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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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KEEP YOUR MEMBERSHIP RENEWED

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National Headquarters Toronto 5, Canada

Canadian Red Cross Home Nursing Classes

WITH the impetus of the goodwill and enthusiastic commendation of large numbers of women throughout Canada who have taken the Red Cross Home Nursing Course, the organization of classes during the coming autumn promises to be most active. The Red Cross organizers are already dealing with large numbers of applications, and this important branch of Red Cross Service promises to carry on in increasing measure its good work for the better understanding of dealing with cases of sickness in the home, and of maintaining health in the home. The following reports from the various provinces will be of interest to our readers, particularly those who are interested in the progress of the work and the formation of classes:

Home Nursing Classes in Nova Scotia

By Miss E. O. R. Browne, Reg. N.

Canso is one of the most isolated of our towns in Nova Scotia. After leaving the train at the Strait of Canso, it requires three and one half hours' boat trip, often through fog. The last trip was made in a little fishing smack, as the regular boat did not wait for the train. This then is the way to Canso. Two miles and more out, but included in the town is a district which is one of the greatest cares of the Victorian Order Nurse. Seven miles out there is a small fishing village where the people are far from rich and where disease is often prevalent. We had twenty-two of the women and girls signed for a class, but could not find an instructor and the cost of car.

WHYCOCOMAGH

Whycocomagh is a small village situated on the Bras D'Or Lakes. One and one half miles out is a large Indian Reservation. They have their own chapel and school, and there is little or no intermingling with the other people.

Dr. MacLeod was interviewed and seemed interested in the course, promising any help needed. He suggested I see Mrs. MacKinnon, a nurse, and member of the Community Club. Mrs. MacKinnon was very much interested and gave me the name of the president, and the secretary who is a nurse. Mrs. MacKinnon would assist with a class.

Mrs. Mitchell, the president, was very much interested and promised to bring up the matter at their meeting.

Mrs. Dobson, the bank manager's wife, is a recent graduate and is willing to do anything she can. If they decide on a class she will be willing to take charge.

MABOU

At Mabou, Mrs. Fred Horner, President of the Women's Institute, was interviewed. After the course was explained, an invitation was given to meet the Institute at their regular meeting. About fourteen women were present at the meeting, and after the course was fully explained, it was decided to make every effort to start a class. There is no nurse in the district who would be available; but it was thought that Miss C. T. MacDonald, the Federal Indian nurse, might help them out. She lives five miles away at Brook Village. Mrs. Jas. MacMillan, the secretary, was appointed to get in touch with her whenever she arrived home. Before this, the organizer had written her, and plans had been made for an interview in Halifax.

PORT HOOD ISLAND

Port Hood Island is a small island about a mile from Port Hood town. There is no regular ferry service, but we were fortunate enough to get across on a load of lumber and then took a gasoline launch to the extreme end of the Island. After landing, we had a walk of over a mile through the woods.

Mrs. Jack Watts, President of the Protestant Hospital Aid and a graduate nurse, was helping to fix some graves in the cemetery. The course was explained and Mrs. Watts and her friends were much interested. The hospital, however, had only been able to enroll six members, but it was felt that a class might bring in more. Mrs. Watts is willing to teach.

The people on this Island are all prosperous fishermen. They are progressive, and say "Do not have time to be sick." However, Mrs. Watts felt that a class would appeal to the women in enabling them to study health measures as well as to be ready in case of sickness.

Nova Scotia Health Department Approves Red Cross Home Nursing Classes

THAT the Department of Public Health of Nova Scotia appreciates the value of Red Cross Home Nursing Classes is shown by the following statement issued by the Department:

"The Provincial press has on many occasions referred to the special exercises which have been arranged in connection with the closing of a number of Home Nursing classes. These classes are becoming increasingly popular, and many hundreds of persons have successfully passed the examinations terminating the courses. Their value has been unquestioned. They have helped most materially in raising the standard of nursing knowledge among those of our people who most can profit by the knowledge. Without a doubt the opportunities afforded thus to educate our people in the methods of disease control are of the very highest value. A most satisfactory indication of the awakening of interest in public health matters is the interest displayed in these classes.

