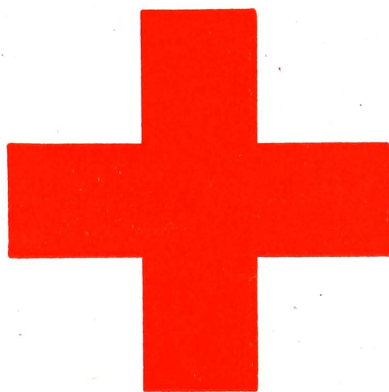


The Canadian Red Cross

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."

HEALTH FOR ALL AND ALL FOR HEALTH

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Please Use Coupon on Page 16 for Membership Renewal

The Red Cross has become one of the greatest of world-wide movements for human contentment and well-being. It carries on its beneficent work in no less than fifty-four nations. It may be welcomed as one of the few blessings which came to stricken humanity out of the blighting losses and horrors and anguish of war. It ministers to the needs of millions of individuals and thousands of communities in promoting health, happiness, goodwill, good citizenship and co-operation for the well-being of the homes of the nations.—Jas. W. Robertson.

National Headquarters

Toronto, Canada

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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Care of the Teeth

The proud parent, who allows her baby to suck its thumb, (or worse still that abomination "a pacifier") would be horrified to know that such a habit may mar the beauty of her child for life and even be the cause of ill-health in later years. She does not know that projecting teeth, or an undershot jaw, are frequently the consequences of such childish habits.

These effects of childish habits are now well recognized by the dental profession. Many dentists earn an honest living trying, and it must be admitted with considerable success, to remodel badly formed jaws and bring into place teeth forced out of position. The expert dentist can show by photographs how adenoids and enlarged tonsils may lead to a thick tongue or a projecting lower jaw, or the lack of hard foods to chew may prevent the normal development of the jaw with consequent crowding of the permanent teeth out of place.

All of these malformations of the jaw which interfere with the normal arrangement of the teeth also interfere with the proper chewing and the assimilation of food. Indigestion, mal-nutrition and other troubles may follow as natural consequences. The practice of these seemingly harmless habits in young children may have lasting and disastrous results, not only on the health and growth of children but upon their physical beauty.

The habits referred to are all preventable. Parents should see that their children do not develop these preventable habits. The excellent paper on "Teeth, Health and Good Looks," appearing in this issue was written by an outstanding authority on the subject for this Journal at the request of the Editorial Board. Because of its importance a careful study of the text and photographs will prove well worth while.

A Teachers' Guide

The "World's Health," published by the League of Red Cross Societies, has the following to say about the "Teachers' Guide" dealing with the Junior Red Cross and published by the Canadian Red Cross Society:

Number 4 of the Canadian Junior Red Cross Teacher's Guide, after opening with a message from H. A.

Fisher, President of the Educational Council of Great Britain, gives, with extreme clarity, the information likely to be required by the busy teacher interested in the Junior Red Cross.

This booklet is divided into fourteen sections, eight of which deal with the formation of a Junior branch in Canada. The subjects covered include Membership, Organization, Enrolment and Re-enrolment, Charter, Button, Publications, Posters and Meetings. Sections 9-14 inclusive, deal with Junior Activities which are summed up under Correspondence, Suggestions for Service, Citizenship, Hygiene and Home Nursing Course, and School Councils.

The four supplements form the greater part of the booklet. The first gives the rules of the Health Game. The second outlines the duties of Officers and Committees and lays down the procedure to be adopted in conducting a meeting. The third gives suggestions for programmes. The strength of the dramatic instinct is here recognized and ideas are indicated for embodying health rules and habits in plays to be acted by the children. The fourth deals with school correspondence, and different portfolios are described somewhat in detail. The Juniors themselves composed the portfolios and, here as elsewhere, nature seems to have been more generous with the gentler sex, for most of the budding writers are girls, not boys.

Because of its definiteness and its careful choice and exposition of details, this pamphlet is entitled to a unique place among Junior Red Cross publications. We feel confident that its stimulating suggestions will be welcomed, not only by Canadian teachers and Juniors, but also by all those interested in the Junior Red Cross movement everywhere. Its usefulness is beyond doubt. We congratulate the Canadian Red Cross Society on having issued such a valuable guide, and hope that, following this example, publications of a similar nature will be forthcoming from other Societies. The needs of different Societies are, of course, varied, but the demand for a teacher's guide is no more urgent in Canada than it is elsewhere. If books or pamphlets of a similar nature are published by other Societies, it will be easy to build up a fund of information representing the experience of different Societies for the use and guidance of all.—C.F.K.
—The "Teacher's Guide" is available to all teachers upon application to any Provincial Division of the Red Cross. The addresses are on page 16.

THE RED CROSS SOCIETY

"Save the children and the adults will take care of themselves" is perhaps almost as true as the old maxim about pennies and dollars. Oshawa's Red Cross Society did an excellent work during the past summer in providing outings for eighty children whose aggregate gain in weight was three hundred and twenty pounds. Money invested in this sort of work pays dividends not in human flesh only but to a much greater extent in the betterment of the next generation. But what of the ninety and more who wished to go and hoped and yearned to go but could not because sufficient funds had not been provided? Possibly a more generous response next year will enable the Society to take care of all who require change and an antidote to malnutrition.—Oshawa Reformer.

Teeth, Health and Good Looks

Written Specially for the Canadian Red Cross Magazine
By G. Vernon Fisk

HAVE you ever carefully observed the animals of a circus or zoo? If so, you have probably been interested in the curiously strange and varied forms of mouths and teeth of the different creatures. If you gave any thought to the matter, you no doubt reasoned for yourself that, throughout the animal kingdom, teeth are peculiarly adapted to the work they have to perform.

The elephant's immense molars, with their flat surfaces working as a grinding machine, are particularly suited to prepare grass, fruits and tender shoots of trees which he eats. This type of tooth would not be adequate for a lion or a tiger, living largely upon food such as meat. His teeth are long, fang and scissor-like, suitable for rending and tearing. Similar characteristic differences may be observed in domestic animals such as the cow, whose food being herbivorous like the elephant's, requires teeth that resemble in shape those of that animal; while the dog, whose diet is largely carnivorous, is provided with long fanglike teeth approximating, in form, those of the lion.

Human beings, however, unlike most animals, live upon a variety of food; we find, therefore, that their teeth, being especially designed to perform those functions necessary for human existence, are a combination of the teeth of both carnivora and herbivora.

At birth, the child is, to all outward appearance, without teeth. In reality, the crowns of the first, or temporary teeth, are formed, but hidden beneath the gums, their development having commenced as early as six months before birth. Indeed, surprising as it may seem, under these temporary teeth are to be found also the beginning of some of the permanent set. It stands to reason that these teeth cannot grow as they should, if there is not provided a sufficient supply of the proper kinds of food necessary for their development. Phosphorous and lime have been found to be two of the most important mineral salts

to make sound teeth. These necessary elements are abundant in many of the natural foods such as milk, green vegetables and fresh fruits and

but maintain space for the developing permanent set as well. The loss of even one of them prematurely, through extraction, allows the neigh-

