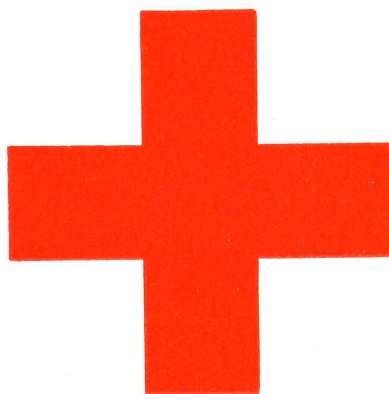


The Canadian Red Cross

Organized as a Voluntary Auxiliary to the Department of National Defence, and in Matters of Health as a Voluntary Auxiliary to the Official Authorities, Dominion, Provincial and Municipal.



"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." — From Article XXV., Covenant of League of Nations.

HEALTH FOR ALL AND ALL FOR HEALTH

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KEEP YOUR MEMBERSHIP RENEWED

See Coupon on Page 16

National Headquarters

Toronto, Canada

The Red Cross Nursing Outpost Service of the Alberta Division

By Mrs. C. B. Waagen, First Vice-President and Honorary Secretary, Alberta Division.

Since the Red Cross Flag floated over the first cottage hospital or Nursing Outpost operated by the Alberta Red Cross early in 1920, 1500 patients have been treated and 350 babies born in safety through the Rural Hospital Nursing Service of the Alberta Division.

The policy inaugurated by the Division in regard to these Nursing Outposts—an emergency service organized to meet emergencies—is that they shall in no way conflict with the operation of the very excellent Municipal Hospitals Act, by which rural municipalities may establish and operate hospital districts. Under this act, by means of a reasonable taxation on all residents of the district, a municipal hospital may be maintained where attention is given to all ratepayers at low charges.

The Provincial Department of Health of Alberta was embarking upon an excellent health program when the Red Cross first turned its attention to problems of health and welfare as the most important part of a peace policy for the mitigation of suffering throughout the world.

CO-OPERATION WITH HEALTH DEPARTMENT

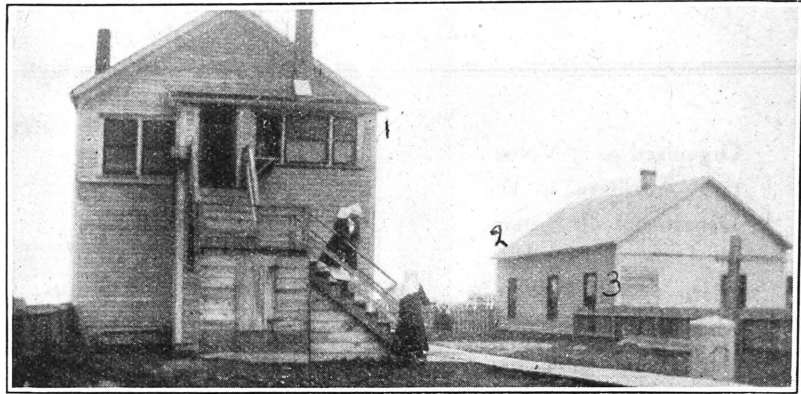
An intelligent and active co-operation with the Health Department was, therefore, the first step towards developing an efficient, properly-directed nursing service. This was arranged by agreement that Red Cross Nursing Outposts and Hospitals:

(1) Shall be operated in districts approved by the Health Department and only in such districts as had no other means of obtaining service or were not in a position to maintain a Hospital District.

(2) That the service given by the Red Cross shall be looked upon as an emergency service to substitute only until such times as the Municipal Hospitals Act can be enforced and hospital service maintained by adequate taxation.

CONDITIONS

Under these conditions, the Red Cross Nursing Outposts are recognized by the Government, receive



This Outpost is situated at Foremost, Alberta. The building marked 1 is used as the hospital. The other building consists of the doctor's consulting room (2) and a nurses room (3). This outpost has an excellent record.

regular inspection and are assisted by the grant of 50 cents per day per patient given to all recognized Hospitals in the Province. The conditions upon which the Outposts are operated, as between the Red Cross and the people, vary to a certain extent in each district, but are based upon the principle that each district must make a definite contribution towards the maintenance of the Outpost over and above such fees as are collected from patients.

BUILDING AND EQUIPMENT

Usually the building is supplied by the community, and the amount by which operating costs exceeds Hospital fees is also contributed by the community. The building is equipped and nursing services are provided by the Red Cross. The matron in charge is directly responsible for administration to Divisional Headquarters of the Red Cross. It is also understood that the Outpost is intended for emergency and maternity cases and not for providing facilities for major operations which should be cared for at larger centres.

When work is slack at the Outposts the Red Cross expects the nurses in charge of them to undertake district visiting and school inspection, and to endeavour by various means to contribute to the betterment of health conditions. The Outpost Hospital plays a leading role in community life. Health Lectures, First Aid Instruction for



Muddy weather in Foremost. Two nurses ready for a journey to a settler's home.

Children, Mothers' Classes, Better Babies' Shows, Exhibits of various kinds, Vaccination and Immunization clinics, all and everything which may contribute to public health and to improve living conditions become the business of the Red Cross nurse and the duty of the Hospital to initiate.

A TIME OF COMMUNITY ORGANIZATION

In a Province covering such an extended area, whose history has not yet completed a second decade, even the most well directed efforts on the part of government, and the most liberal legislation, must still leave

many districts far removed from the ministrations of doctors and nurses and hospitals. During years of financial stress arising from crop failure, curtailment in the spending of public funds has, of necessity, spelt a corresponding curtailment in the development of the provincial hospital policy. It is in the crop failure district and the pioneer settlement that the Outposts of the Red Cross have been able to save life and give effective service.

FUNDS NEEDED

Unfortunately, lack of funds makes it impossible at present to meet the demands made for Red Cross service.

To balance budgets and to cut the suit according to the cloth at the present time necessitates the turning of deaf ears to appeals which the Red Cross should, and could, meet if there were sufficient funds forthcoming. Alberta has had the unenviable distinction of showing the highest maternal death rate in Canada. In 1922 thirty-four per cent. of births in rural districts were unattended by qualified nurses or medical men.

It is only by the efforts of the Government, through its Municipal Hospitals Act, and assigned by the Red Cross working through its Outposts, that such tragic figures can be reduced.

TYPES OF HOSPITALS

The Nursing Outposts service of the Canadian Red Cross for purposes of record, has been classified under three types of Outposts:

- (1) The Outpost in which no provision is made for bed-patients, but where the Nurse visits the homes and the schools.
- (2) The distinctly Rural Outpost in a farming community, equipped to accommodate patients, but where the nurse does home and school visiting also.
- (3) The Outpost, located in a small town or village, which functions as a small Hospital.

The Alberta Red Cross Outposts are of the third type, experience having proved that this class of hospital is most suitable to the needs of the particular districts in which service is given.

CONSORT

A twelve-bed hospital at Consort was the first station operated by the



The nursing outpost at Altario, Alberta. This building is at the edge of the new settlements where the pioneers of Canada are breaking nature's sod for the first time. The institution has given to the settlers nursing care that would have been impossible without it.

Red Cross in Alberta—taken over early in 1920 to assist a district suffering from crop failure.

Organization of an active local branch, to co-operate with and assist Divisional Headquarters in conducting the Hospital, is one of the stipulations laid down by the Alberta Division in establishing hospital service in any district. It is also understood that Red Cross assistance can be forthcoming only for a limited time, and that the financial condition of the district will again be considered with a view to establishing its independence, as far as financial aid is concerned.

The success of the Consort Hospital has been due entirely to the initiative and interest of the local branch, as the Hospital has at no time received more than \$100 per month assistance from the Division. It is still operating successfully, with a staff of two nurses, a housekeeper and extra help when required.

