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#### Social Welfare in Canada | Islanda Das colleged bas

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A Paper prepared for the International
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# I. FACTORS AFFECTING DEVELOPMENT OF SOCIAL WELFARE SERVICES

In celebrating their centennial as citizens of a federal state in 1967, Canadians devoted unprecedented thought to their economic, social and cultural progress and to the strengths and weaknesses in the fabric of Canadian society. In reviewing their past, they looked back not only to their century of national life, but to the seventeenth and eighteenth centuries when French and English settlements were established in the Atlantic provinces and along the St. Lawrence waterway.

By the end of the period of colonial wars in 1763, French settlement, particularly in what is now the Province of Quebec, had made an indelible imprint only on the physical development of the country, but also upon its social institutions. The arrival of the United Empire Loyalists following the American Revolution, the subsequent influx of other settlers from the United States of the Napoleonic wars established a trend of settlement and development in which influences were destined to become predominant in what are now the provinces west of Quebec and placed a similar stamp on three of the four Atlantic provinces, the exception being New Brunswick where the French-speaking Acadians were ultimately to equal their English-speaking neighbours in numbers and influence.

If the most powerful outside forces shaping the development of the Canadian influence and Britain (with lesser but important which Canada shares 4,000 miles of common boundary, that has increasingly affected economic and social life of the Canadian peoples.

The early settlers, their descendants and those who have continued to migrate to Canada to the present day have found themselves in possession of a land of great natural resources. But between the resources and their conversion into wealth have stood enormous obstacles of distance, climate and terrain. Thus Canada has been intensely preoccupied with the development of its resources through much of its history. Its people have had to find ways of developing its fisheries, the important fur trade of the early days, lumbering, and diverse forms of agriculture, mining and manufacturing. Though now concurrent elements in the structure of Canada's economy, these various types of industrial activity have often called for different social organizations and responses. Transition from one type of economic activity to another has, from the earliest times, produced human casualties. Countless individuals and families and some social groups have often been unable to meet the challenge of change.

At all times, however, there have been attempts to respond to the needs of the poor, the ill, the aged, the dependent child, the delinquent and the misfit. Accounts of the charitable work of the early missionaries and of the religious orders form a luminous chapter in the chronicles of New France and in the subsequent history of the Province of Quebec. In the Atlantic provinces efforts, never wholly successful, were made to adapt the Poor Law of Elizabethan England to the very different conditions of North American life. In Ontario, during the later decades of the nineteenth century, public and voluntary social welfare programmes formed a complementary structure of services that the province felt could bear favourable comparison with that of any jurisdiction in Europe or America.

However, even where institutional programmes were developed which met, with reasonable effectiveness, conditions of the rural society characteristic of most of nineteenth century Canada (and, in some provinces, of the early decades of the twentieth century), they proved gravely inadequate to meet the demands of the urban industrial society which has been developing at an ever accelerating pace since the 1880s.

While industrialization and urbanization have been dominant in determining the social facts to which Canada's health and welfare programmes have had to be related, a multitude of other factors have strongly influenced their development. Some of these have been mentioned; others should be identified.

Some have to do with broad economic, political and demographic questions:
Canada's part in two world wars necessitating special provisions for the disabled and the dependent survivors; the seasonal nature of important sectors of the Canadian economy, the vulnerability of other sectors to fluctuations in the export market and to the terms of trade; the wide differences between the provinces in terms of size, population, per capita income and degree of industrialization; the division of powers between the Federal Government and the provinces in the fields of health, welfare, and corrections; the differing attitudes of the provinces to the development or support of social welfare programmes by the Federal Government; the problems of bringing the native peoples - Indians and Eskimos - into participation in the economic and social life of the nation, especially in ways which meet the defferent needs of different groups across Canada.

Other factors of vital significance in the growth of social welfare in Canada are more closely identified with the development of programmes and the provision of services: the willingness of Canadians to develop and support voluntary organizations under both religious and secular auspices to meet a whole range of human needs; the growing acceptance of public responsibility not only for income maintenance measures, but for health and welfare services; the gradual development of a comprehensive social security programme and a health and welfare infrastructure; the development of professional organizations and professional training in the field of social work; the gradual increase of research in social welfare; the refinement of methods of helping individuals with social problems through group methods, and the increasing employment of community development as a process of helping communities to identify and attack their common social problems.