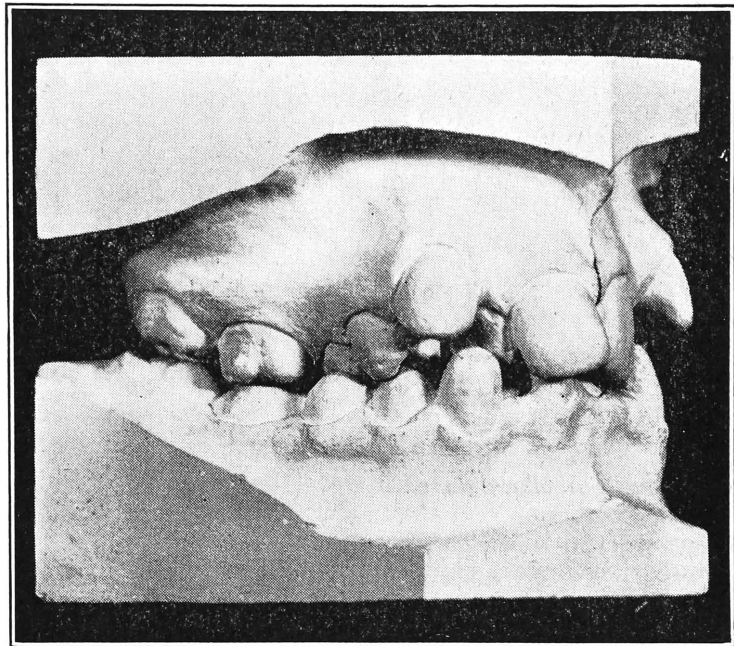


Fig. 1. Illustrates a cast of a child's mouth showing a crowded condition of the permanent teeth probably caused by the premature loss of the deciduous or temporary teeth.

should be supplied the child daily to aid the proper development of their teeth. It is important too that adults should also include these foods in their diet, in order that their teeth may be supplied with sufficient lime to resist decay.

RELATION OF BABY TEETH AND BEAUTY

Few parents realize the importance of a child's temporary teeth. After these teeth are all in place, care must be taken that the food given the child should undergo thorough and vigorous mastication, for this exercise promotes the normal growth of the bones of the face. The extreme importance of proper chewing may be realized when one considers that the jaws and teeth are the basis of the beauty of the lower two-thirds of the face. These teeth not only serve for the mastication of food during a period of rapid bodily development,

boring teeth to move towards the space.

If, however, the dentist places upon the teeth immediately adjacent to this space, metal bands, joined by a piece of stiff wire of the proper length to keep the teeth apart, no unfavorable movement of these teeth can take place until the permanent teeth come through; such a splint should be used in all cases where it is found necessary to remove one or more teeth too soon.

A condition, similar to that described above, may be caused if a temporary tooth is allowed to decay on the surfaces adjoining other teeth. Here, again, through loss of tooth tissue, there is a drifting together of the remaining teeth. As a result, the oncoming permanent tooth may be either retarded in coming through the gum or may be squeezed out of its normal position. In some instances it may not be allowed to come to place at all. The baby teeth, there-



Fig. II. A photograph of a young girl, ten years of age, whose teeth are irregular and whose face is quite mis-shaped as a result of habitual mouth-breathing, caused from adenoids and enlarged tonsils; this condition might have been prevented by the earlier removal of the adenoids and tonsils. See Fig. III.



Fig. III. The same girl shown in Fig. II. Adenoids and tonsils have been removed, the irregularity of the teeth corrected and normal lip function re-established.

fore, have a most deciding influence upon the regularity of the permanent set. How important it is that they be carefully watched and any decayed teeth filled before the cavities become large. When the teeth and gums are sore, due either to decay or extraction, a child may form the habit of bolting its food to avoid the discomfort of forcing the food against the tender gums or sensitive teeth. This habit acquired in childhood is seldom corrected later, and may result in defective digestion, assimilation and elimination as well as detracting from the appearance of the person.

On the other hand, a temporary tooth is often retained beyond its natural time, and may prevent its permanent successor from coming into place. The extraction of such a tooth may relieve the condition.

Children should be taught the effect upon the teeth of the over-indulgence of candy and sweets. When excessive amounts of these kinds of food are eaten, either at meals or between meals, the appetite becomes quickly satisfied. The effect is to decrease the desire for those foods which provide bone-building material. If the over-indulgence in sweets continues for any great length of time the quality of the teeth changes and they become susceptible to decay.

Much of the dental decay to-day may be attributed to this cause. Therefore, care should be given these teeth. They should be cleaned not less than twice a day by an older person, until the child reaches the age when he can be taught to thoroughly perform this duty for himself.

There is one tooth which requires special attention. It is the sixth tooth back counting from the centre. Because it is the first of the permanent teeth to appear, and, coming in behind the last temporary tooth, it is so often mistaken for a baby tooth. Too often, decay and loss of this important tooth follows. This is nothing short of a calamity because, not only does its loss mean lessened masticating (chewing) surface, but, as it forms, in a manner, the keystone of the permanent dental arch, its loss also means the collapse of this arch to a greater or less extent, consequently modifying the facial symmetry of the child.

As the front temporary teeth are so much smaller than the permanent ones, the question arises, how is it possible for the permanent teeth to come into their proper places without undue crowding or protruding? The answer is that the normal expansion of the bones of the jaw naturally, through growth, provides the room for these larger teeth. Such growth of the bones of the jaw should take

place that, just before the front teeth are ready to drop out, there should be space enough to put a ten-cent piece edgewise between them. When the natural spacing has not developed at that time, you may be certain that crowding the permanent set will result. If this has been discovered before the age when the teeth are commencing to be shed, it is quite probable that the character of the food has been such as to require little chewing. A change from a soft, pappy diet, to one which does require vigorous mastication, may assist the tardy growth of the jaws and prove to be helpful. But, in cases where the spacing is not discovered early enough for this to be effective, special treatment may be necessary. Your dentist will either correct the condition himself or advise you to consult someone competent to render such assistance.

FACIAL DEFORMITIES OFTEN PREVENTABLE

One frequently observes individuals with displeasing facial lines that might have been prevented if proper care had been exercised in earlier life. What are the causes of these deformities? On the threshold, we are faced with the problem of the possible influence of heredity. Many leading dental authorities ridicule

the suggestion that it is a factor at all. They deny the possibility of the child inheriting the large teeth of one parent and the small jaws of the other; and, it must be frankly admitted that convincing proof has not been furnished. These men point to the fact that, as a result of mild stimulation, it is possible to make conditions favorable for growth from a small jaw to one of ample size to accommodate the relatively large and malposed teeth. On the other hand, we find that Nature always follows a type. For example, children resemble their parents in stature, the color of the eyes, the hair, and in many other physical characteristics. Again, too many teeth, as well as missing teeth, are found with impressive regularity in families, sometimes skipping a generation, but quite often recurring in the next.

With this brief reference to heredity, we shall consider some other causes of facial deformity upon which there is a greater uniformity of opinion. The illustration (Fig. II) is a photograph of a young girl, the lower part of whose face is quite abnormal in shape. There is no doubt that, whatever influence heredity may have had upon this child's development, habitual breathing through the mouth has been a direct cause of the malformation.