ATHABASCA AND FOREMOST

Athabasca and Foremost Hospitals, eight and nine bed institutions, were taken over and operated for limited periods to meet special emergencies which threatened to isolate these districts from hospital services. The Red Cross withdrew from Athabasca to allow for organization of a Municipal Hospital District, which has now established a permanent hospital service for a large territory in the north.

ALTARIO AND POUCE COUPE

A six-bed hospital was operated at Altario in 1920. In 1921, the farthest north outpost of the Division, an eight-bed hospital was established at Pouce Coupe, 486 miles northwest of Edmonton (77-14-W 6th) "Eight to eighteen beds," writes the Matron, in describing the capacity of this outpost, "when necessity arises."

RIFE

A four-bed Outpost at Rife, in the centre of a Ruthenian district, has lately been established.

Writing of the opening day, Major Stafford, officially representing His Honor Lieutenant Governor Brett, President of the Alberta Division, said:

"I arrived at the Hospital about noon, and there met Miss Anderson, the nurse in charge. She had one patient, a little girl, who was very sick and could not speak English. She had not spoken a word since she entered the Hospital a week previous. When one sees the Hospital and investigates the work being done, it is impossible not to be impressed by the fact that the hospital is a Godsend to the people in these outlying districts. The women of the district flock there bringing their personal problems for solution and their children for examination. I fear to think what would happen to these pioneer women during

their confinements if it were not for the Red Cross Hospital and the assistance of the Red Cross nurses."

Before the end of the year, another Outpost will be opened, or, if funds permit, possibly two will be added to the districts receiving Red Cross service. And what kind of service is it which the Outposts give? Let us look at one or two of them. First in the far north, the very fringe of civilization, the matron has many stories to tell, strange as fiction to those who have eyes to see the wonder of it all, and realize that there, where life remains so primitive, thanks to the presence of the surgeon and the nurse, there is comfort for the mother, hope for the dying, and relief for the victims of accident. Space forbids to tell of the trappers and Indians, the miners and homesteaders, the squaws with their papooses, the English women and the foreign ones who have been the inmates of these white cots.

SOME TYPICAL CASES

On one occasion a mail carrier frozen in the last extremity from the elements, and suffering acutely from septic poisoning, arrived in the care of a trapper friend. Be it noted that for the truest form of hospitality, the people of the plains are pre-eminent, for let one of their number be sick and they will make most herculean efforts to assist him, and perform real feats in transportation to get him into hospital. Our friend, known for miles as Blizzard Bill, had suffered almost the entire range of human misery with the most painful form of swelling on his neck and throat. To add to the agony the severe cold made even life difficult. A long and tedious journey ended at last, and the sick man was brought to the place where the Red Cross opens wide its doors of care and comfort to the weak and ailing. To use his own words:

"I thought I had gone to heaven when I opened my eyes in that white

ward and saw the Sisters waiting on me."

Because of its preparedness, this Red Cross Outpost has added another to the list of lives saved, and a grateful trapper felt the effort had been worth while when his pal, Blizzard Bill, was once again able to be out braving the elements.

EVERYBODY HELPS

And so the story goes on as we visit the other Outposts. One feature of the Red Cross rural nursing station is that it binds the people together in one bond of sympathy and service. All community efforts seem to begin and end "for the benefit of the Hospital."

The school, the church, the club, the institute, one and all feel the onus on them of supporting their hospital. From far and near, on the night when the village school has "doings," people will drive miles to come and give their support to the school teacher and her pupils in their endeavour to raise funds.

To the women especially comes the appeal to keep the store rooms replenished, and many a merry afternoon and evening has been arranged when the country folk from the farm come "into town" with their gifts for the egg-shower, or the fruit and vegetable shower, or their offering of linen for the linen shelves, be it only tea-towels made from the flour sacks in which the farmers' wives buy their flour.

A REMARKABLE RECORD

One Alberta Outpost has a really remarkable record. In the report for 1924 we read that one hundred and eighty-three cases were treated, and from the list we see that these people were from every corner of the globe. Besides Canadians, British and Americans, we read of Norwegians, Russians, Danes, Poles and Swedes, Ukrainians and New Zealanders. There they gather under one common

symbol of mercy realizing that however far from their own flag and native land they may be, they will always find a flag that belongs to no one country but to every country, a flag that flies in peace or war, with its humane-intent, service to the sick and suffering.

MAINTENANCE

The question of payment of hospital fees is perhaps one of the most difficult of settlement. The patients generally desire and try to settle when they leave the hospital. But with poor harvests and little capital sickness proves a costly debt to meet, for, although the Red Cross operates at a minimum cost, it never at any time attempts to pauperize the country by offering charity. And so we find many strange, and at times amusing and even embarrassing, gifts tendered in lieu of payment. The writer has seen almost every product of the farm brought to pay the bill. A nurse laughingly asked:

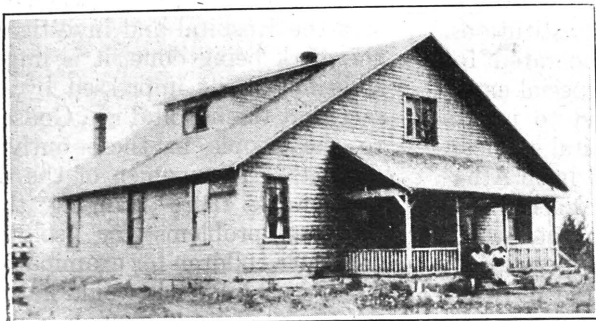
"What in the world am I to do with this squealing little porker which a foreigner has presented to me in a sack?"

The pig was placed in an outhouse. Later it was "traded" for work, and so the hospital routine went on. Poultry, butter and eggs, beef and pork, potatoes and pickles are all offered by patients and as gratefully accepted.

In some districts the fuel proposition is solved by the local preacher donating his strength to the axe and the saw, and supplying the kindling and logs to keep the hospital fires burning. One small village writes of its hospital:

"It has been such a comfort to ourselves and the nearby villages. All the people round about praise it. Our village pays the rent, also the heat and light. Our local Branch gave most of the equipment, \$200 in money, and also kitchen utensils, linen and other supplies. We have had no maternal deaths, ten births and treated eighty-eight patients representing ten countries all the way from Welshmen to Chinese."

To sum up, the Red Cross spells protection for the settler, better babies for the nation, happier wives and mothers, stronger and finer children. In the isolation that comes to the pioneer there is no greater source of satisfaction than the knowledge that, within reasonable distance, there is a Red Cross Outpost where "the missus and kids" will be well cared for when sickness comes.



Pouce Coupe outpost in the far north of Alberta.



The Alberta Division's nursing outpost at Rife, in the centre of a Ruthenian District. It has been "a veritable god-send" to the settlers of the district.

Pneumonia

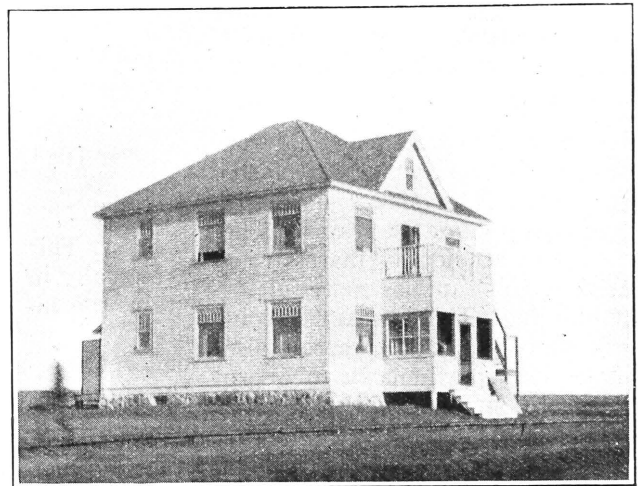
A "Catching" Disease Spread
From One Person to Another
By Germs

PNEUMONIA or inflammation of the lungs is a germ disease spread by persons who have pneumonia and sometimes by those carrying pneumonia germs.