In 1968, Canada has a population of a little over 20 million persons, living in the second-largest land area - 3,851,809 square miles - of any country in the world, the greater portion of which is in the Far North and sparsely inhabited. While the population extends through most of the southern areas of the country, 64 per cent is concentrated in Ontario and Quebec. The Indians and Eskimos constitute 1.2 per cent of the population, while those whose ancestors come from the British Isles and France make up 43.8 and 30.4 per cent respectively. The remainder come for the most part from other European countries, with a small but rising proportion coming from Asia and the Caribbean.

While life expectancy continues to rise, now standing at 68 years for males and 74 years for females, Canada has a relatively young population, one half being under 25 years of age. There is one doctor for every 843 inhabitants and 6.8 hospital beds for 1,000 of the population. The population growth rate now stands at 1.34 per cent a year. During the 1966-1967 academic year, 28.9 per cent of the population were attending either elementary, secondary or post-secondary educational institutions, while 8 per cent of the gross national product was spent on education.

During 1966, the gross national product, the total value of all goods and services produced in Canada, was \$57.7 billion or \$2,899 per capita(1), while the net national income stood at \$43 billion or \$2,162 a person. While net savings total \$11.7 billion, the ratio of net savings to national income was 1:3.67.

### II. GOVERNMENT RESPONSIBILITY FOR SOCIAL WELFARE

#### Organization of Social Welfare Services

Social welfare programmes in Canada are administered by the three levels of government and are complemented by the services of voluntary agencies. The Department of National Health and Welfare is by statute the main federal welfare agency, but several other federal departments have responsibility for some aspects of social welfare. For example, welfare services for the native peoples are administered by the Department of Indian Affairs and Northern Development, services for Veterans are provided by the Department of Veterans Affairs and the unemployment insurance programme is operated by the Unemployment Insurance Commission.

<sup>(1)</sup> All currency references are in Canadian dollars.

The Department of National Health and Welfare administers the universal programmes of family allowances; youth allowances (except in Quebec), and old age security pensions; retirement, survivors, and disability pensions under the control canada Pension Plan (except in Quebec); and the programmes under which costs are shared with the provinces for health and welfare programmes which they administer. These include the hospital insurance programme; the medical care insurance programme; the Canada Assistance Plan, which covers cost sharing for social assistance and child maintenance, health care for needy persons, and extension of welfare services within the province; the categorical programmes of old age assistance, blind persons allowances, and disabled persons allowances. Some provinces are now integrating the latter three categorical programmes with their general programmes, as they are encouraged to do under the Canada Assistance Plan, which is intended to provide a comprehensive framework for all cost-shared welfare programmes.

Provincial welfare departments are responsible for social assistance programme<sup>5</sup>, including aid to unemployed persons, needy mothers and other dependent groups. They are responsible also for the provision and regulation and support of institutional care, the protection of neglected and dependent children, foster care and adoption services and services for delinquent children. Some or all of these services may be administered by the provincial department of welfare, but in most provinces there is some delegation of responsibility to the municipalities and, in some provinces, to voluntary agencies. The Province of Quebec also operates the Quebec Pension Plan, and a youth allowances programme.

Private or voluntary (non-governmental) agencies are important community resources in almost every area of welfare, and many receive financial grants from public departments. Children's aid societies are, for example, an integral part of the public child welfare programme. Other important welfare services include family counselling, after-care of prisoners, visiting homemakers, agencies for the rehabilitation of the handicapped, neighbourhood centres, counselling agencies and clubs for older people, and various services under the auspices of church and ethnic groups. Organized recreational programmes assume a multiplicity of forms under the auspices of boys' and girls' clubs, Young Men's and Young Women's Christian Associations and service clubs, and other groups.

Community organization is encouraged locally by association of voluntary and public welfare agencies and interested individuals organized into welfare councils or social planning councils. Their work is carried on through professional staff and committees representing welfare and other community interests. A national voluntary association, the Canadian Welfare Council, co-ordinates planning nationally.