Mouth breathing is one of the most common habits causing undesirable facial changes. The extent to which this is indulged in varies, as do also its results. For instance, in some cases, there is noticeable only a drawn appearance to the lips when closed, or a slight separation of them for comfort when at rest. In other cases the mouth is continually open, which causes the person to present a dull, stupid, listless appearance. Constant, or frequently repeated breathing through the mouth, is caused chiefly by adenoids, enlarged or diseased tonsils, or obstruction in the nose. Therefore, if a person snores at night or if he goes about during the daytime with his lips habitually apart, it is advisable that a physician should make examination to discover any possible abnormality. When the obstruction has been removed, the individual may be assisted in overcoming the habit of breathing through the mouth by wearing at night over the lips, strips of surgeon's silk isinglass

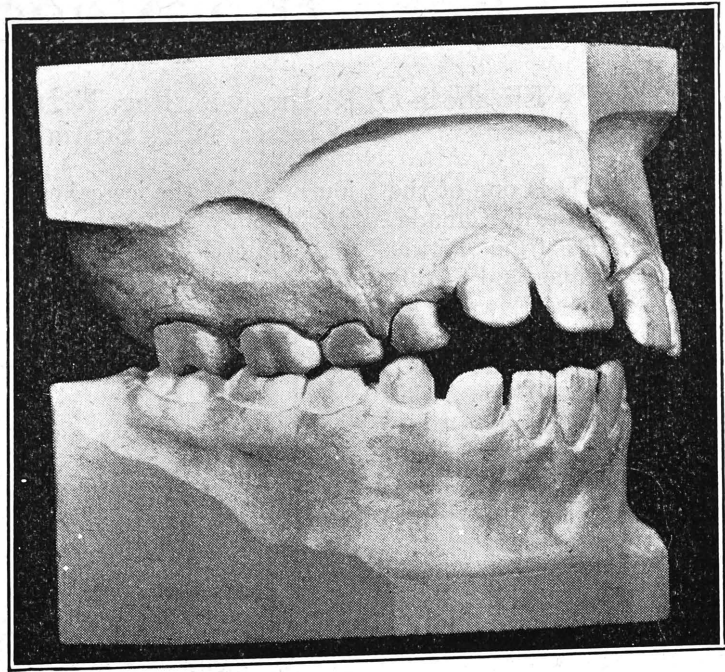


Fig. IV. A cast of a boy's teeth showing the effect upon the upper front teeth of the persistent sucking of his right thumb until the age of nine years.

plasters; or by the use of a health appliance, which consists of a head-gear made of cloth tape, with a strip across the mouth and chin strap of the same material. A constant effort should also be made to keep the lips closed when relaxed during the daytime (Fig. III).

Instead of a receding chin as in the foregoing case, Fig. IV presents another type of disfigurement,—namely, one with a prominent lower jaw. This condition is invariably associated with abnormal tonsils accomplished by an enlarged tongue, which in its efforts to make room for

itself, continually tends to press the jaw forward with the resulting over-developed and heavy appearance to the jaw observed in the illustration.

Other irregularities in the facial appearance may be caused by various detrimental habits. Foremost amongst these, may be considered some habits of eating; as for example, the bolting of food, or the choice of such foods as require little or no chewing. As a result of such, the jaws may not receive sufficient stimulation to promote normal growth and the teeth may develop irregularly, giving the individual's

(Continued on page 16)

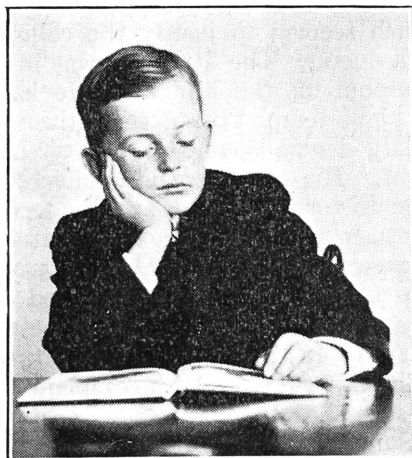


Fig. V. Illustrates a very common habit of resting the chin upon the arm or hand when reading or writing. As a result, the jaw may be markedly shifted to one side of the face.



Fig. VI. Another common habit, namely, resting the chin upon both hands. This habit, repeatedly performed is one of the factors in producing a receding chin which is such a common facial deformity to-day.

Where the Need is Great

By Elizabeth O. R. Browne., Reg. N., Organizer of Home Nursing Classes, Nova Scotia Division

PICTOU ISLAND is one of the most isolated spots in Canada. It lies ten miles from Pictou town in the Northumberland Strait, which separates Prince Edward Island from the mainland. It is a little place, only five miles long, from one and a half to two miles wide with forty-two families comprising 216 persons, mostly of Scottish descent. Such is the spot I visited in October last at the invitation of the County Nurse of the Provincial Government. Although a Home Nursing class could not be organized unless there was a nurse to teach, it was felt that a survey should be made in order that the Red Cross would know first hand just what the situation was and be prepared to co-operate in any way that seemed necessary.

On Tuesday, October 13th, I arrived in the town of Pictou, only to find that it was blowing too hard to cross. The weather was the same on Wednesday and Thursday. In the meantime it was learned that scarlet fever had been prevalent on the Island since last May, and that several new cases had developed in the current week, also that the school attendance was very low.

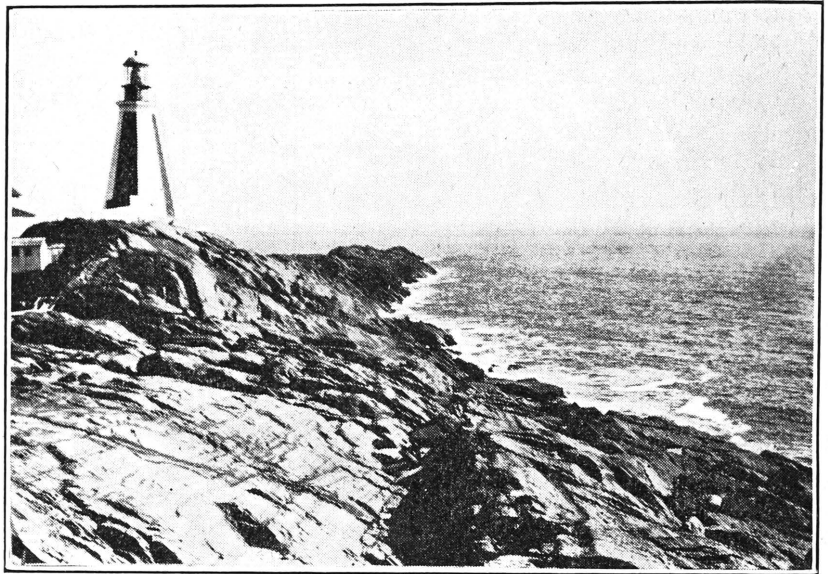
The island is only inhabited on the south side, the north side all being woodland, mostly spruce, and nearly everyone has his own woodlot. The soil is fertile and all vegetables, grain and wheat are grown on the island. Nearly everyone has cattle, some of the people selling butter. Cranberries are plentiful and if it is a good year, quantities are sold on the mainland.

There is one church but no settled clergyman, except during the summer months. The school enrolment was forty-six on October 19th. There is one mail a week, and the ferry runs only on Thursday and Friday, weather permitting. Special trips cost \$12. In the wintertime, being from December to March, inclusive, navigation is closed, and the forty-two families living there are almost completely cut off from the mainland. Telephone communication is frequently cut off and if medical aid is needed, it necessitates a hazardous

journey over the ice cakes to Pictou. On Monday I managed to get over and almost half an hour after I arrived on the island, a call came for me to see a woman who had been

the after effects of scarlet fever which had been raging off and on since last May. There had been no quarantine.