As each patient with pneumonia is a source of danger to others, care should be taken to prevent the spread of pneumonia by early diagnosis and especially by careful isolation. As far as possible the patient should be isolated from other persons. All washable articles of clothing and linen should be collected in a separate bag and sterilized by boiling before being sent to the laundry. Clothes which can not be washed should be sterilized by steam whenever possible. If this can not be done they should be thoroughly aired in the sunlight. The dishes used by the patient should be boiled. Such articles as bed rubbers, ice caps, hot water bags and thermometers should be soaked in five per cent. carbolic acid. The sputum should be gathered in covered paper cups. If these are not available, the sputum should be disinfected with five per cent. carbolic in the container and the cup should be thoroughly boiled. Gauze should be used for handkerchiefs and should be collected in paper bags and burned. Body wastes from the bowels and the bladder need not be sterilized because the germs of pneumonia are spread in the secretions of the mouth, nose and throat.

While attending a case of pneumonia the doctor and nurse should

The nursing outpost at Consort, Alberta. Thanks to local pride and care in this institution it has had a most successful record of service.



each wear a gauze mask and gown. Their hands should be thoroughly washed after leaving the bedside. Visitors should be provided with fresh gauze masks and gowns and warned not to come into too close contact with the patient. These precautions should be maintained during convalescence and until the patient is able to leave the hospital or his home. After the patient has recovered, the mattress, pillows and blankets should be sterilized. If this is not possible they should be given a thorough airing in the sun. All room utensils used in the care of the patient should be disinfected by boiling or with a five per cent. carbolic, or 1-1000 bichloride solution. The room should finally be given a thorough cleaning.

A healthy person may carry pneumonia germs in the nose and throat and pass them on to others, who may catch the disease.

So long as healthy carriers are known to exist, the public should be educated in an attempt to lessen

the present universal traffic in saliva. As saliva is not particularly abhorrent, there is not the same disgust towards it as there is to other human excreta. Who has not seen the apple pedlar spit on his apples before polishing them, or the street car conductor wet his fingers on his tongue before issuing transfers? In fact, as Chapin remarks, if saliva were of an indigo color our whole surroundings would be stained blue. As the pneumonia germ gains entrance by the mouth or nose, the public should be cautioned against coughing, sneezing or careless spitting, especially in public places.

Possibly one of the most important means of prevention of pneumonia is to pay due respect to the so-called insignificant common cold. Careful histories of patients with lobar pneumonia show that about 40 per cent. of the cases give a history of common cold just before they have pneumonia.—Adapted from an article by Ernest G. Stillman, M. D., Rockefeller Institute.

Foods the Body Needs

III. Cereal Foods

GRAIN products, often called "cereal foods" supply most of the fuel and energy used by the body.

For the most part they are consumed in producing heat and energy for the activities of the body.

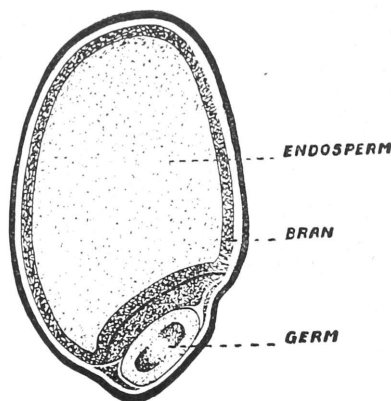
This group of foods includes the seeds of plants such as wheat, oats, corn, barley and rice and the flours, meals, starches and breakfast foods made from them. The different grains and their products differ somewhat in appearance, taste and food value, but all have many features in common.

The most abundant food material in cereals is starch, which serves the body as fuel. This makes up nearly three-quarters of most grains. The next most abundant material is protein, which supplies material for body building. This makes up about one-eighth of the grain. There is also a little fat, particularly in corn and oats; it is found chiefly in the germ. Another important material is the roughage, most abundant in the branny skin of the grain, which gives bulk to the diet. The cereals contain also mineral salts and vitamins needed for body building and the regulation of body processes.

The protein is not alike in all kinds of cereals. Part of the protein in wheat is a tough, elastic sort called gluten. It is because of this gluten, which can be expanded by gas bubbles, that light, porous bread can be made from wheat. Rye is most like wheat in the character of its gluten, though light, porous bread cannot be made from it alone. Barley, buckwheat, corn, oats and rice are so lacking in gluten that they cannot be raised by yeast. This special gluten of wheat makes wheat best for bread-making.

THE VALUE OF THE WHOLE GRAIN

The grain kernels are made up of three main parts. The embryo or the germ of the future plant; the endosperm, or main storage house of food for the future plant and the outside bran layers which cover and protect



A grain of wheat has three parts, but only the endosperm is used for making white flour.

(From "Food Planning and Preparation"
by M. T. Wellman).

the rest. The mineral salts are found principally in the outer layers of the grain, the fat is mostly in the germ and the starch and protein in the endosperm. Vitamins are found in the outer layers but more abundantly in the germ.

In making most flours and many breakfast foods the germ, which contains most of the fat, is taken out because the fat tends to spoil quicker than the rest of the grain. In the making of white flour the bran layers are also discarded. This leaves much starch and some protein but little mineral matter or fat and practically no vitamins. In such breakfast foods as cracked wheat or cracked oats, however, both germ and bran are present. The bran contains much roughage which, with other constituents present, makes it a laxative food. People who of necessity are spending a small amount of money on food and so cannot use fruits and vegetables freely, are in danger of having a diet that is low in certain of the vitamins and in mineral salts. For such persons it becomes important to use the whole grains as far as possible in place of the highly milled products, though this will not wholly make up in vitamins and mineral salts for the lack of fruits and vegetables.

The reason for the manufacture of refined white flour is a purely commercial one. White flour keeps

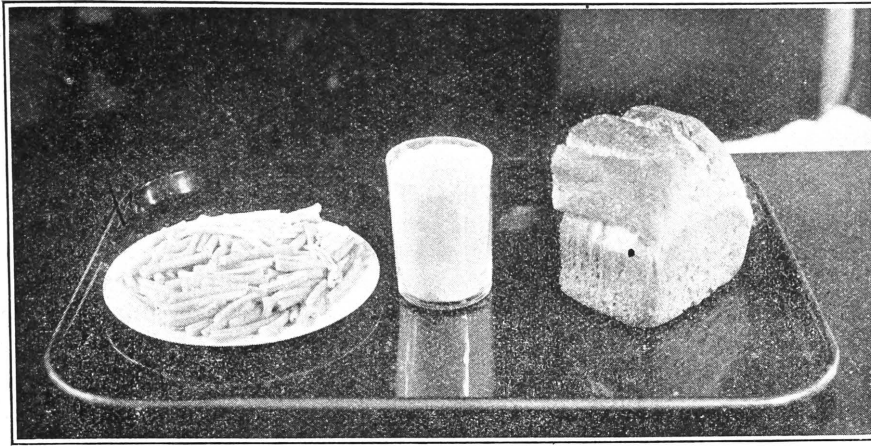
better and makes a loaf of more pleasing appearance. Although the products of white flour lack some valuable food elements found in whole wheat flour, the use of milk and fresh vegetables in the diet will make up for the deficiencies in the white flour products.