"One instinctively thinks of the Red Cross when one hears of the initiation of any new and successful health endeavour."

The Provincial Health Officer, Dr. Jost, has shown a keen personal interest in the work and has given a special lecture on the prevention of tuberculosis to several of the classes.

This photograph shows a large and enthusiastic Home Nursing Class which completed the course at Bridgewater, Nova Scotia. This class of seventy-seven pupils required the services of eight volunteer nurses to make the instruction as individual and practical as possible. Bridgewater had three lectures by their own doctors, while a fourth acted as chairman and gave short addresses on two occasions. They also had an extra lecture on tuberculosis by Dr. A. C. Jost, Provincial Health Officer. One girl drove seven miles to the classes throughout the winter months. This photograph was taken upon completion of the class and fifty of the seventy-seven were present. Sixty students attended at least three-quarters of the lessons.

The report of Miss E. O. R. Browne, Organizer of Home Nursing Classes in Nova Scotia, tells of this large class and adds:

"In Trenton, besides their special lecture, their own doctor gave them three lectures. In Stellarton they had three lectures by three of the doctors. The doctors seem very much interested and we are getting splendid co-operation from our Provincial Health Department.

"Sydney has eleven classes, and the Provincial Health Officer is going to give them a special lecture, and show them pictures on tuberculosis."

Twenty-one new classes were organized in Nova Scotia during the first four months of 1926.

Home Nursing Classes in Saskatchewan

By Miss Jean Mackenzie, Reg. N.

DYSART is a village of 150 persons, numbering many of Canada's newcomers from other lands. The most active Women's Organization is a recently organized Community Club which has a membership of forty.

Some of the members became interested in the Home Nursing Course through hearing of the classes in Lipton, the next point west on the railway. There is no resident doctor or nurse in Dysart, but Mrs. McWean, graduate of Edinburgh Royal Infirmary, who instructed the classes in Lipton, very kindly consented to instruct one also in Dysart.

A meeting was arranged and was very well attended. The members of the club appeared to be most interested in hearing of Red Cross work. Mrs. McWean was present at the meeting and agreed to visit Dysart weekly while the class is in operation.

According to a recent report, the class is making very satisfactory progress, with an average attendance of thirty members.

At the close of the Home Nursing Class in Lipton, the members decided to raise some funds by means of a tea, to provide a comfortable cot for use in the transporting of patients to hospital in Regina, a journey of three and a half hours by train.

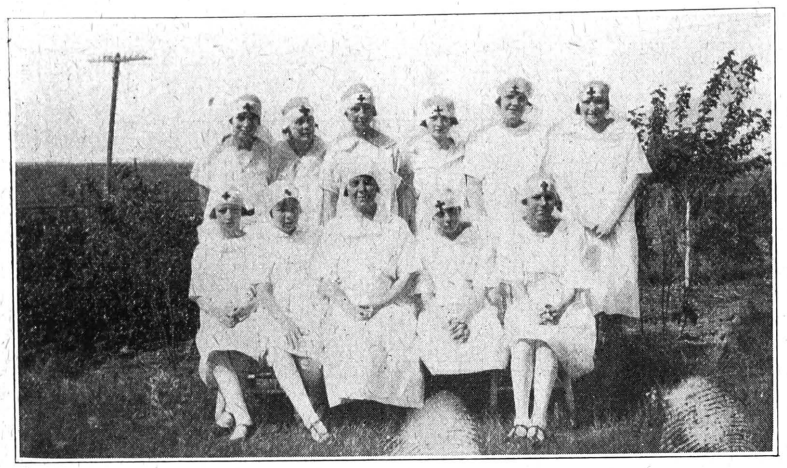
The Dysart Community Club recently presented a play in their own town and repeated the performance in Lipton. After defraying expenses, half of the proceeds were given to the Lipton Class, who now have the sum of $36 on hand, and plan to buy a comfortable cot. Any money left over will be donated to the Red Cross Society.

Through the efforts of Mr. McWean, a meeting was held in Lipton and a Red Cross Branch organized.