The next morning the doctor took



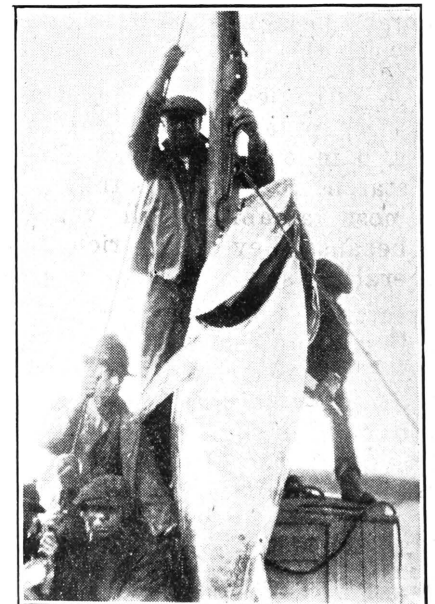
A lighthouse sentinel on the Rocky Coast of Nova Scotia. There are many spots like this along the rugged shores of the Maritime Provinces.

taken suddenly ill. Her husband met me and said that one of the children had scarlet fever and another was just recovering. The patient was lying on a couch in the kitchen. She had had a sudden attack of pain which had localized in the lower right side. A similar attack had occurred two years before, all of which seemed to justify the calling of a doctor. The little boy was in a bedroom off the kitchen. He had a high temperature, sore throat, enlarged glands, and a rash on his arms. His ears were also affected. The doctor was called, and the ferry boat sent right over and fortunately it was a calm night. This meant a trip of three hours at least and it was midnight before the doctor arrived. In the meantime two other children were seen, both complaining of sore throat.

Some of the citizens were met at the school-house, and we discussed Home Nursing and the prospects of a nurse for the winter. The people were enthusiastic, particularly because of the condition of many of the children who were suffering from

the sick woman over to the hospital, and operated for appendicitis. He

(Continued on page 13)



A big Tuna fish being hauled into the boat of a Nova Scotia fisherman. The fishing industry is followed by thousands of Canadians and is the source of considerable revenue to the people of Nova Scotia and New Brunswick. Photo by Canadian National Railways.

Foods the Body Needs

Article V. Vegetables

Vegetables are of so many kinds and have such varied purposes that they are divided into three groups according to the food materials they contain. These groups are called legumes, tubers and greens.

The legumes, such as beans, peas and lentils, contain proteins for body building. But the proteins in vegetables are of poorer quality than the proteins in animal foods. The body can make much better use of these vegetable proteins if milk, eggs or meat is added to the diet.

TUBERS AND ROOTS

The tubers and roots, such as potatoes, beets and turnips, store starch and sugar for the nourishment of the young plant. This makes them useful as fuel foods, especially for growing children and physical workers. The potato should be thinly peeled or, if possible, not peeled at all, because nearly all the mineral salts and vitamins are in the skin or just under it. The skins of baked potatoes are also useful to overcome constipation because they contain fibre.

GREEN VEGETABLES

The green vegetables, especially the leafy ones, such as lettuce, spinach or cabbage, are not rich in either protein, sugar or starch. Nevertheless they are the most valuable of all vegetables because they are so rich in mineral salts, in vitamins and bulk. As explained in a previous article these food elements are necessary to regulate the body machinery and promote health.

A word of caution is needed against the excessive use of vegetables and fruits with the intention of supplying vitamins in the diet. These green, leafy vegetables and many of the fruits have a low value as fuel foods and, although they contain important food materials, their excessive use may result in the body receiving too small an amount of

fuel food. There will, however, be little danger if milk is included in the diet because milk is a good body fuel. Vitamins are a comparatively new discovery and many books on diet give them undue emphasis at the expense of other food materials discovered many years before but none the less important.

DIGESTION OF VEGETABLES

Vegetables are less easily digested than animal foods owing to the stringy fibre in their structure. In the green vegetables with rapidly growing thin leaves, such as lettuce, the fibre is so soft that it may be eaten raw but the fibre in most vegetables requires to be softened by cooking. This fibre is not absorbed by the body but is of service in helping to move food along the intestine, thereby keeping the intestine clear and preventing constipation.

FOOD VALUE OF VEGETABLES

Writing of the value of vegetables in an excellent little book called "Food for Health's Sake," L. H. Gillett says: "Vegetables

are too often considered a luxury, and meat is incorrectly thought of as the essential strength-giver. Meat stimulates and gives a satisfied feeling—because of this stimulating quality people often crave it, but in their own way vegetables are perhaps just as much strength givers as meat. Vegetables are natural tonics with the very phosphates, calcium, and iron often contained in a doctor's prescription. The vegetables supply that which the body needs for its fullest vigor.

"When the supply has been too limited, evil results eventually follow. Sometimes the results come too slowly for us to associate cause and effect.

"At any rate, vegetables are not a luxury; they are a good investment, and a generous allowance is best. Vegetables alone will often renew energy, clear up a muddy complexion, make work seem easier, and build up resistance. Vegetables also help to overcome constipation. They contain mineral elements and vitamins that help to make good teeth and to regulate body processes."

Splendid Practical Work

FROM THE BRITISH WELCOME AND WELFARE LEAGUE

Oct. 10th, 1925.

The General Secretary, Canadian Red Cross Society,
410 Sherbourne Street,
Toronto.

Dear Sir:—

Last Sunday morning, Oct. 4, 1925, I spent four hours in the Immigration Sheds at Quebec, and saw 642 British immigrants disembark from the "Doric" and pass through the sheds on to western points.

I write to congratulate the Red Cross Society for the splendid practical work being done at the Red Cross Nursery in the sheds. Not only the 135 women and children of whom I was in charge, but every other newcomer was kindly invited by your nurses to enjoy a cup of tea, milk for the children, cots for the babies, and a resting place for tired mothers.

The Nursery was the busiest and most practical social agency at the Sheds on that Sunday morning.

Yours cordially,
(Sgd.) Frank Chamberlain,
Secretary.



The giant statue of Christ erected on the boundary line between the republics of Argentina and Chile in South America as a token of peace between the two peoples. See the article on the opposite page.

“PEACE HATH HER VICTORIES”

ON THE summit of a rocky pass in the Andes, looking out over the mountains on the boundary line between Chile and the Argentina, stands a colossal statue of the Christ. The left hand holds aloft a cross, the right hand is raised in blessing; and over the granite pedestal is engraved this inscription:

“These mountains will crumble into dust before Argentinians and Chileans will break the peace which, at the foot of the Redeemer, they have sworn to keep.”

For many decades the people of Chile and the Argentina had been at war and in 1904 a fresh outbreak of hostilities seemed imminent.

Two bishops of the Roman Catholic Church determined to do their best to save their countries from the suffering and desolation of war and they appealed to our King Edward VII., often called “the Peacemaker,” to act as an arbitrator between these two nations. His efforts were successful; the nations were reconciled; all the metal of their now useless cannons was cast into this great statue of Christ, the Prince of Peace.

“OF GREAT NATIONAL SIGNIFICANCE”

Canadian Education Association Commends Junior Red Cross

THE League of Nations and the program of the Junior Red Cross were both commended at the annual meeting of the Canadian Education Association, held at Ottawa, during the week of Nov. 8-14. The Canadian Press despatch summarized the resolutions as follows:

“Support to the League of Nations as a great reality of the greatest significance in maintaining international peace, was given in another resolution, which also expressed satisfaction at the progress made and urged the need of bringing the work before the schools of Canada with a view to developing and maintaining a body of intelligent public opinion behind this great movement.”

The program of the Junior Red Cross was also commended as one of great National significance, and appreciation was expressed that the Junior Red Cross stands ready to co-operate with Canadian schools in promoting a program of health education as supplementary to the organized curriculum.

The full text of the resolution upon Junior Red Cross appears on this page.

Membership in the Red Cross enables everybody to participate in the promotion of national health.

THE JUNIOR RED CROSS

RESOLUTION adopted by the Canadian Education Association in convention at Ottawa, November, 1925

WHEREAS it has come to the attention of this Association that the Junior Red Cross of Canada stands ready to co-operate with the Canadian schools in promoting a program of health education as supplementary to the organized curriculum;

BE IT RESOLVED that this Association commends this program as one of great national significance and recommends the favourable attention of Canadian schools towards co-operation with the Junior Red Cross.

