelligent and cordial co-operation between the official and voluntary bodies the interest and confidence of the public in the work of both will be increased. This plan of working together appears to be the best means whereby the new purpose of society can be realized in the improvement of health, the prevention of disease and the mitigation of suffering.

The Red Cross and Other Voluntary Organizations

For a time there was a feeling, if not a suspicion, among other voluntary bodies seeking to promote good health movements that the Red Cross Society would seek to monopolize the field and would displace or dispossess them. Such a fear or expectation was not well founded. Those who were thus influenced did not know the Red Cross Society or its workers. The Red Cross does not desire to undertake or to compete with work already being carried on by official authorities or to assume work which is being done by other

existing voluntary organizations. Its function is to strengthen and assist them. As one means towards doing that, grants of money have been made by the Red Cross to The St. John Ambulance Association, The St. John Ambulance Brigade, The Canadian Association for the Prevention of Tuberculosis, The Canadian National Council for Combating Venereal Diseases, The Canadian National Committee for Mental Hygiene and The Child Welfare Section of The Canadian Public Health Association.

An Example from the Ottawa Branch

In carrying out that policy locally, the Ottawa Branch of the Red Cross voted \$1,000 to assist the Day Nursery, and an equal amount to the May Court Club. Both of these organizations have been carrying on very useful beneficent work in the city for many years. The Red Cross also voted \$1,000 to the Local Board of the Victorian Order of Nurses. These bodies are all undenominational and carry on service for health and relief which is beneficial to the whole community. The local Red Cross also granted \$500 to the Ottawa Centre of the St. John Ambulance Association. There is plenty of room and great need for all the good work which the various voluntary organizations can carry on. The best all such bodies can do working together will not be enough to meet all the existing needs.

Great Need for Health Reform

The need for health reform in Canada is greater and more general than any except a few specialists know. The problem is primarily one in the conduct of the individual life and it broadens from personal hygiene to home hygiene and public hygiene or Public Health. The greatest hindrance to progress is lack of knowledge and lack of willingness to apply it. The medical experts at their Conference at Cannes adopted a Minut^o announcing it as their opinion "that a great part of the world-wide prevalence of disease and suffering is due to wide-spread ignorance and lack of application of well established facts and methods capable either of largely restricting disease or preventing it altogether." The expenditure of much wealth is not needed to secure good health, but some energy, a certain amount of intelligence and a willingness to play the game are required. Most children are born with the possession of good health; the problem is to conserve that precious heritage. In backward civilizations a slow and continued waste of that priceless gift of nature begins from the time the baby is weaned; and scarcely any attempt is made to arrest the wastage. It ought not to be so in Canada. But some recent investigations fill us with surprise and anxiety.

Medical Inspection in the Schools of Peel County

Let me cite briefly some of the facts revealed by medical inspection of the children in the public and separate schools of the County of Peel, Ontario. I do not know another County in all Canada in which one would expect to find better health and better conditions for health. Under the direction of the District Representative of the Department of Agriculture a survey, including medical inspection and follow-up work, was carried out. There was cordial co-operation by the Women's Institutes, the School Inspector, the trustees, teachers and parents generally.

Everyone of the 77 schools, public and separate, in the County was inspected and the 2,100 children enrolled were examined. The doctor in charge was Mary Mackenzie Smith, a woman whose personality so warmed up to the children, that one little chap exclaimed in relief: "She's not a doctor, she's only a woman." The following two paragraphs are quotations from Dr. Mary Mackenzie Smith's report:

"The children as a whole enjoyed the examination, though most of them had little idea as to what it involved. Some of them told me they washed their feet, or cleaned their teeth, or had a bath that morning before coming to school. In no case did a school child resent the examination, the only possible objection coming from a little girl who said, 'Doctor, I don't want my conscience out.'