MANUFACTURED FOODS

From cereals are manufactured such foods as flours and meals, flaked grains of all kinds, macaroni and cornstarch. They may or may not contain all of the original grain, and for this reason they differ more widely than the grains themselves in appearance, composition and flavour. The cooking which some of them undergo during manufacture also causes changes. Of course, unless something is added to them, they contain no food material not present in the grain from which they are made.

Prepared cereals differ so much in form that their appearance gives little idea of the amount of nourishment they yield. For instance, the amount of flour which will fill a cup weighs four ounces; that of rice, eight or nine ounces; and that of flaked breakfast cereal, hardly half an ounce; and it is this weight rather than bulk or volume which indicates food value. Such differences in weight and volume must be remembered by those who wish to buy their food as cheaply as possible. Some breakfast foods retail at forty-eight cents a pound (fifteen cents for a five-ounce package); others cost five or six cents a pound. The cheapest ones are usually those sold in bulk.

The water added to cereal foods during cooking increases the bulk of the finished dish, but not its food value. One cupful of oatmeal may make four cupfuls of porridge, but the four would yield no more nourishment than was found in the original cupful of meal. In the same way, three cupfuls of flour, weighing twelve ounces, has the same food value as the pound loaf of bread into which it may be made. The illustration on page 7 shows different quantities of flour, bread and macaroni all having the same general food value. —R.G.



Flour, bread and macaroni in quantities having the same general food value.

prepared an itemized list of all the money which has been spent by the government for the relief of people suffering from catastrophies at home and abroad. Including \$100,000,000 for European food relief in 1919, and \$24,000,000 for Russian relief in 1921 and 1922, the total is \$142,413,889.28.

ICELAND

The Icelandic Red Cross, founded on December 10th, 1924, was officially recognized by the Icelandic Government under date of March 9th, 1925, and subsequently by the Comité International de la Croix-Rouge on April 9th.

At Reykjavik, the Red Cross has already secured 1,100 members out of a total population of 20,000. A committee has also been organized in Akureyri. A recruiting campaign will be organized throughout the country in the course of the summer.

THE FRENCH RED CROSS IN MOROCCO

The French Red Cross has opened a subscription on behalf of the combatants and wounded of Morocco.

The committee of the "Groupements nationaux des anciens Combattants" and the Central Committee of the French Red Cross have come to an agreement as to the best and most expeditious manner of undertaking the distribution of relief of all kinds through the mission which is leaving for Morocco under the leadership of General Pau.

DANTZIG FREE CITY

The Red Cross Society of the Dantzig Free City has organized Junior Red Cross in the State Secondary School, corresponding to the Canadian High School. Many branches are already organized in Canadian High Schools.

RED CROSS WEEK IN SWEDEN

The "Swedish Red Cross Week" was held in May and in Stockholm and its environs alone the sum of 400,000 crowns was subscribed. The Society is building a large hospital in Stockholm. It has also published an interesting little work entitled Hålsam är allt (Health is Everything).

FINLAND

The Red Cross Society of Finland published the first number of a monthly Red Cross Bulletin on May 1st, 1925. It contains articles both in Swedish and in Finnish.

BELGIUM

The Belgian Red Cross, which had hardly 10,000 members in 1923, gained 50,000 by the end of 1924.

GREECE

In 1910 there were only 29 charter and regular members of the Greek Red Cross. In 1925 there are 800 members and 6,000 subscribers in Athens and Piraeus.

ITALY

On the initiative of the Italian Red Cross, a mixed commission composed of representatives from the Commissariat and from the Red Cross was formed (August 7th, 1924) to study the possibilities of creating a sanitary aviation service. The technical advisors in the commission were: Prof. Baduel, Director General of the Italian Red Cross, Prof. Angelo di Nola, Chief of the Sanitary Aviation Service, and Mr. Giulio Gavotti, Colonel of Aeronautic Engineering.

It was arranged that the Red Cross should have machines prepared and furnished by the Commissariat of

Aviation for use in their colonial air ambulance service.

At present two such machines are in use: one in Barka, the other in Tripoli. Four Red Cross nurses have been assigned to this service, and will leave immediately.

SWEDEN

The Central Committee of the Swedish Red Cross has allotted 16,000 crowns for the development and expenses of the Society's Sanitary Aviation Service, during the summer of 1925.

JUNIOR RED CROSS

A recent bulletin of the League of Red Cross Societies publishes the world membership in the Junior Red Cross as 8,104,058.

GREAT BRITAIN

The St. John Ambulance Association announces that, instead of an expected decrease, there was an increase of 45 in the number of examinations for April, 1925, over April, 1924. The total was 527.

The Association announces also the formation under its auspices of a First Aid course in Baghdad.

UNITED STATES

At the request of the American Red Cross, the Treasury Department of the United States Government

THE Canadian Red Cross

A national journal published monthly by the Canadian Red Cross Society, to place before the people of Canada information concerning its program and activities, and to assist in carrying out the purpose of national Red Cross Societies of the world as set forth in Article XXV. of the Covenant of the League of Nations.

"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."

CANADIAN RED CROSS SOCIETY

National Office:

410 Sherbourne Street — Toronto, Ontario.

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***The Need for Training Teachers How to Teach the Subject of Health**

The need for training teachers how to teach the subject of health becomes more and more insistent in Canada. All of our readers who are interested in this subject should read the article in last issue upon the Educational Conference held in Toronto in April. The following recommendations from the Lake Mohonk Conference upon Health Education for Teachers-in-Training are instructive and are also well worthy of serious consideration by those responsible for the teachers who are expected to develop healthier and happier Canadian children.

HEALTH EDUCATION in a training school should include three factors:

- (a) A Student Teacher Health Service.
- (b) Healthful Surroundings.
- (c) Content Course or Courses.

I. STUDENT HEALTH SERVICE:

The Student Health Service referred to should include:

- (a) A complete health examination and such subsequent examinations as may be necessary.
- (b) Health advice and supervision of students throughout the course.
- (c) The correction of remediable health defects.
- (d) The maintenance of a healthful regimen of living. (Healthful living shall be understood to include proper hours of sleep, proper food, clothing, bathing and exercise.)
- (e) As far as practicable, the student's attitude and conduct in regard to the above points shall be a basis for recommendation for a professional position.

II. HEALTHFUL SURROUNDINGS:

It is recommended that the administration of Teacher-Training Schools should make provision for supervision and control of the living and working conditions of students, whether the students live in dormitories or elsewhere.

III. SUGGESTED TOPICS

The following subject matter topics are suggested, in order that teachers may have an appreciation of community health work and may do their part in health instructions to the best advantage. It is important that there be adaptation of these principles to the problems of urban and rural schools, and it is further suggested that the best practicable distribution of time and relative emphasis be given these topics according to local conditions.

The fundamental subject matter should be derived from the following fields:

- (a) Personal Hygiene
- (b) Nutrition
- (c) Community Hygiene.
- (d) Social Hygiene.
- (e) Mental Hygiene.
- (f) Health and Care of Infants and Young Children.
- (g) Health of Childhood and Adolescence.
- (h) First Aid and Safety.
- (i) Hygiene of the Worker.
- (j) Home Nursing and Care of the Sick.
- (k) School Hygiene.
- (l) Physical Education.
- (m) Principles of Health Education and Practice Teaching. Practice of Teaching to include practice in all types of contact with children incident to health work in the school.

*The September issue of the Canadian Red Cross contained articles of special value to teachers. Copies may be obtained upon application to any Provincial Division. See Page 16 for addresses.