HEALTH OFFICER APPROVES RED CROSS EFFORTS

AMONG other activities allied to Public Health work, I was able to assist and co-operate with the Canadian Red Cross Society in arranging for a series of Home Nursing Classes in Sault Ste. Marie and, in the preliminary arrangements, for two Nursing Outposts established in Algoma District at Thessalon and Richard's Landing.

“These Outposts meet a very definite need in supplying a combined service for hospital care and community health.”

Extract from the report of the Provincial Board of Health of Ontario for 1924 in the section by Dr. H. W. Johnston, Officer of Health, District 8, Ontario.

The International Development of the Junior Red Cross and Its Activities

By the League of Red Cross Societies

WHILE the purposes of the Junior Red Cross are the same in all countries, the methods adopted for their achievement are necessarily different among different peoples. It is these very differences which lend colour and a marked quality of the picturesque to the story of the Junior Red Cross. It may, therefore, be desirable to indicate the nature of the efforts made or activities carried on by the Juniors throughout the world.

Health: The activities to promote health may be summarized as follows:

First aid, Health plays, Health games, Health stations, The development of personal hygiene, Lectures and courses on health, Debates on health topics, Health clubs.

This brief classification is not by any means descriptive of the efforts actually made in different countries. Each of these activities may assume an aspect in one country totally different from its appearance in another. Personal hygiene activities, for example, have developed very differently in the countries of Hungary and Bulgaria. In the former country children study personal hygiene and agree to check their "health habits" on a "Health Game Chart." They work together to provide medical treatment for any member of their group who needs but can not afford it. In Bulgaria they do not keep individual health habit charts, but a pupil is appointed Health Inspector of the class. It is his duty to see that hands, fingernails, faces, necks and ears are clean. Sometimes he orders shoes and stockings off and includes feet in his inspection. On the wall of the classroom hangs a poster with the health rules printed on it. This is very similar to the posters which hang in Canadian class-rooms, but there is this difference: In Canada Rule 4 reads: "Take a bath at least once a week." In Bulgaria it advises you to try, if possible, to take a bath each month. In that three weeks' difference lies a summary of the whole difference of the history of the two countries. Bulgaria was ruled by

Turkey until fifty years ago. Therefore "bath" to the Bulgarian means an event as important, social and time-consuming, as a Turkish bath. If Stirka is absent from school for a day, an adequate explanation often is that "she is taking her bath." Thus, if this event is less frequent in Bulgaria than in some other parts of the world, it is at least more thorough.

Junior activities are capable of assuming amusing forms. An eye witness of a "clean-up" day in Austria reported that at one of the school baths a boy acting as Junior Red Cross bath master, insisted on an unusually vigorous amount of scrubbing on the part of all participants. No one was permitted to consider this performance in the light of a mere ritual, and those who tried to escape half clean were sent back to complete their task. The boys of a certain school in Poland, as reported by the Polish Junior Journal, have bought a basin for "the public washing of any dirty boy."

Health activities, though admirable in themselves as means of attaining their immediate ends, take on a new value when it is realized that they are undertaken not for themselves alone, but as means of fulfilling a great and universal ideal—the ideal of the Red Cross, of service to humanity. It is this ideal which inspires them and which enables the habits they instill to carry over into life, effecting permanent changes in the characters and environments of their participants.

Service: Undertakings which may be described as service activities vary much more in form than the health activities. Different communities have different needs and different needs have different degrees of urgency. The most urgent needs call for the most immediate service. But aside from the requirements of emergencies, there is always room for service. The crippled children, the weak and the poor need help; schools, public grounds and parks need care; useful social institutions such as hospitals, health or recreation centres need support; and mothers

and infants need protection. Wherever there is demand for service the Juniors are ready to supply it to the best of their ability. It should not be thought, however, that the service activities of the Junior Red Cross merely constitute welfare work in the narrower sense. It has been well said that there is no such thing as sacrifice, since the one who makes a seeming sacrifice derives satisfaction either from the fact that benefit is conferred where it is due, or from the feeling that good is done whether or not it is deserved. The Juniors are not engaged in a one-side form of charity work; they are undertaking a great educational experiment in "the humanities." Not only do they give, they also receive; and in giving and receiving they need suffer no debasing sense of obligation to one another. "From each, according to his ability and to each according to his need" is their ideal.

Such activities can not fail to produce educational results of the most far-reaching kind. Boys and girls are supposed to learn the rights and duties of citizenship in their schools. But if what they learn is merely verbal, expounded by a teacher from a school platform, the responsibilities of citizenship become couched in academic formulas rather than in concrete social relationships. It has become almost a truism to say that the service of the Junior Red Cross brings the ideal of good citizenship into the actualities of every day life. Social rights and duties are no longer merely printed in books, they are imprinted in the character and personal experience of each and every Junior. The experiment of 34 national Red Cross Societies allows no room for doubt on this point.

International Understanding:

Activities for the development of international friendship may be grouped under three headings: (1) International school correspondence; (2) Mutual aid; (3) Junior conferences and visits.

International school correspondence is now an accomplished fact. Its value is demonstrated and recog-

High Quality—Always

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H718

The choice teas used exclusively in Salada yield richly of their delicious goodness. Say Salada.

At present 21 national Societies are publishing 24 Junior Magazines in 19 different languages. It is customary for each magazine to devote a part of its space to news of the activities of foreign Juniors. These magazines are exchanged between the different societies so that the experience of each can be pooled for the benefit of all.

The primary concern of these magazines is necessarily Junior Red Cross, but their influence extends into other spheres. The poems, stories, plays, the choice of material and the treatment of it reveal the thought, the character and the cultural background of different peoples. Underneath the articulate expression is that inarticulate something which for lack of a better term may be called the Zeitgeist of the present age. In these magazines the spirit of humanity is partially revealed.

By means of these modest messengers of a new age, the children of different countries are coming to know one another. For each of these journals by culling the best of the output of the others helps to widen the appreciation of its readers for the cultures of other nations. This enrichment of the mental life, arising out of the Junior Red Cross movement, was certainly not directly envisaged in the Red Cross peace programme when it undertook to "improve health, mitigate suffering and prevent disease." It is nevertheless a genuine service in that it serves not only as a means of improving international understanding (and thus eventually of mitigating suffering) but also of enabling all children to enjoy their rightful cultural heritage of "the best that has been thought and said in the world" regardless of the frontier lines that happened to circumscribe the place of the author's birth.

Anyone who has met face to face great bodies of children of the different nations of the world realizes instinctively that they are entitled to (and indeed that the future welfare of mankind demands that they receive) the best that the world has to offer in ideas, in education, in training for citizenship—national and international. It is as a means of bringing them this that the Junior Red Cross merits the attention, the loyalty, the assistance of every well-intentioned person in every land.

nized. It needs no excuse for being. At present hundreds of letters and portfolios are being exchanged between the children of 46 countries, in 259 different relationships. The result in each of those 46 countries must necessarily be not only an increased knowledge of the children of other nations, but also an increased sympathy for them. The reported earthquakes in Massachusetts on January 8th, 1925, brought forth letters of sympathy from the school boys of Latvia, and the great fire in New Jersey last year caused a good deal of worry among the Hungarian Juniors, for in each case the European children felt a real concern for the welfare of their friends in those States. The recent tornadoes in the Middle West have brought forth similar expressions of concern from European Juniors.

International sympathy is not only expressed in letters, it is also voiced in more substantial forms. Thousands of children in many different lands contributed their mite toward the amelioration of the terrible plight of Japanese children as a result of the earthquake of 1923. Whenever such an unusual occasion arises the Juniors throughout the world are ready with their gifts. Presents are also exchanged on such occasions as Christmas. The boxes of Christmas gifts sent by the children of the United States to their European comrades have been of incalculable value in proving in a tangible way the existence of international child sympathy. Needless to say, the European Juniors in every instance have made such heartfelt response as was compatible with their means.