Last spring Mrs. B. E. Hull, Reg. N., conducted a very successful class at Grenfell. At Mrs. Hull's request I visited Grenfell and examined a group of seventeen Girl Guides, who took the course this year. Mrs. Hull had gone to a great deal of trouble in preparing equipment for demonstration purposes, and the girls showed evidence of having had very careful instruction.

I examined them individually and it was a pleasure to discover how much knowledge they had acquired through the lessons.

Red Cross Home Nursing Class at Mossbank, Sask.



THIS photograph shows a Red Cross Home Nursing Class completed at Mossbank, Saskatchewan.

Mrs. P. J. Rawlinson, the instructor, was a Nursing Sister in the Imperial Service, and is most capable. She went to a great deal of trouble to make this class a success, and hopes to take the course with an adult group in the Autumn. In writing about the class, Mrs. Rawlinson says:

"Splendid interest was shown in classes, the girls seem to appreciate the lectures and demonstration work so much. Sickness in several cases and some of the girls returning to their home farms as soon as the good weather arrived, prevented regular attendance. I took a review of the work for the past three months yesterday and gave them all written questions, and practical work. One girl made a pneumonia jacket, another a mustard poultice, bandaging, artificial respiration, bedmaking, and so on. All of them showed great efficiency and I was pleased with the result of their efforts. The girls are hoping to get up a tea or candy stall, so that they can send in a donation to increase the fund for Crippled Children."

The sum of $14 has since been received as a donation to the Junior Red Cross work.

Home Nursing Classes in New Brunswick

By Miss Sibella A. Barrington, Reg. N.

IN ORDER to tell the people of New Brunswick about the Red Cross Home Nursing Classes many places have been visited. Middle Southampton was first visited in company with Miss Jessie Lawson, the Junior Red Cross organizer. We met some of the mothers and a nurse who is married and living there. The village covers a somewhat wide area on the banks of the Saint John River, thirty-eight miles above Fredericton. Arrangements were made to hold a meeting at Mrs. Brooks' home. Lady Ashburnham drove us out and a large meeting was addressed. A class was formed with Mrs. Titus as teacher. The Secretary from the Fredericton Branch, Mrs. Foster, was present. Later on, Lady Ashburnham and Mrs. Foster will go out and try to establish a Branch.

Nashwaak is a village on the banks of the Nashwaak River. I visited this village previously on June 18th and arranged for a meeting the following week. This meeting was held at the home of Mrs. McFarlane and in spite of a very stormy night a very large number attended. A class was formed, all present joining, and the feeling was that many more in the village would join. It was decided to ask Miss Anderson, Reg. N., living at North Devon, to teach the class. The different members who have cars are to be responsible for bringing and taking her to her home three miles away.

Upper Russigornish is a village between Fredericton and Russigornish. A class was organized there, through the class held at Russigornish, and is being taught by the nurse from Fredericton Junction. She taught seven classes, and had members from ten villages. In fact, all within reach of the Junction were instructed, and in some of the districts, Wirrall for example, they walked four or more miles and never missed a class.

Lake George is a settlement covering a somewhat wide area four miles from the railway station on the road from Fredericton to Woodstock. The organizer met the president of the Women's Institute during the annual meeting of the Women's Institute in Fredericton. The result of meeting was the request to visit them and form a class. I went by train to the station, then drove to the village. An ice-cream social was in progress and people from nearby village, were in attendance. I addressed a meeting and formed a class with a member from nearly every house in the settlement. Miss Graham, a public health nurse home from Boston for the summer, agreed to teach and a doctor who had a summer camp near Lake George consented to give lectures.

Miss S. A. Barrington, provincial organizer of Red Cross Home Nursing Classes, for the New Brunswick Division, reporting to that Executive said that:

The big work of the classes in New Brunswick had been done in Campobello and Deer Island, where the nurse had given splendid practical service in preventing an epidemic of colds, in taking serious cases for hospital treatment and giving first aid instruction.

She expressed appreciation of the work of the committee convened by Miss Burns, which supplied refreshments for the soldiers' wives class.

At the time of reporting, she said there had been 90 classes organized in New Brunswick with a total enrollment of more than 2,000.