Junior Red Cross

Many Indications of Its Usefulness

The steady extension of the Junior Red Cross work in the schools of Ontario during the last four years apparently indicates that it is fulfilling its purpose. During the past year 912 Junior Red Cross Auxiliaries were in operation in the schools with an enrolment of 28,121 members. The character of the work accomplished in local schools is indicated by one of the county inspectors who reports as follows:

"In those schools where the Junior Red Cross is in active operation there are many indications of its usefulness. These are noticeable in the improved appearance of pupils; greater cleanliness in the school, the grounds, and out-buildings; greater interest on the part of the pupils in the organization and work of the school, and a feeling of responsibility on the part of the pupils in the general welfare of the school and community."

—From Annual Report, Department of Education, Ontario.

The Exhibit of the Canadian Nurses' Association at Helsingfors



THIS illustration is reproduced from a photograph taken of the Exhibit of the Canadian Nurses' Association at Helsingfors, Finland, during the Congress of the International Council of Nurses, held July 20th-25th.

Canadians may perhaps be pardoned for their pride in both the quantity and quality of the Canadian exhibit. To Miss Hersey, Superintendent of Nurses, Royal Victoria Hospital, Montreal, belongs the credit of having assembled the exhibit from all the provinces of Canada, and for having it safely packed, and despatched by steamship. It was she, too, who had all the worry of its failure to arrive until the morning on which the Conference opened, and the compensating joy of seeing it all in place by 9.30 a.m. Monday, July 20th. We were all deeply grateful to the members of the Exhibit Committee in Helsingfors and in particular to Miss Nanna Hall for having set it up so beautifully.

In the same room with the Canadian Exhibit, were exhibits from Australia, France, New Zealand, Poland and England. The Canadian exhibit occupied about two-thirds of the space. A large Union Jack was suspended from the middle of the room, and smaller ones were distributed in various parts. A Canadian pupil nurse dressed in uniform graced the centre of the table.

The Victorian Order of Nurses Exhibit was very attractive. A doll dressed in the out-door uniform attracted attention at once, and so did the large size photograph of the "Bonniest Baby in the British Empire Competition of 1924" won by a Canadian baby. A map of Canada was marked to show the distribution of the work of the Victorian Order and photos of nurses, and a collection of the forms used, gave a vivid picture of the activities of organization.

The Junior Red Cross exhibit occupied a part of the right-hand side of the room, and consisted of a large organ-

ization chart, mounted photographs of Juniors at work and Health Posters. In another part of the room, charts and posters showed Red Cross Outposts and Home Nursing Activities, and the various Red Cross health-educative publications were on display on the large central table.

The publications of the Federal Department of Health were displayed, and there were attractive exhibits from the Provincial Departments of Health of New Brunswick, Manitoba, Ontario, Saskatchewan, and British Columbia. In addition to the photographs of health activities, there were a few large sepia photographs of some of New Brunswick's beauty spots. This, we thought, was a happy idea. In addition to the provincial exhibits, there were descriptive folders of the University of Dalhousie Public Health Clinic, and Red Cross public health work in Prince Edward Island.

The Training-School folders were an excellent feature of the exhibit. These represented nursing schools in Alberta, Saskatchewan, Manitoba, Ontario and Quebec. Both English and French-Canadian training-schools were shown in the folders from Quebec. All the Ontario folders were bound in a uniform blue vellum cover with the printed caption "Canadian Nurses' Association, Nursing Education Section, Province of Ontario, Canada." Saskatchewan had a uniform cover of brown craft with old English caption. Somewhat similar brown craft covers encased the Saskatchewan exhibits of the Government Public Health Department, the Regina City Health Department, Nursing Housekeepers in Saskatchewan, Department of Indian Affairs, Child Welfare, Junior Red Cross, Nursing Outposts, Home Nursing, and the School Hygiene Branch of the Saskatchewan Department of Education. Mention must also be made of splendid exhibits of the Medical Inspection Department of the Winnipeg Public Schools and the Social Service Department of the Winnipeg General Hospital. —J.E.B.

Glimpses of Junior Red Cross Abroad

MISS JEAN E. BROWNE, Director of Junior Red Cross, who penned this article, was invited by the League of Red Cross Societies to spend three months' study at the Junior Division of the League. During that period Miss Browne visited the Junior Red Cross Societies of Czecho-Slovakia, Austria, England and Belgium and in addition spent several weeks at the League Secretariat at Paris studying documents and organization of the Junior Red Cross Societies of the world.

Miss Browne is president of the Canadian Nurses' Association, and in that capacity attended the Congress of the International Council of Nurses at Helsingfors, Finland.

The week I spent in Czecho-Slovakia with Miss Elsie Graves Benedict, head of the organization department of the Junior Section of the League of Red Cross Societies, will long be remembered as a series of vivid pictures of Juniors at work and by the great kindness with which we were received by the personnel of the Czechoslovak Red Cross. At the Headquarters in Prague we were shown the scheme of organization which seems to me to be ideal. The thorough and democratic organization of the Senior Red Cross obviates the necessity of trying to solve the burning question of what will happen to Juniors when they reach the age limit of Junior membership. In Czecho-Slovakia, they will quite naturally enter the Senior branches, for the Red Cross is organized locally in practically all parts of the country, and there is a sufficiently interesting program to hold the attention of alert, intelligent and trained adolescents.

I shall attempt to tell you of one Junior group in Czecho-Slovakia, organized in the tiny village of Pokryvac in the province of Slovakia. This was the most remote and most primitive school which I visited.

Pokryvac is in the Orava district, which surpasses in beauty anything I have ever seen. The Orava mountains are an off-shoot of the Carpathians. They are covered with trees and their valleys are all cultivated. The Orava river flows along the base of the mountain ranges. On one of the steepest cliffs, one of the best preserved of the mediaeval castles of Europe dominates the landscape for miles in all directions.

We left Turciansky Svätý Martin, the centre of the old Slovakian culture, in the forenoon of a bright day in early May, in a comfortable motor, and reached Kubin, a little

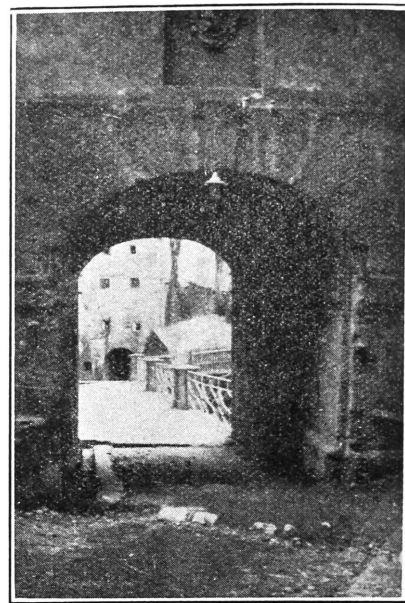
mountain town, for lunch. In Kubin, there is a very energetic Junior group in the High School, and word was left that we would call on them some time in the afternoon on our way back from Pokryvac. From Kubin, we went for about fifteen miles in our car, and then had to get out and walk, when the roads were no longer passable for a car. Shortly after we left the road rain commenced and we walked or rather slid down the steep hills, arriving in the most primitive village I saw in Central Europe, with mud to our ankles. We were most hospitably received by the teacher's wife. All the schools in Central Europe, except in the cities, include living quarters for the teacher. Unfortunately, the Juniors themselves were not there, as school is dismissed in Czecho-Slovakia at 2 p.m. The teacher was hunting big game in the mountains close to the school, but he returned soon after our arrival.

There were only twenty pupils in this little school, all of whom were members of the Junior Red Cross. During the past year, these 20 Juniors planted 90 trees—fruit trees and willows. They plant fruit trees, because they wish to keep the health rule of eating fresh fruit every day and they plant willows to get a supply of raffia for industrial purposes. The minimum Junior Red Cross programme throughout Czecho-Slovakia for 1925, entails an obligation on the part of each member:

- (1) To care for one sick school-mate or comrade.
- (2) To plant five linden trees during the year.