#### Coverage Under Social Welfare Programmes

The complex of social welfare programmes provides for income support through one or more measures, for the major exigencies of illness, old age, unemployment, disability and industrial accident, costs of child rearing, widowhood and orphanhood. Protective and other services for children deprived of a normal home life are available in all areas of the country. Other important services to strengthen family life, such as day-care services, homemaker services and the many services of specialized voluntary welfare agencies, are concentrated for the most part in the larger areas of population.

Illness - Programmes to protect the individual against the costs of illness include public medicare programmes and programmes of voluntary medical and health insurance and hospital insurance. Health services are provided for recipients of public assistance with costs shareable under the Canada Assistance Plan.

The federal Medical Care Act passed in 1966 permits federal contributions totalling half the costs of physicians' services in programmes administered by provinces. All doctors licensed to practise are eligible to offer insured services. To qualify, a provincial programme must cover at least 90 per cent of the population and provide comprehensive medical benefits, must be portable, so that residents remain covered as they move from province to province, and must be non-profit. Two provinces entered the programme from July 1, 1968, and others have indicated their intention to enter in 1969.

Meanwhile, three of the remaining eight provinces administer comprehensive physicians' services programmes which residents can join. Residents in need in two of these can apply for provincial assistance in paying premiums. Voluntary insurance continues to protect a large number of persons in some provinces where government plans are not as yet wholly developed.

All provinces have for many years been part of the national hospital insurance programme, under which 98 per cent of the population is protected against the cost of medically-required care whether as in-patients or out-patients. Services insured, for which the Federal Government pays half the cost, include standard ward accommodation, drugs, dressings, nursing care and virtually all other medically-necessary services.

The Federal Government provides medical and hospital services to veterans with disabilities attributable to military service.

Old age - A number of public and voluntary welfare programmes serve the elderly and the aged. There are three federal programmes of major importance in the economic protection of the elderly: the universal programme of old age security pensions payable without a means test to all persons aged 67(2) and over who meet the ten years' residence requirement; the contributory programme of retirement benefits related to previous earnings introduced by the Canada Pension Plan, with benefits beginning in 1967; and the guaranteed income supplement programme, effective January 1967, which provides for a supplement payable to recipients of an old age security pension who are unable to benefit from the Canada Pension Plan in its first ten years and whose incomes, as determined by the income tax authorities, fall below a specified amount.

The federal-provincial programme of old age assistance, under which an allowance is payable by the provinces under conditions set by the federal Government, and originally payable to persons 65 to 69 years of age, is decreasing in importance and will disappear in 1970 when the qualifying age for old age security pensions is lowered to age 65. Care in homes for the aged and infirm for persons unable to care for themselves is provided in all provinces and may be under provincial, municipal or voluntary auspices.

Originally, 70 years or over but, through a progressive lowering of the qualifying age, will be set at 65 years in 1970.

Unemployment - Unemployment resulting from shifts in demand in the economy and in certain seasonal industries can be particularly serious in one-industry centres, and is most acute among the least educated and unskilled. The majority of the labour force is covered by a federally-administered contributory unemployment insurance programme. Persons who are not covered by the programme and those whose benefits have expired or are inadequate may receive assistance under provincial or municipal social assistance programmes. Training and retraining programmes are receiving increasing emphasis through the federal Department of Manpower and Immigration in co-operation with provincial departments of education.

Disability - Income protection and rehabilitation services are provided for persons with physical or mental disabilities under a number of programmes. Under the Canada and Quebec pension plans, pensions will be available from May 1970 to disabled contributors who qualify. Supplementary disability benefits are available under these plans to disabled survivors.

Compensation for disability or injury arising out of employment provided in all provinces includes all necessary medical care and hospitalization, and in case of death, a pension to widows and any dependent children. Pensions are provided by the Federal Government for disabled war veterans and for certain civilians in specified occupations in war areas during the two world wars. Assistance is available to blind and disabled persons with little or no income from other sources through the blind persons allowances programme and the disabled persons allowances programme; both of these programmes are now being discontinued and the administration of aid to these groups is being transferred to the general assistance programme.