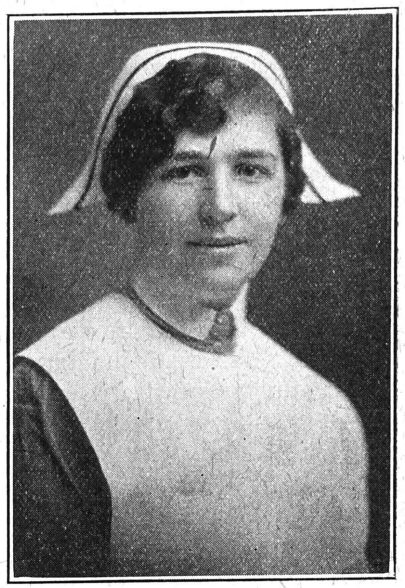
Two home nursing classes were held in Woodstock, one under the auspices of the Women's Institute and one in the vocational school. The teacher, in writing to the provincial organizer, said the members were confident that they had received much benefit from the instruction.

At Florenceville the series of lectures provided in the Red Cross course were completed but the class was held together in order that some

supplementary lectures might be heard also.

The class at Stonehaven completed its course satisfactorily.

In Saint John at the Health Centre the Red Cross home nursing class, composed of members of the Children of Mary, also completed its course. The members of the class presented to Miss Barrington a very nicely worded address, expressing appreciation to the Red Cross Society of the benefits of the home nursing classes. With the address a lovely bouquet of roses and spring flowers was presented. To Mrs. W. J. MacMillin, who had been the most efficient teacher throughout the course, the members presented a very handsome handbag as a token of their gratitude



WILL ORGANIZE HOME NURSING CLASSES IN ALBERTA

Miss Theodore Taylor, Reg. N., who has been appointed Organizer of Red Cross Home Nursing Classes by the Alberta Division of the Canadian Red Cross Society. Miss Taylor is a resident of Saskatchewan and recently completed the course in Public Health Nursing at the University of Toronto. Photo by Park Bros., Toronto.

Red Cross Home Nursing Classes in British Columbia

WHEN Red Cross Home Nursing Classes were undertaken in British Columbia last autumn the first step was the adoption of a plan whereby the Provincial Departments of Health and Education, the Women's Institutes and the Red Cross agreed to co-operate in the organization of the Classes. This plan was a success and resulted in the formation of twenty classes despite the initial difficulties of organization.

The Provincial Health Officer of British Columbia, Dr. H. E. Young, expressed his approval of the work of Miss Christina Davidson, R. R.C., the Red Cross Organizer of Home Nursing Classes:—

Miss Davidson reports that in almost every community where a Public Health Nurse is stationed, instruction in Home Nursing has been given or is being given, also that all nurses are much alive to the necessity for such instruction. A number emphasized the urgent need in the outlying settlements where indifferent transportation makes it difficult to reach medical help. These are the communities to which the Red Cross is taking the Home Nursing Course.

Miss Davidson also states that there is much that is waiting to be done in the way of carrying instruction to small groups of families living in isolated cups among the mountains. While Miss Davidson was in Revelstoke Mr. Manning, Secretary of the School Board, told of three communities on the Arrow Lakes, which at one time had been large settlements and were now down to ten or twelve families, where tragic occurrences had taken place and much unnecessary suffering caused for lack of knowledge.

Mr. John Kyle, Director of Technical Education for the Provincial Government, has promised to advise Home Nursing for all Technical and Night Schools. The Department of Education is working towards the establishment of Health as a subject for students in Normal Schools. Mr. Kyle promised full co-operation.

Red Cross Home Nursing Classes in Ontario

By Miss Ruby E. Hamilton, Reg. N.

As a closing for the five Home Nursing Classes organized through the Home and School clubs of Scarboro Township, the classes met together in the Auditorium of the High School, and Dr. Grant, Director of Dental Services, Department of Public Health, Toronto, gave a lecture with lantern slides on "Oral Hygiene." About seventy ladies attended the lecture. These women were mothers of school children and had never had the opportunity of getting first-hand information about the care of the teeth, nor had they realized the importance of the diet of the prospective mother in relation to the development of the teeth of her child.