The proposed minimum programme for 1925-26 is:

- (1) The caring for one delicate school-mate.
- (2) Each Junior member is to have a tooth-brush.



The outer gateway leading to the castle of Salzburg, Austria.

- (3) Cleanliness in the class-room is to be maintained.

The Juniors in Pokryvac are carrying on correspondence with groups in Moravia and Bohemia, (in their own country), Dalmatia, in Jugoslavia, and the U.S.A. We were shown some very excellent portfolios that had been received. One of the most noticeable things in this little class-room was a white wash-stand with complete equipment. A set of simple tools had been sent from headquarters and the boys had made a First-Aid cabinet. Yarn has also been sent to them, and the girls knit it into garments. One third of these they keep, and two-thirds are sent to other schools which need them. They also make babies' clothing for the Red Cross Health Centre in Kubin. These children from poor homes pay their fees and make small contributions of money as well. The teacher said that no matter how poor they were, they must learn unselfish service for others.

To my question as to what difference Junior Red Cross had made in the health of the pupils, the teacher's wife said:

"They are all much cleaner," and she took from the wall the printed "Health Rules" to which the Secretary at the request of the group had added a thirteenth rule which read: "We will take a sponge bath every night before we go to bed."

She told us the Junior members were carrying the practice of health into their own homes and were insisting on having their bedroom windows open at night (in Central Europe this is almost revolutionary), and they are helping to clean their own homes. There were window boxes full of plants in bloom in this class-room and we were told that seeds had been sent to them from a school in Bohemia. After their flowers bloomed, they sent seeds to another school in the mountains. Mr. Javurek told us there were 30 other just such schools as this in the Orava district where Junior Red Cross is organized and that it is doing a great deal to improve general hygienic conditions in these villages.

Our return from Pocryvac was much later than we anticipated owing to a heavy rain, and we found a Junior group in the Secondary School at Kubin waiting till 6.30 p.m. for us. The President, a fine-looking boy of possibly twelve or thirteen years of age, welcomed us officially and then proceeded to conduct a regular meeting. The Secretary had prepared a special report of the year's activities for our visit. Judging by the report, this group is carrying out an excellent Junior Red Cross programme and taking great zest in doing it. Two of the girl members presented us with beautiful flowers and we were then taken to the home of Madame Hvezdoslav, the President of the Red Cross of Kubin. Madame is a semi-invalid, but takes a most active interest in the Juniors. She is the widow of a greatly loved Slovakian poet.

School excursions which for many years have been conducted in European countries are being greatly helped by the Junior Red Cross. During May, June and early July, 1924, 100 school groups from all over Czecho-Slovakia visited Prague and were taken care of by the Junior Red Cross. Many such visits were made by Junior groups to other Junior groups throughout the Republic. This is partly the result of school correspondence. Dormitories have been built in Prague, Brno and Bratislava by the Red Cross for the accommodation of such visiting groups. It is interesting to note how interested the grown-ups are in these excursions. It is a common occurrence in Prague that a restaurant



A school in a Slovakian village near the summer home of President Masaryk of the Czecho-Slovakian Republic. Though it would not seem so from the photo, the school is well lighted. The windows are on the other side.

keeper, a baker, or any business man will furnish the meals and lodgings for an entire group of children coming from his birthplace or from a place concerning which he has some interest. Theatres and museums are open freely to the visitors.

ENGLAND

It is a far cry from the mountain villages of Slovakia to London, the heart of the British Empire, where also in many of the London schools, Junior Red Cross is firmly established. In fact, when I left England, I was convinced that this great new movement among the children and young people of the world which we call Junior Red Cross has come to stay. I suppose there is no more conservative body in the world than English teachers, and perhaps none more

ready to try out a new thing once they are convinced it is right.

One of the most interesting English schools I visited was St. Ann's Heath School at Virginia Water, in Surrey. My recollection of this school calls up a picture of an approach through avenues of elms, pleasant meadows, and woods ablaze with rhododendrons in bloom, of a modest little two-roomed school surrounded by trees and gardens, of a class-room in which there was the spirit of life, of a teacher who loved his work, and of children who loved their school. In the class-room, we saw specimens for the Nature Study class that had been brought in by the pupils that morning, and in a glass case we saw silk-worms busily eating mulberry leaves. We saw a portfolio in the process of being made with a section

(Continued on page 15)



A view in a Slovakian village. Through the interest aroused in the subject of health by the vigorous organization of Senior and Junior Red Cross, the people of the country are beginning to lead more hygienic lives.

Junior Red Cross in the Indian Schools

AT THE request of the Federal Government of Canada, an effort is being made to organize Junior Red Cross in the Indian schools throughout the Dominion. Commissioner Graham, of Regina, who is an ardent supporter of Red Cross, arranged for some of the Indian agents to meet with Mrs. Waagen, the first vice-president of the Alberta Division, and Mrs. Fisher, the Director of Junior Red Cross for Alberta, and discuss organization among the Indian children.

Following this very interesting visit, the Alberta field organizer was invited to attend the Indian Reserve at Morley on March 2nd and address the children. "Jacob Two Young Men," the interpreter, went with them. About thirty children were present and to these Mr. Scott told the story of the Junior Red Cross. They were very interested and attentive, so we hope that "Jacob Two Young Men's" story of the Junior movement left the right impression.

The teacher suggested that to interest the children they should be made to draw Health Posters, and in this way start the work of the Junior Red Cross.

The Indian children of Morley never have seen coin of the realm, so it is quite a difficult proposition for them to raise their membership fees. Mr. Scott is, therefore, returning to Morley with a set of Red Cross lantern slides in a few weeks' time, when it is proposed to organize a Senior Branch of the Red Cross. A small admission fee will be charged for this lecture and will be donated by the adult members to the children to enable them to raise their membership fees. In return, the children are to prepare the school room for the meeting and will do the cleaning up afterwards. The services of "Jacob Two Young Men" as interpreter were greatly appreciated on the occasion of Mr. Scott's visit.

The following letter has been received by the National Office of the Society from Mrs. C. B. Waagen, the honorary secretary of the Alberta Division:

"The accompanying snapshot is of the youngest Junior Red Cross member in Canada. She is a Sarcee Indian and at the time the photo was taken was only eleven hours old. The nurse holding her is Miss Dora West, Junior Superintendent attached to the Calgary Provincial Division. This baby was born during stampede week while the

Sarcee Indians were encamped on the Exhibition Grounds. The baby arrived somewhat unexpectedly, and Miss West who was in charge of the Exhibition Rest Room for the Calgary Branch was sent for. Dr. McMurray, from the Indian Reservation was in charge and everything went splendidly. There was great excitement, of course, amongst the Indians.

The mother was so delighted with Miss West and with the Red Cross that she has named the baby "Dora," after her; and you will note that the infant is wearing a Junior Red Cross button, so I think she may be looked upon as a welcome member.

The mother is a particularly fine type of Indian woman, very intelligent, and anxious to do everything possible for her own welfare and that of the baby. The old squaws would insist on giving the child only pieces of bread and tea, so Miss West kept her well nourished with custards, milk, and other nourishing food. She was stretched on a skin on the ground, and occupied a tent with another woman, and although the day was very hot she seemed to be covered with a multitude of blankets. The baby was so covered up that you might have thought she would smother. But she seemed to be very healthy and as good as gold. We gave the mother some literature on child welfare; she can speak and read English.

The purposes of the Junior Red Cross are to arouse enthusiasm and a desire for good health for oneself, a desire to help others to attain better health and achieve greater happiness. In other words, Junior Red Cross arouses a desire to co-operate in all movements that will tend to make better individuals, better communities, and a better world.