International visits and Junior conferences, to which child delegates

from neighboring countries are invited, are another means for developing international friendship. The Czecho-Slovakian Red Cross invited to its Junior Congress held in the spring of 1924, two child and two teacher delegates from each of the Red Cross Societies of its neighbouring countries. This form of activity, though necessarily regional and limited by considerations of time, space and money, is rich in opportunities for personal contacts between the children of different nations.

We cannot hope here adequately to describe the thousand and one activities of the Junior Red Cross. The foregoing account merely represents a sketchy abstraction of them in what is, we trust, an easily comprehensible form. A detailed and adequate impression can be obtained only from personal inspection or from original documents. Such documents are on file at the Secretariat of the League of Red Cross Societies in Paris, and are open to the committee members, executive officers, field workers, educators and social workers of any member Society who wish to make a study of the Junior Red Cross in any of its phases. In addition, field visits made by members of the staff of the League Secretariat to the various national Societies which have organized Junior sections, have proved helpful as means both of gathering and disseminating information and assisting in problems of organization.

Students interested in the movement and unable to visit the centres of information may, however, secure reports of the current undertakings from the League's Information Bulletin as well as from the Junior Magazines.

Red Cross Relief Work in Nova Scotia

How the Government Grant was Dispensed in the Mining Areas

WHEN an appeal was made to the public for assistance for the families of miners in Cape Breton, the Nova Scotia Division of the Canadian Red Cross Society sent a number of its staff to study the entire situation. It was at once realized that the Charter of the Red Cross, the distress being due to general industrial conditions, would only permit of assistance in the prevention of disease and the improvement of health. As soon as need for help along these lines appeared, Health Nurses were put to work, four being at work for two weeks prior to the announcement on April 9th of a government grant of \$20,000.00. Within a few days, eighteen nurses were visiting all homes where there was sickness or the doctor considered relief was necessary. This was in all the mining districts in Cape Breton, Pictou County and Springhill.

It must be noted that each application for relief required personal investigation to ensure a just distribution, for this money could not be used in any way for general relief, which was entirely in the hands of official relief committees of the miners. Nothing was supplied unless ordered by these nurses. While this insured a distribution entirely in accord with the conditions upon which the grant was made, it entailed a very large amount of detail work by nurses and staff, as each individual item, even a pint of milk, called for an order and a receipted bill before it could be passed to the Provincial Auditor as a voucher.

Early in June, as there was very little sickness, and, incidentally the first grant was about exhausted, the work was curtailed, and relief given solely to cases of illness and definite under-nourishment. When the question of a further grant came up, the government suggested the Red Cross should use its best judgment, and six nurses only were employed to the end of July and four to the end of October.

In September it was decided to stop all relief, but to continue a health nursing service, using the four principal hospitals in the coal mining areas in Cape Breton as centres, a district nurse in Pictou County to co-operate with the County Health Nurse, and a part-time nurse as required in Springhill. There was available for this purpose about \$2,000 of the governments' second grant of \$12,000, and the immediate problem is to finance a permanent service.

The matter of expending the entire grant of \$32,000 can be best considered under two general heads:

First, the amount and cost of relief given.

Second, the social health nursing service.

(1) When it is remembered that this relief had primarily to do with health and was chiefly for women and children, it might be expected a large amount would be expended for milk. This is shown by the statement, showing over \$15,000 for milk and eggs alone, and this does not include \$1,000 given from Red Cross funds. Under the classification of "groceries, medical and other supplies" is included some hospitalization, clothing, shoes, bedding, etc. Nursing Service means salaries and expenses of all nurses.

This is summarized from March 27th to October 22nd by districts as follows:

Cape Breton	
Milk and Eggs	\$11,829.73
Groceries, Medical and Other Supplies	3,902.82
Nursing Service	5,274.57
Hospital Grants	1,625.00
Administration	1,097.25
Total	\$23,749.37

Pictou County	
Milk and Eggs	\$3,227.67
Groceries, Medical and Other Supplies	553.01
Nursing Service	967.42
Administration	56.05
Total	\$4,804.15

Springhill	
Milk and Eggs	\$706.55
Groceries, Medical and Other Supplies	419.30
Nursing Service	520.40
Administration	11.66
Total	\$1,657.91

For the three districts this totals as follows:

Milk and Eggs	\$15,763.95
Groceries, Medical and Other Supplies	4,875.13
Hospital Grants	1,625.00
Nursing Service	6,782.39
Administration	1,164.96
Total vouchered	\$30,211.43
Balance now being expended	1,788.57
	\$32,000.00

It should be marked that the supplies furnished were all purchased locally from the places where the families had been accustomed to deal. In some instances this was sufficient to enable small dealers to stay in business until the strike ended. The nurses engaged belonged to the district in which they worked in all three mining areas. They were thus better known to the people and were familiar with local conditions.

(2) This Relief Service became at once also a Health Service. Every visit with reference to fitness for relief gave opportunity for advice relative to nursing the sick, preparing foods, sanitation, etc. Visits were classed as nursing, educational, pre-natal, child welfare, tuberculosis, and confinements. Record has been kept of every visit made, name, address, age, diagnosis,

physician, orders, with statement as to personal and home conditions, and supplies given. The great amount of routine detail work is again illustrated when it is noted that to date a total of 12,466 visits have been made, of which 2,698 were bedside nursing visits, and 12,092 persons have received relief. In Cape Breton from three to thirteen nurses were employed, that is an average of six nurses, and the returns show that the work required 1,182 nursing days. This means the nurses made on the average 10.5 visits each day, a very creditable showing.

These visits accomplished several results. Perhaps the best of these is that trained nurses, fully instructed as to their duty in the matter of advising the people on health matters, gained a free and welcome admission to the homes of the people. They took advantage of their welcome to talk health and they will be welcomed always in these homes for the same purpose. Social

Service and Health Nurses are not always made welcome in the beginning, but these nurses have secured the confidence of all the people. Now, even though no relief is expected, the universal opinion is in favor of continuing the health nursing service.

The mothers in particular began to realize the importance of milk for children, the value of vegetables and a correct diet. These visits were often instructive as to nursing a sick person, making the bed, bathing, etc. Cleanliness in the home became a desirable objective. This personal contact of the families with nurses inspired with the idea of being of service to the community, has opened the way to the establishment of a health nursing service that should be established in every industrial community. Not only better health conditions will be assured, but better home conditions will result with more family and community contentment.

Where the Need is Great

(Continued from page 6)

also advised that the school be closed. The inspector agreed to that course. On the day before only eight of the forty-six pupils enrolled were present, with a substitute teacher in charge, the regular teacher having contracted "the disease."

Eighteen homes were visited during the day and everyone was eager to have a nurse for the winter months.

Tuesday and Wednesday it was blowing too hard to cross to the mainland, but on Thursday morning when the tide was high enough we started. Besides the passengers we had aboard thirty-nine hundred-weight of wheat, and five live sheep. The wheat was being sent to Pictou to be ground into flour. One man who had been on the island for thirty-nine years told me that he had only bought one half barrel of flour in his life.

My three days' experience clearly demonstrated the need of a graduate nurse. I had hardly stepped ashore

before I was called upon for help; then for two days I was weather-bound and it is this uncertainty of the weather which makes the isolation of the people the more serious. The first move seemed to demand a medical survey in order to get the scarlet fever under control. On Thursday night the Provincial Health officer and a Red Cross Nurse were ready to cross over to the Island, but owing to weather conditions the trip could not be made until Sunday. The nurse will remain for a few weeks or while there is still scarlet fever.