A wide range of services for the rehabilitation of the handicapped is provided by both public and voluntary agencies. These include the successful programme to rehabilitate disabled war veterans which is conducted by the federal Department of Veterans Affairs, the provincially-operated and federally-assisted vocational training programmes, and the variety of other provincial services including counselling, educational programmes for deaf and blind children, and facilities voluntary agencies supplement the work of the public agencies; among their services as co-ordinated home care programmes and sheltered work shops.

Costs of child-rearing - In recognition of the costs involved in child-rearing, the Federal Government pays a universal family allowance of \$6 a month for children under ten years of age and \$8 a month for children from ten to 16 years of age. Youth allowances of \$10 a month are paid on behalf of young persons 16 and 17 years of age attending school or unable to do so because of disability. The latter allowances programme.

Widowhood and orphanhood - Economic protection is provided to widows and orphans under contributory and assistance programmes. Survivors' benefits are programmes, and under veterans' pension Plans, under workmen's compensation mothers with dependent children who meet the eligibility requirements of need may necessary, supplement benefits under other programmes. Which may, if

Children in need of protection - Protection is provided in all provinces for children who are deprived of a normal home life. Services provided by the provincial child welfare authority or by children's aid societies, include supervision and counselling services to families and children in their own homes. Alternative care, when necessary, is provided in the form of foster care, institutional care or adoption placement. Counselling services are available to unmarried parents. Institutional care for unmarried mothers for a period before and after the birth of the child is offered by voluntary agencies, usually under religious auspices. Services for delinquent children are variously administered; in some provinces they are operated by the provincial welfare department and in others by another department, usually that of the attorney-general. Institutions for juvenile delinquents are operated by the provincial authority and in some provinces are under religious auspices.

Family services - A variety of other services designed to strengthen family life are offered in areas where a combination of demand and resources have fostered their development. These include day-care and homemaker services and counselling services. Day-care for the children of working mothers includes publicly-sponsored services in one province; in other provinces they are entirely under voluntary auspices. The shortage of day-care and homemaker services which exists in all provinces is a matter of concern to welfare and other community agencies.

Specialized counselling services for families and young persons are offered by family agencies, neighbourhood centres, mental health clinics and other agencies. Provincial authorities are making efforts to strengthen their preventive and rehabilitative services available to persons in need both at the provincial and regional levels.

## III. SOCIAL WELFARE WITHIN THE CONTEXT OF NATIONAL DEVELOPMENT

While the emphasis in Canada has, historically been more on the economic than on the social aspects of development, humanitarian as well as economic considerations have led to the development and modification of welfare programmes through the various stages of national development from a pioneer through an agricultural to an industrial economy.

Rudimentary health services and the earliest forms of institutional care for the old and the sick have grown into more complex programmes. Action, in the first instance, was often taken by voluntary non-governmental agencies; with the emergence of an industrial society accompanied by increased dependence of the individual on the community came the first income maintenance approaches and the development of broader conceptions of social welfare responsibility at the local and provincial levels. Except in the case of groups like the Indians, immigrants or mariners, where the need for a national approach was recognized, there was little federal involvement in the field of welfare.

The experiences of the 1930s, when economic depression roused a national feeling of collective responsibility, and of the Second World War, which precipitated a rapid acceleration of the industrial and urban processes, led to dramatic changes in this situation. The necessity for income maintenance programmes of the kind that exist today was recognized by those engaged in planning towards the end of the war. Their thinking was strongly influenced by the economic theories of Keynes, Beveridge's social security blueprint for Britain and, to a lesser degree, the enactment of the Social Security Act in the United States. It became evident that the expenditures on essential social services would also stimulate the economy through the maintenance of spending power. In addition, political pressures were brought to bear by different groups of the disadvantaged, notably older people, for income support and services, and by the local and provincial authorities for the assumption by the Federal Government of a major share of the costs of income maintenance for individuals, and of health care.

Within the period of the 1950s and 1960s, most of the earliest objectives identified by social planners and incorporated in political platforms were met. Comprehensive income security schemes for the old came into effect; insured hospital care was provided in all parts of Canada; assistance for the disabled and insurance for the unemployed had wide coverage; a combined federal-provincial medical care scheme was introduced. By 1960, the social service structure which had been developed could, with reasonable effectiveness, meet the demands made on it, though some gaps remained and the rapid pace of social change calls for continuous adaptation and improvement.