"I found 77 per cent of all the children suffering from decayed teeth and 12 per cent. who had lost the third molar or the tooth they get between the age of 5 and 7 years. Very few mothers know that this is a permanent tooth. This is a serious loss as it not only spoils the shape of the jaw but reduces the masticating capacity very greatly. When I ask the children what their fathers do with a horse whose teeth are bad, they immediately reply: 'Sell him.' Now if bad teeth are detrimental to a horse, are they not more so to a child? Can we not do something when we know the principal causes are lack of care and too much candy?"

Discovery Leads to Correction

The following five paragraphs are from the report by Mr. J. W. Stark, B.S.A., the District Representative:

"There is the boy who 'never got farther than the second book,' and is generally considered stupid—just because while he was going to school he couldn't see to read anything a foot from his eyes. And there may be a young woman with round shoulders or even a twisted back—a permanent deformity traceable to the bad seats in the old school.

"Parents can't be expected to detect these troubles until they have advanced to serious

stages; even teachers, while they know something is wrong, can't always discover the cause. A doctor can tell just where the difficulty lies and how to correct it, and THIS IS WHERE THE MIRACLE OF MEDICAL INSPECTION COMES IN, for the delightful difference between a child and a machine is that the moment you find and remove one point of maladjustment, you start an upward and improving impulse which runs through the whole circle of its activities; you remove adenoids, for instance, and improve the child's hearing; thereby you promptly release him from the false reproach of stupidity, or even disobedience, because he can't hear what's said to him, and he regains his place in his classes—his self-respect. He is no longer kept in after school; and thus gets his full play time; his appetite is improved, his sleep is better, and he is started toward a higher level all along the line. Straighten his crooked teeth or fill the decaying one and you improve both his appetite and his digestion; you increase his weight, increase his vigor and power of attention both in the schoolroom and outdoors; increase his resisting power to the colds and sore throats and stomach troubles, whose germs are perpetually wandering about seeking whom they may devour—and the ailing, backward, cold-catching child is entirely made over.

* * * * *

Clinics

"For the children who needed medical treatment the women of the neighbourhood, working through the Women's Institutes, arranged clinics. Very informal, almost homelike affairs they were, with some large, sunny, well-equipped houses fitted up for a hospital, the mothers themselves somewhere around, the local doctors assisting, but the fine work done by the best specialists in Canada with regular trained nurses in attendance. The doctors who worked at these clinics were usually pretty public-spirited, so it was possible for almost everyone to pay for having their children taken care of; for those who could not afford to pay, a grant from the Government covered the cost. And there wasn't the expense and time and worry of taking a child off to a hospital in the city and leaving it there for three days. Most of the cases were nose and throat operations and the usual cost per patient was ten to fifteen dollars. Some of the men turned their cars into ambulances to take the patients home, and gave their own service as orderlies. It was a community affair.

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"In addition to the one hundred and twenty pupils operated on at the clinics, dozens of parents took their children to the local doctor or to a hospital in Toronto for operations. Then in one township two doctors worked together for removing tonsils and had smaller clinics where five to ten children were operated on at one time. One of the doctors told me that he had repeatedly advised some of the parents in his district to have their children's tonsils removed, but not until after the medical inspection did the parents allow it to be done. He said further,

"The wonderful effects of such an operation soon became evident. The children of Peel County will be indebted to you for the assistance given to this work so intimately connected with their future health and welfare."

The Proof of the Pudding

"In order to find out the actual results of the medical school inspection, a complete survey of the County was made four months after the doctor had finished her work. The report included the number of pupils in each school who had received some medical treatment as a direct result of the inspection and also the improvements made in the school buildings by the trustees acting on the suggestions of the doctor. From the total of twenty-one hundred pupils who were examined, five hundred and fifty-one had been treated, and thirty-five of the seventy-seven schools had been improved in various ways to make them healthier places for the boys and girls. Is any further evidence needed to prove that medical inspection brings results?"