The youngest member of the Junior Red Cross in Canada. A baby Sarcee Indian in the arms of Miss Dora West, one of the nurses of the Alberta Division. The baby was born during the Calgary Stampede, while the Indians were camped on the Exhibition Grounds.

The Red Cross Home Nursing Classes

Women in Many Parts of Canada Travel Long Distances to Get Benefit of the Course.
Active Enrollment for the Autumn



Home Nursing Class at Kenaston, Sask.

The class was organized during winter and some of the meetings took place during bitterly cold weather. In spite of this, however, the attendance was remarkably good, thirty members qualifying for cards of acknowledgment. Kenaston is quite a small village, and Mrs. Gisbey, class instructor, was the only resident nurse. She has a small baby and it was not possible to arrange for two groups, hence the unusually large enrollment of forty-seven in this particular class.

PUBLIC HEALTH NURSE APPRECIATES VALUE OF HOME NURSING INSTRUCTION

The Director of Nursing Services of the Toronto Department of Public Health sends the Red Cross this extract from a report made by one of the City Nurses following a visit to a home where the mother had received the benefit of Red Cross instruction in Home Nursing.

"The value of the Home Nursing classes organized by the Red Cross was forcibly illustrated when visiting a home to-day. In comparing the condition of room and patient during a previous illness with that of to-day it scarcely seemed possible

that the same mother was looking after them.

"These classes have been held in the comfortable, well-kept homes of the district and no doubt this has proved an incentive, as there seems to have been an improvement throughout the homes."

ENTHUSIASTIC FRENCH CANADIANS

From Kent County, New Brunswick, comes news of the completion of a home nursing class composed entirely of French speaking people. Twenty-six women enrolled in the class and twenty-five attended at least 75 per cent. of the classes. The one woman who enrolled and did not have 75 per cent. attendance was obliged to miss some classes on account of work. The fact that the class included many women who had to walk several miles to attend each class speaks well for their enthusiasm and for the value they placed upon

the knowledge and practice offered in the course.

Reports from the different Provincial Divisions tell of many new classes in progress of organization for the autumn. These classes are organized by the Red Cross Society through a local Red Cross Branch or any organization of women. Groups of women wishing to include a home nursing class in their programme are requested to consult the Provincial Divisional office of the Red Cross, the addresses being given on page 16 of this issue.

HOME NURSING CLASSES IN ALBERTA

Miss West, Organizer of Home Nursing Classes for the Alberta Division, recently returned from a visit to outlying districts in Northern Alberta. Miss West reports:

"All the students whom I met while in this North Country who had participated in the Home Nursing Classes in Grande Prairie, Berwyn and Grimshaw, spoke very highly of the educational value of the course and the instruction given. In all three places, they are contemplating forming another class this Winter. I would like to illustrate just one case of the splendid service given to this R.C. work by the Graduate Nurses.—One of the teachers had a drive of 8 miles on every lesson day during severe weather, 40 and 50 below zero, over roads that had 5 and 6 feet of snow."

THE JUNIOR RED CROSS IN QUEBEC

The Director of the Junior Red Cross of Quebec province went out on a campaign of four days last autumn and succeeded in organizing 33 Junior groups with a total membership of 900 children. It can be done.

"THE RED CROSS JUNIOR"

The subscription list of the Red Cross Junior, the only Canadian Children's Magazine, is now 12,000 a month. Most of these are bought by the youngsters at 5c. a copy. The children buy "The Red Cross Junior" because they are interested in it. If it did not interest them they would not buy it.

The Right Answer

A man and a woman were traveling in a train. The woman had a dog, and the man a pipe.

The man threw the dog out of the window, and the woman got up and threw the man's pipe out after it.

When they got out at the next station, they met the dog—and what do you think he had in his mouth?

Answer: His tongue.

—Pickup.

Neighbors

By G. G. Nasmith

THE Browns and the Camerons were neighbors. The Browns lived on Maple Street; the Camerons lived on Oak Street. Though neighbors, they had never met. In fact Mrs. Brown and Mrs. Cameron had only seen each other two or three times when, by accident, in the course of their household duties, they happened to be at their windows at the same time and caught fleeting glimpses of each other at long range.

Both Mr. Cameron and Mr. Brown were fond of delving in the earth after the day's work down town. Mr. Brown inclined more toward growing vegetables, but Mr. Cameron believed that he could obtain more mental and just as much physical profit from growing flowers and was satisfied to buy his vegetables in the shops. Mrs. Cameron often wished that she could go into her neighbor's garden and pick a nice fresh salad for dinner. Mrs. Brown, on the other hand, more than once felt like telephoning Mrs. Cameron to ask for a bouquet of her favorite flowers which bloomed so freely in the Cameron garden. If the two neighbors had known one another perhaps they would have exchanged not only garden products but ideas and the course of the lives of the persons of one family might have run in a very different channel.

Mrs. Cameron and Mrs. Brown were about the same age, somewhere between thirty-five and forty. Both had borne several children and they were in what is ordinarily called "comfortable circumstances." They were equally intelligent but of somewhat different temperaments. Mrs. Brown was a woman of decision, inclined to act quickly when she had once made up her mind. Mrs. Cameron tended to take things more easily and to put off till to-morrow what did not seem at the moment to be of importance.

About five years ago Mrs. Brown, while recovering from a serious illness, had her attention drawn to a slight swelling on her left side.

"It may be nothing," said the nurse. "But then again it might be something that should be given attention. If I were you I should have the

doctor look at it the next time he comes in."

The doctor was consulted and after an examination said:

"I hate to advise an operation in such an apparently trivial ailment as this might seem to be. But then all these growths have very small beginnings. With your permission I will ask a specialist to consult with me and we can then make up our minds."

The consultation was held; the result was an operation and the small growth was removed. To make assurance doubly sure the area operated on was treated with radium, and as the operation took place five years ago, and no further development has taken place it must be concluded that the growth was either not of a serious type or that it had been cured by the operation.

Curiously enough, about a year later Mrs. Cameron noticed a small lump under her right breast. It seemed so insignificant that she promptly forgot all about it. About two months later, however, she again noticed almost sub-consciously, that the lump had not disappeared. In any case a slight swelling appeared to be of little importance to her, for at various times she had had swellings on her neck from swollen glands, from ulcerated teeth, and from bumps but they had always disappeared in time. Why, therefore, should this particular lump cause her any anxiety? Mrs. Cameron went on with her life as though nothing was amiss.

The swelling did not go down, though it did not enlarge appreciably on the surface. But, at the end of the year Mrs. Cameron was decidedly off color. The change was so gradual that the family and her immediate friends and relatives did not notice it, or if they did were too considerate to make any comment. She had lost her colour, her energy had gone and it became increasingly difficult to drive herself to action.

During the spring following Mrs. Cameron developed influenza and her Doctor was called in. While making the customary examination to determine whether the lungs were involved he discovered the lump under the breast. He realized that it

was not small and that in all probability it was of considerable size internally. His first duty was to pull his patient through her attack and he did not say anything about the lump to Mr. Cameron until she was well on the road to convalescence.

"It may not be serious," he said, "but I have my doubts. We must have a consultation right away." As the result Mrs. Cameron was operated upon and a large growth removed. For a time she apparently recovered and, for a few months seemed to recover a good deal of her former strength. A year afterwards, however, she was compelled to undergo a similar operation and six months later, after a good deal of suffering, she died.

One summer evening Mr. Brown and Mr. Cameron, who had meanwhile learned to know one another, were talking over the back fence:

"If she had only spoken to me or to the doctor about it when she first detected that lump, she might have been living to-day. I cannot understand why she didn't," said Mr. Cameron.