The profound changes which had occurred in the structure and financing of services are reflected in financial figures. In 1926, public welfare expenditures were about \$86 million, of which about 57 per cent was contributed by the Federal Government, with the balance shared equally by the provinces and municipalities. In 1966-67, welfare expenditures totalled \$3,335 million, of which 80.2 per cent was federal, 18.0 per cent provincial, and 1.8 per cent municipal.

In the provision of social welfare services themselves, there have been profound changes, effected through all levels of government.

Large-scale federal programmes are aimed at eradicating illiteracy amongst Indians and Eskimos and increasing their capacity to meet the requirements of the twentieth century, whether in industrial or agricultural environments. Through regional development schemes, the Federal Government, in co-operation with the provinces, operates large-scale programmes to assist in the development of poverty-stricken areas and, through the Canada Assistance Plan, it supports a network of assistance and welfare services for all persons requiring them.

Provincial, municipal and voluntary welfare programmes, which vary in extent and in approach, cover such welfare services as those for families, for mothers and children, for the transient and homeless, as well as corrections and probation services. Local services are increasingly selective and sophisticated in their approach.

The present period is one of assessment and regrouping of forces for the planning of the future. New financial considerations and new concepts of services and administration are emerging.

Some provinces, notably Quebec, would like to assume greater responsibility for social welfare programmes and to have the Federal Government transfer the taxing powers required for their financing. Other provinces prefer to see federal initiatives and support retained and national standards developed and supported. The funds accumulated by social insurance programmes are an important consideration, both because of the fiscal resources they supply and the danger that might be inherent in the limitations of provincial funds as a sole source of income in the event of widespread depression.

Increasing interest in the possibility of a guaranteed income for all persons in Canada opens up new areas of policy in social and economic development.

#### MEETING MANPOWER NEEDS FOR SOCIAL WELFARE

tion and in practice. Social welfare agencies have in recent years become more The Canadian labour force, in both public and private sectors, is prepared for its tasks by educational institutions at all levels and by specialized government training programmes. The Federal Government and the provincial governments conduct extensive research into future manpower needs in a partnership approach to preparing Canadians to enter fully into and assist in the growth of a healthy economy. Formal manpower planning in Canada is predominently economically-oriented although recent years have seen a gradually evolving appreciation of manpower Planning as being part of a larger human resources development approach to the economy, with manpower policies being increasingly assessed on social as well as on the traditional economic factors. The displacement of traditional occupations by rapid technological advances and the resulting needs for new employment skills and mobility have emphasized the relation between employment and general family living conditions. More Canadians are coming to realize the need to acquire more than one type of occupational skill and perhaps live in different locations throughout their work careers.

The considerably increased number of women in the labour force has also had considerable effect on family living patterns. In recruiting and placing workers in employment positions, the intervention of government-employed manpower counsellors is increasing in scope and in depth. Counselling is being focused more today on relating available employment to the aptitudes and interests of prospective employees. Manpower-mobility programmes assist workers in economically stagnant areas to move with their families to new locations where work is available.

The growing industrialization and increasing concentration of the population has presented challenges to the meeting of social work training. Social work in Canada has grown through various phases. In its beginnings, it had its expression in the provision of material services to the destitute by concerned citizens who lacked special training for their charitable work. From these efforts to help the less fortunate, a body of knowledge gradually evolved in the early years of the twentieth century which led to the development of formal social work education. The "professionals" emerging from the schools of social work have always been insufficient to the need for their services. This shortage forced the expanding social service agencies to initiate their own training programmes for untrained staff members. The graduates of these training programmes were seen as less skilled

than the graduates of the schools of social work and, in general, performing differing tasks. Continued staff shortages have recently caused staff at all levels to share mutual tasks through new and closer forms of co-ordination. This development has led to the setting-up of new technical education programmes for social welfare personnel and to curriculum alterations within the schools of social work.