On October 27th a Home Nursing Class was organized. Five lectures and demonstrations have already been given and to quote from one of the county papers, "everyone seemed to regret when the lecture-hour was up, as they felt they were learning something worth while."

In the meantime the petition for a nurse for the winter was being signed, and on Monday, October 26th, it was presented to the Govern-

ment. The Red Cross was immediately called in, with the result that on December 1st a nurse will report for duty on Pictou Island. The nurse is Miss M. B. McCallum, daughter of the postmaster of Pictou Island. She is the only young woman of the island who has been trained as a nurse and she will bring to her new duties a useful knowledge of the local difficulties.

The Red Cross intends to establish a medical clinic at which it is hoped that every man, woman, and child who has been a scarlet fever victim can be thoroughly examined, in order that any serious effects can be checked up in time. Careful follow-up work will then be planned by the Red Cross Nurse.

As a result of this co-operation between the Red Cross and the Provincial Government two objectives have been realized, a Home Nursing Class has been organized and these distressed islanders will have a nurse to minister to their needs during the coming winter.

HOME NURSING CLASSES IN NOVA SCOTIA TECHNICAL CLASSES

The registration for night classes in the Technical College, Halifax, Nova Scotia, took place October 26th, 1925. The popularity of the Red Cross Home Nursing Classes, which were first inaugurated in the College last year, was evidenced by a large registration, and the following press report:—

Arrangements have been made to hold the Home Nursing Classes in the

Dalhousie Public Health Clinic, as was done last year through the generosity of Dalhousie University. Last winter there were nearly one hundred women taking this subject and in one class no fewer than five of the students have gone on and are now taking regular training for the nursing profession. The facilities for instruction at the Public Health Clinic are unequalled and the instructresses are all registered nurses with thorough training and long experience. The course has been developed by the Canadian Red Cross Society and

consists of twelve lessons and demonstrations. The class is held once a week and the first groups which start now will be finished about the first of February. This is a subject which should have a strong and direct appeal to every woman, because there is not a home where accidents and illness do not enter at some time or other. The course moreover, includes valuable instruction in the prevention of disease, the knowledge of which should be a part of everyone's training, for it is of inestimable value throughout life.

Lunch in Rural Schools

YOUNG citizens can best receive the full benefits of free education when their small bodies are well nourished. The wise teacher not only practises health habits herself and teaches health habits to her pupils, but also finds out by weighing and measuring—the exact state of nutrition of the boys and girls in her charge, and she uses all the influence at her disposal to see that a hot school lunch is made available for every child. If she thinks that in her case conditions are too difficult to control and she can do nothing, she will be glad to hear that many teachers have achieved the seemingly impossible.

As a matter of fact the school lunch, or at least one hot dish to add to a cold lunch brought by the children, is becoming more and more a matter of course in our schools.

When a teacher notices that Jacob and Alice are restless and inattentive, she is more apt to inquire whether these two had tea or coffee for breakfast, or perhaps no breakfast at all, than to scold them.

Whatever may be the conditions at home, children can learn at the school lunch to like unaccustomed foods and to take this lesson away with them. Careful educational features accompanying the school lunch make the experience doubly valuable to the child. He learns readily what combinations of food are good for children, and why. Sometimes the teacher has the satisfaction of an early visit from his mother.

"What's that brown stuff Jacob gets at the school lunch? Kind o' sweet, he says."

"That's cocoa."

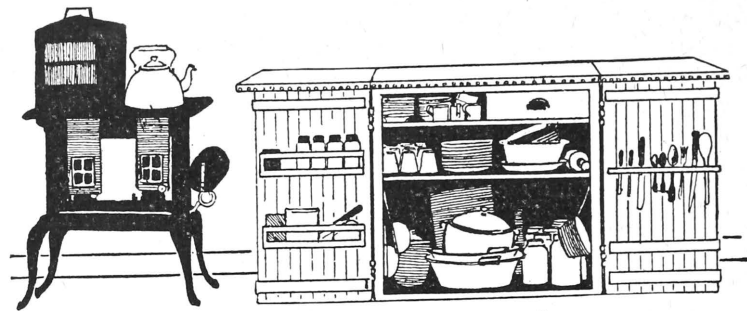
"Well, he says he wants that at home. I guess if you show me, I can make it."

A lesson ensues which assures Jacob his cocoa at home from that time forth.

Sometimes the mother has a different way of acquiring knowledge of valuable foods taught to her child as a health lesson.

"Say, isn't there anything but spinach that will put iron in my boy's blood?"

"Of course there is," and the teacher explains in a word or two the value of leafy vegetables.



Simple equipment meets every need.

The school lunch helps the teacher herself, as well-fed pupils are good-natured and attentive.

The rural school teacher sometimes finds difficulties in seeing that school lunches are provided. That these difficulties are not insurmountable is shown by the results of an investigation in country schools where hot lunches are supplied.

The hot lunch at school is not meant to take the place of the lunch at home, but to supplement that lunch. It is to give every child who must carry a cold lunch at least one hot dish each noon.

The following is listed as necessary equipment:

Stove (heating stove or kerosene stove).

Goods box (to be used as table and cupboard).

Kettle with cover (large enough to hold one cup of cocoa or soup for each pupil).

Dishpan.

One saucepan.

One large spoon.

Ladle or cup for serving soup.

One knife.

One fork.

One teaspoon.

Measuring cup.

Each child provides his own cup, spoon and plate.

With the equipment in hand the problem of food supplies comes up. These answers to questions showed how teachers were obtaining food.

"Each child brought something."

"Took turns in bringing the whole dish."

"Each brought his own."

"Teacher supplied it."

"Parents supplied food."

"Children brought money."

"Kept some supplies on hand—perishable food brought each day."

"Interested woman in the district sent it."

The hot dishes served at the schools were cocoa, cream soups, and cream vegetables.

The preparation and the serving of the dishes were variously accomplished.

"By groups of students." (Easily done and most desirable.)

"Entire dish prepared and sent by one family in turn with others."

"By teacher alone."

It is now a generally accepted fact that a child's mental condition depends largely upon his physical condition, so that progress in school requires a consideration of health factors which in the past have not received their due share of attention. It is as much the duty of school authorities to make thoughtful provision for the physical well-being of the child as to provide a proper schoolhouse and intelligent teacher. The long and sometimes extremely cold winters, and the great distances some pupils live from the school, make the noonday lunch one of the most vital problems to be considered by all. This problem can be solved only by the co-operation of the home and school authorities. The children are and have been practically always eager and ready to take up and successfully carry along the hot school lunch, but their enthusiasm alone can not make success.

Mysteries of the Telephone

Little Dolly, who was staying with her aunt heard her mother's voice through the telephone. She listened, and looking carefully at the mouth of the telephone said: "Oh, auntie, how will mother get out of that little hole?"

Experiences in a Red Cross Outpost Hospital

By a Volunteer Worker

"YOU'LL take a little while to get used to it," said the nurse of a Red Cross Outpost Hospital to her newly arrived assistant. This was putting it mildly, but when at last the strangeness and unfamiliarity of it all had worn off, life became one absorbing effort to meet the many and varied needs pressing so urgently on all sides.

Monsieur L. walked in by himself, in much trepidation and great fear of what might await him. The orders, by telephone, had been: "Give as hot a bath as he can stand—inhalations 9.3 h. and force fluids—no solids."