Great Field for the Junior Red Cross

Other surveys and inspections of children in the schools of Canada have shown that from 75 per cent upwards of all the children have some minor or major defect, most of which can be remedied if taken in hand in time. In addition to the benefits from the physical examination and medical inspection, a great deal of good can be accomplished by suitable instruction of the children and by interesting them in doing the things which promote good health, and not doing the things which injure health. That is part of the field of service of the Junior Red Cross. The medical conference at Cannes put the same thought in the form of a resolution which reads thus:

"Resolved that the training by thoroughly qualified teachers of school children in all grades in the subjects of personal and general hygiene, and the inculcation of proper health habits during school life, are essential measures for permanently improving the health and contributing to the welfare of the people."

Object of the Crusade

It has been said that humanity makes its greatest advances after what seem to be narrow escapes from catastrophe. Be that as it may, it appears to me that the next great advance—and one of the greatest forward movements of all time—will be in the realm of personal hygiene, home hygiene and public health. There does not now seem to be any need for any further crusade for the attainment of political rights. It becomes us to use those we have with more intelligence, justice and unselfishness. A fair measure of general education is now within the reach of all. There is no longer need for fighting for freedom of conscience in religious matters. The manual and

skilled workers are on the way to obtain a more nearly equitable proportion of the proceeds of production and to acquire a beneficial say in the management of the industries in and conditions under which they work. And one may very well expect that the League of Nations in the near future will prohibit war. For one, have never lost my faith in its ability to do this or given up my belief that it will do it. The most difficult and certainly one of the most worrisome of all its tasks—that of winning good health and the birth-right of all, with particular protective care of the mothers and children. Every child born in Canada should have an opportunity of starting life with sound physical health, of growing to maturity in and through the healthful exercise of its powers and then of continuing to live in good health under wholesome conditions until the full course of life is run. Towards that end the Red Cross calls upon all intelligent men and women to join the Crusade for Good Health and to join the Red Cross which can do more for the country in peace than it was able to accomplish in war.

**The Annual Campaign for the Enrollment
of Members, as recommended by the
League of Red Cross Societies,
will be conducted in May,
1921.**

Public Education in Hygiene

"An essential part of any national health policy is the instruction in the principles and practice of hygiene of the great mass of the people. In this as in other spheres of human affairs ignorance is the chief curse. We are only now, as knowledge grows, becoming aware of the immeasurable part played by ignorance in the realm of disease. It is hardly too much to say that in proportion as knowledge spreads in a population, disease and incapacity decline, and this becomes more evident as the gross forms of pandemic disease are overcome. As in the individual, so in the community, knowledge is the sheet anchor of preventive medicine—knowledge of the way of health, knowledge of the causes and channels of disease, knowledge of remedy. The great reforms to which reference is made in these pages are dependent for their achievement upon an enlightened and responsive people.

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"Extremely valuable educational work of this nature is being carried out at the present time by certain well known voluntary associations established for the specific purpose, such as the National Council for Combating Venereal

Diseases, the National Association for the Prevention of Tuberculosis, the National Clean Milk Society and the various societies leagued together in the Central Council of Child Welfare. Closely akin is the health work of the Boy Scouts movement. All this educational enterprise and organization form an invaluable and integral part of national Preventive Medicine.

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"The Practice of Hygiene; The Teaching of Mothercraft; Physical Education; Open Air Education: These four methods of education in hygiene are submitted for the consideration of local authorities. They are, of course, only illustrations, but in principle they are widely applicable—to adults as well as children. One thing is certain, no substantial advance can be made in this country in the practice of Preventive Medicine apart from the will of the people, which can only be guided rightly by knowledge and practice in hygiene. We have witnessed a nation organized for war, we require a nation organized for the purpose of national health."

From a Memorandum by
SIR GEORGE NEWMAN,
Chief Medical Officer of the Ministry of Health of
Great Britain.

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The Canadian Red Cross Society

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