In recent years, the establishment of national organizations concerned primarily with manpower planning questions, together with the gradual emergence of similar provincially-oriented organizations bringing into their ambit educators, administrators and professionals, has been instrumental in bringing about necessary re-evaluations. Research over the past few years on manpower use and the delivery of services has helped, as well, in crystallizing issues and affirming the need for new manpower approaches.

An assessment of the status of manpower considerations in social welfare can be derived in large part by considering current changing emphases in education and in practice. Social welfare agencies have in recent years become more conscious of the need first to define service functions and tasks and then to make decisions on appropriate staff deployment to meet their programme objectives. Characteristically, administration and planning in the social welfare field in Canada have been conducted on a largely decentralized basis covering a multiplicity of governmental and non-governmental agencies. This pattern has detracted from the achievement of basic uniformity in standards and approaches to the questions surrounding manpower training and utilization at the provincial and national levels. However, the present trend toward more integrated approaches should allow for greater consistency, and in this way permit manpower planning to assume its position as a principal element in the organization and delivery of social welfare services. The continuing manpower shortage relative to the need, along with recognition that the client population must be effectively involved in the programming and delivery of welfare services on their behalf, has extended the focus of social work from the "individual" to include, once again, the environmental or social approach which characterized its early beginnings. The popular participation of clients in social service programmes in this way has been expressed particularly through an increased emphasis upon community development programmes. This approach is also allowing much needed stress to be placed on preventive social services.

ors is increasing in scope and in depth. Formal preparation for social work at both university and technical levels has begun to incorporate suitable curriculum changes based in part on the availability of new technical knowledge and in part on practice trends such as those mentioned above. The increasing complexity of society has made social workers recognize more clearly the need for specialized approaches to administration and planning of social welfare programmes. This has caused schools of social work weigh more closely the relative merits of generic training as compared to the heretofore discreet methods sequences (casework, group work, community organization research and administration) within tion, research, and administration) within the curriculum. These changes in the schools and in practice have also raised questions around the traditional relation of social workers to members of other professional disciplines employed in the legal, health, and education fields. Within social welfare agencies themselves relation of social workers to staff members believed relation of social workers to staff members holding other kinds of qualification is being examined as well in an effort to is being examined as well in an effort to create the effective teamwork approaches necessary to the solution of social problems. taff members. The graduates of these

It is likely that manpower planning and deployment theory and practice will emerge from these various trends. Indications in recent years have been that manpower training approaches have received more attention as the practice problems force reconsideration of traditional approaches.

#### V. INTERNATIONAL CO-OPERATION IN SOCIAL WELFARE

A total of some \$350 million is being made available by Canada for aid to developing countries this year through the Colombo Plan, the Programme for English- and French-speaking African States, the Caribbean Assistance Programme and subscriptions to the Inter-American Development Bank and the Asian Development Bank. Of this amount some \$1.3 million is allocated to aid in the social welfare and related fields. During 1966, Canada contributed \$34.6 million to the United Nations and the Specialized Agencies, including UNICEF.

The Canadian assistance programme is administered in response to requests from developing countries. Under it, hundreds of Canadians, ranging from young graduates to senior officials, serve abroad in developing countries, while hundreds come from these countries to Canada for training.

In addition to its aid programmes, Canada participates extensively in the social development activities of the United Nations through representation on the Commission for Social Development, UNICEF and other agencies concerned with social matters. Reports and documentation for the United Nations and the Specialized Agencies are prepared on Canadian subjects as required. In the same way, Canada participates in and contributes to the work of the International Conference on Social Welfare and other international welfare activities.

Canada extends bilateral assistance to some 60 countries in Africa, Asia and the Caribbean, and contributes to the United Nations organizations engaged in this work, as well as to international non-governmental agencies such as the Red Cross.

To date, Canada has trained 305 persons in social welfare. The trend shows both an absolute increase and an increase relative to certain other categories. This trend reflects attention paid in developing countries to social needs and could increase as developing countries put more emphasis on balance between social and economic aspects of development.

The non-government side of Canadian social welfare aid is considerable. Historically, the pioneering contribution was made by the churches, which are now joined by widely-diversified private undertakings. The latest records indicate that over 70 private organizations and agencies are involved in the aid programme, with a total annual budget of a least \$30 million.



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