Mr. Brown did not reply for a moment or two. He was thinking about his own wife and wondering what might have happened if she had neglected to speak of her discovery. He was too kind hearted to refer to it and make his neighbor feel worse than he was feeling already, so he merely replied:

"It does seem very strange; evidently she did not think it was of any importance or she would have mentioned it."

"STARLIGHT JUNIORS," NOVA SCOTIA

The following extract from a Nova Scotia teacher's letter speaks for itself:

I feel it my duty to express a word of praise for Junior Red Cross. I gave it a trial this year and am perfectly satisfied with the results. Since organization it has helped me in innumerable ways, in fact it put new life in my school. The teaching of health and morals has become a pleasure. Under its influence the children are ever ready to do their best. In brief, so great is my respect for it, that my only regret is that I didn't start before, and hope always to be able to carry it with me.

Great results are achieved when many people, animated by a noble purpose, pull together for a great cause. Join the Red Cross and pull together for a high standard of national health.

The Perfect Blend

"SALADA" TEA

H715

The exquisite flavor of Salada is produced by the expert blending of the choicest teas grown.

Destroy the Weed

D ID you ever know a successful farmer who hesitated to get rid of the vicious, spreading weeds that take root in his fields?

Certainly not!

And why not?

Because the farmer knows well that weeds are hardier and of more rapid growth than cultivated plants; that if not removed before they have had time to extend their roots, his crops, robbed of their nourishment, will be victims of the invaders.

The weed of the tilled field has a counterpart in the human body. Its name is cancer. Like the weed of the field, this outlaw growth starts in a small and inconspicuous way and in the beginning gives slight warning of its presence.

Left to itself, cancer eventually spreads throughout the body and lives at the body's expense. If not removed in time, it overgrows the normal healthy life in its vicinity and causes the death of its victim—as the weed destroys the farmer's valuable crops.

What is to be done about it?

Treat the cancer as the farmer treats the weeds. He deals with them promptly. To deal with them successfully, he must recognize the weeds in their earliest state. To eliminate cancer certainly it is necessary to recognize it at an early stage.

It therefore becomes important to know the symptoms of cancer that the treatment may be given in time.

What is cancer?

An obstinate sore on the surface

of the body, particularly if it is about the mouth, tongue or lips.

A mole, wart or similar skin defect which becomes irritated or changes in shape, appearance or size.

An abnormal discharge from one of the orifices of the body, particularly if tinged with blood, or an irregular or profuse bleeding.

A lump or swelling in the breast.

A cancer may cause a pain or discomfort over the stomach. Sometimes the taking of food makes the pain worse and the condition may be mistaken for "dyspepsia" or "indigestion." It may cause constipation, loss of appetite or loss of weight.

These may be, and often are, symptoms of something besides cancer, but they are danger signals and you should find out what they mean. They show the absolute necessity of a thorough examination by a competent physician, especially if you are more than thirty-five years of age, for it is after this age that cancer takes its greatest toll.

Remember that great loss of weight and changes in complexion and appearance of the skin are usually later symptoms of cancer—and generally indicate cancer in the incurable stages. Act before you get these symptoms.

The message of the foremost cancer specialists is a message of hope. They teach that:

Cancer is not inherited.

Cancer is not catching.

Cancer starts as a local disease.

It should be removed early before it has time to spread.

Glimpses of Junior Red Cross Abroad

(Continued from page 11)

of an oak tree from Runnymede, where the great charter was signed. Bits of local history of various kinds were being woven into this portfolio, and when it is finished it will be sent to a Junior group in Halifax. I might say that the Halifax group first prepared a portfolio and asked that it be sent to England. It went from our National Office in Toronto to the British Headquarters in London, and from there was sent to Virginia Water.

The spirit of Junior Red Cross existed, I fancy, in St. Ann's Heath School long before it was actually organized. In fact, there was a local and quite original organization there which gave dignity to work. There was a list of honorary officers, each one of whom had some special job to do. These are:—

1. School Captain.
2. Girls' Prefect.
3. Captain of Sport (boys).
4. Captain of Sport (girls).
5. Red Cross Secretary (added recently).
6. Mistress of Keys.
7. Maid of Kitchen.
8. Maid of Music.
9. Maid of Garden.
10. Lady in Waiting.
11. Clerk of Weather.
12. Mistress of Rolls.
13. Time Keeper.
14. Corporal of Playground.
15. Engineer.
16. Chief Librarian.
17. Head of Intelligence.
18. Cookery Prefect.
19. Lord of Fresh Air.

The ten days I spent in England culminated in the presentation of the beautiful Junior Red Cross banner. I wish to repeat what many of you have probably read in the September number of "The Red Cross Junior," that this little drama enacted in the heart of the British Empire in the presence of people who are connected with families of Empire builders and who themselves are typical of the stability of that Empire, is significant of the permanence and importance of Junior Red Cross in the world to-day.

JEAN E. BROWNE

The Ontario Division in the Nipissing District

The summer activities of the Ontario Division's Outpost nurse in the Nipissing District included the establishment of three free dental and tonsil clinics, resulting in one hundred and eighty-five children receiving treatment. Ninety-four tonsil and adenoid operations were performed, and four hundred and thirty-two extractions, fillings and dental treatments given. People from many parts of the surrounding country brought their children for examination, treatment and advice as to the means of preserving their health. The number of arrivals was much beyond the expectations of the Red Cross Society.

The entire services of the professional staff — comprising two nose and throat specialists, one anaesthetist, two dentists and four registered nurses were given voluntarily, together with work-

ers from the local North Bay branch. Lacking the facilities of a hospital, the upper hall of the school was taken over and clever contrivances and conveniences were improvised. Two sections were curtained off, one for dental and one for surgical arrangements. The stage was adapted to meet the needs of a rest ward. Beds were improvised out of the school benches, each child bringing with him a pillow and blanket, and everything made as comfortable as was necessary. On the stove in the centre of the room the instruments were sterilized by a volunteer helper, who also made the beds and gave other help as needed.

The work of this nurse represents one of the types of outpost activities of the Ontario Division. In this instance the district served is poor and sparsely settled, but is near a prosperous centre with

an active Red Cross branch which assists the nurse in her rural work in every way possible. The work is directed from the Provincial office, on which staff she is employed.

Opportunities for Self-Expression

The Junior Red Cross is a voluntary organization through which children and young people find opportunities for self-expression; the motive which it brings into any class room appeals to the imagination and will of children in such a way as to transmute knowledge into action; this motive is being specially used by those who are directing the movement to promote health, to develop the altruistic tendencies in children, to give practice in good citizenship and to promote international friendliness among the children of the world; it is not a method of education, or health education, but it is a free spirit which quickens the life of the whole school in which it is organized.

The Educators' Conference gathered in Paris under the auspices of the League of Red Cross Societies, considers that there is every prospect that the progress of public instruction and education is bound up with the widening action of voluntary organizations in all countries.

The Conference considers that the Junior Red Cross is in perfect accord with all the tendencies of modern pedagogy to make the school an instrument not only of intellectual, but of moral education, and that the Junior Red Cross consequently merits the support and encouragement of school authorities and of the teaching profession. — *From Resolution II of the Educators' Conference held in Paris, France, July, 1925.*

Your membership helps the Society. Keep it renewed. The coupon on this page will be found convenient.

THE CANADIAN RED CROSS EXECUTIVE OFFICERS OF PROVINCIAL DIVISIONS

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187 Kennedy St.,
Winnipeg, Man.

SASKATCHEWAN:

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2331 Victoria Avenue,
Regina, Sask.

ALBERTA:

Mrs. C. B. Waagen,
300 Traders' Building,
Calgary, Alta.

BRITISH COLUMBIA:

J. Pitcairn Hogg,
626 Pender St. West,
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(Name of Provincial Division of Canadian Red Cross)

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