The hot bath meant lighting the big kitchen range, which was done with the kind assistance of a next-door neighbor and a friend of one of the patients who happened to be visiting that afternoon. A "profuse diaphoresis" would be understating his condition three-quarters of an hour later. He thought he was dying and next morning when the stomach tube was produced and passed Monsieur L. decided that it was positively his last appearance in a hospital.

"Sticking a hose down my throat," he complained bitterly, "and holding it there, starving me and boiling me in hot baths."

It took some patient explanation to bring home to him the dire consequences of drinking poison and the absolute necessity of drastic treatment, but finally he allowed himself to be persuaded and departed three days later promising to take better care of himself in future. . . .

Br-Br-Br- went the telephone, Dr. —'s pleasant voice saying "I'm sending in Mrs. Z., aged 22—six children at home—provisional diagnosis myocarditis—condition poor—let me know when she arrives."

Well, what could be done to make the tiny single room look brighter and more attractive? Old Dutch and plenty of elbow grease for the white paint—floors mopped and oiled and mats shaken and put back, with a well-made bed and a tiny posy of lovely pansies borrowed from a convalescent patient in the next ward to put on a spotless bedside table completing the preparations.

The effect was not so bad after all. Scarcely was everything ready when a car drove up to the door with an apparently unconscious woman supported in the back seat.

"O, yes," she murmured faintly, "Doctor told me, me heart was bad but I never paid no heed to it till last week after I'd cleaned the house and helped get in the hay and then I felt awful queer."

With a lump in her throat, the assistant nurse went about her work grimly determined that the mother of those six children should be spared to them if a Red Cross Outpost could do it. Fortunately there was a bed designed specially for this kind of a case and a kind ex-patient lent his electric fan. It was an airless, humid evening and as the hours wore on the pulse became feeble, feebler still, finally almost imperceptible. Was she going to leave us, so young, so brave and so much needed? . . . Doctor—ran up the stairs two steps at a time and was slightly more reassuring than the nurse had dared to hope.

"If we can tide her over these few bad hours, she will probably rally," he said. At 6 a.m. cold and heavy-eyed after spending the night on the operating table mattress over a box and two chairs, the nurse stumbled down the stairs happy in the knowledge that Mrs. Z's pulse was regular and fairly strong and that she appeared to be sleeping comfortably. . . . "Four tonsillectomies this morning and I'm afraid those two obstetrical cases will come off before to-morrow," remarked the nurse in charge, at breakfast. They did; receiving medical care and kindness instead of having to go through their ordeal alone and helpless on a farm ten or more miles from the nearest neighbour. . . .

Medical, surgical, obstetrical—such are the needs which the Red Cross Outposts are quietly and unostentatiously supplying, without flourish of trumpets or advertisement, a fitting sequel to the war work of ten years ago.

The opportunities are legion, giving a helping hand or speaking a word of encouragement; trying to comfort a broken hearted mother whose new born babe lies dead in

the next room for lack of pre-natal care; explaining to a bewildered and sceptical cardiac lad that he simply must not load and unload the hay-wagon; assuring old Mr. B., aged 69, that he is not necessarily going to die because he must go to the big city and have a serious operation; supporting a parturient woman through her hour of need and rejoicing with her over the birth of a splendid boy, and last but not least the satisfaction of being able to second the noble efforts of the doctors whose patient and unceasing service, so often alas! entirely unremunerated, can only be appreciated by those who have had the privilege of knowing them—these and many others are the compensations which come in a day's work.

Of the tragedies one does not speak—the life lost because no one thought it serious enough to send for a doctor—the deformities which early treatment at an orthopaedic hospital could cure or lessen, the weary mothers coming to hospital broken down from sheer overwork—the children handicapped for life because there was no one to explain to mother about child hygiene—these things will only cease when each one of us is a living demonstration of the motto of the Junior Red Cross—"I Serve."

THE SONGS OF FINLAND

Finland is celebrated for its old popular songs and for its modern school of music, of which Sibelius is the most famous exponent. National music was a welcome feature of every meeting, and an especial favorite of the International Congress of Nurses last summer was the choir of "white nurses", the pupils of Baroness Mannerheim's school. It was more than the traditions of their country that they sang; they sang their confidence in the good that lies in every human heart, their joy to alleviate suffering and restore health, their devotion to and love of their leaders. They were stirred to the depths of their souls, and stirred in others deep and happy feelings.

—Dr. René Sand.

Red Cross Hospital Opened at Englehart

Provincial Secretary Officiates—Banquet Held in Evening

ENGLEHART, ONT., Nov. 9—A very successful banquet was staged in Englehart this evening following the official opening of the Canadian Red Cross Hospital in this town. The hospital was formally opened by the Hon. Lincoln Goldie, Provincial Secretary, who, with George Lee, chairman of the Temiskaming and Northern Ontario Railway Commission; Col. McLaren, and Col. Martin, members of the Commission, Miss Wilkinson and Dr. Routley of the Canadian Red Cross; Mr. Alderson and Mr. Mathews, of the Northern Ontario Fire Relief Committee, was among the guests present.

The toast to the visitors was offered by Mayor Weeks and responded to by Hon. Lincoln Goldie and Mr. Mathews. The Provincial Secretary intimated that he was deeply impressed with the possibilities of the country he had seen and

would take the first opportunity to continue his investigations. "The North Country," a toast offered by John Clark, for many years a resident of the district, was responded to by Col. Armstrong, Federal member for the riding, and Mr. A. J. Kennedy, Provincial member. The toast, "Our Hospital," met with a splendid response from Miss Wilkinson and Dr. Routley.

One of the most pleasing incidents of the evening occurred when Mr. Alderson, chairman of the Northern Ontario Fire Relief Committee, tendered a cheque for \$4,000 to the local hospital fund as a loan to take care of the immediate obligations against the building. The receipt of this assistance was warmly welcomed.

George Lee stated that a further donation of five hundred dollars would be forthcoming from the Commission. With this donation and the assistance which preceded

it, the new institution will be able to commence its career free from pressing debt.

The hospital building consists of a modern fire-proof structure with a capacity of ten beds and fills a great need of the district.

From the Mail and Empire



Fig. VII. A displeasing type of face invariably associated with enlarged or diseased tonsils.

Teeth, Health and Good Looks

(Continued from page 5)

face an unpleasant or unsightly appearance. Further, habitual sucking either of the tongue, pacifier, or thumb may produce a narrowness of the lower part of the face (Fig. V). Indeed, even such simple actions as resting the chin upon the hand, biting the nails, sleeping with the head upon the hand or arm, repeatedly performed, markedly influence the facial contour, and should be broken early before they have had any far-reaching effect (Figs. VI and VII).

The child of to-day is the adult of to-morrow. As the moulding years of youth are those in which many life habits are established, it is, at the same time, a period in which no natural feeling of concern regarding looks or health is manifested. It, therefore, behooves those responsible for the care of the young to guard carefully the habits which are being formed, so that the ounce of prevention may be applied to those which are detrimental before they have exerted any baneful effect upon the individual's appearance or health. Good habits should be started to-day; to-morrow may be too late.

THE CANADIAN RED CROSS EXECUTIVE OFFICERS OF PROVINCIAL DIVISIONS

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BRITISH COLUMBIA:
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626 Pender St. West,
Vancouver, B.C.

TO MEMBERS

Every membership in the Canadian Red Cross helps on its good work. Tell your friends about it and have them send their subscriptions to the Red Cross Office of their Division. Address above.

To
(Name of Provincial Division of Canadian Red Cross)

Herewith enclosed is a contribution of \$..... to the Canadian Red Cross Society, which sum includes annual membership and twenty-five cents per annum (\$0.25) as subscription to the magazine, "The Canadian Red Cross."

Date Name

Address

.....