A HEALTH CARNIVAL

To stimulate the interest in Health Teaching and Home Nursing in Hamilton, where several classes have already been organized at the Y.W.C.A., a "Health Carnival" was planned. The Red Cross was asked to take charge of one booth. The Graduate Nurses' Association of Hamilton had agreed to provide the voluntary teachers for the classes, and these nurses very kindly arranged for the demonstration at the Carnival. Decorations in the way of flags, etc., were loaned from the Ontario office, and the equipment provided by the Hamilton Branch for Home Nursing was used. Two nurses were on duty in the booth and demonstrated how to make a bed properly for a sick person, the method of using improvised back rests, bed table, etc., and also the method of bathing and dressing a baby. The general secretary of the Y. W. C. A. wrote a letter thanking the Red Cross for the interest and co-operation in connection with this Health Demonstration and said the Red Cross exhibit was splendid and that the Home Nursing booth attracted a great deal of attention.

The International Development of the Junior Red Cross

History and Significance

By the League of Red Cross Societies

THAT which is great in history often had a very humble beginning. English constitutionalism owes a great deal to a certain field called Runnymede and the town-meetings of New Engand have blossomed into American Democracy.

The year 1914 is remembered by all as the beginning of a world catastrophe, though by some it is also regarded as the dawn of a new hope. In that year, in the Province of Quebec, children were enrolled by the Canadian Red Cross to make surgical dressings. Insignificant as the event might at first seem, it was fraught with far-reaching consequences. Then and there the Junior Red Cross movement may be said to have started, and as time went on it gathered momentum until to-day it is spread throughout the world, permeating the life and work of over eight millions of boys and girls.

The movement soon took hold of Australia, but it was America which supplied the greatest impetus. In 1917 a plan was launched in the United States to enlist twenty millions of school children in the service of the Red Cross. At the conclusion of the Armistice these children sent 40,000 pieces of furniture to the homes and schools of the devastated regions and in the few years following raised by their own efforts over two million dollars for the relief of European children.

This great visible demonstration of the power of children, united in an organization and animated by an ideal, to accomplish significant undertakings in the field of humanitarian action, immediately stimulated the hopes of educators and statesmen in war-torn Europe. The world they had known was destroyed. They welcomed every means that offered to help them build a new and better one. The idea of the Junior Red Cross fired the imaginations of old and young alike. And in those countries where the American Red Cross had relief workers dispensing either senior or junior funds, the idea was disseminated and an organization was left which had in it the seeds from which it seems two plants may grow, namely, peace and self-help, plants which would prevent the necessity in the future of any similar outpouring of relief to assuage the ills resulting from man-made calamities. The eager Hungarians, the quick-spirited Poles, touched to the heart by this new possibility, organized Junior Red Cross sections in 1920. Czecho-Slovakia seized the movement as a necessary part of the training needed for new citizens of a new republic; Jugo-Slavia began talking Junior Red Cross almost before her senior Red Cross was well on its feet; the new Austria adapted it to her new needs; sparks were kindled in Roumania, Bulgaria, Italy, Argentine and Japan. Thus the new flame went leaping round the world until at the end of June, 1926, there were 8,944,243 Junior members.

The chairman of the Junior Red Cross committee of Graz, Austria, likens this activity to that of a man who gives an apple to a hungry child. The average benefactor is forgotten and no lasting result of his act is to be found. "Not so with the Junior Red Cross," says he. "The Junior Red Cross is like a man who gives the hungry child an apple, watches him smack his lips and hears him say: 'Ah, that's a good fruit.' Then the benefactor says: 'You like that apple? Would you like to have such apples as that all the years of your life? Yes? Well then, I brought you also a seedling of that tree. Let us go into the garden and you shall plant it so it will grow.' 'But, I don't know how,' the child protests. 'It is quite easy,' says his friend. 'Come, I will show you.' Such a benefactor is not forgotten for many generations."

Junior Red Cross Membership throughout the World

EUROPE	21 countries	2,168,323
Austria		140,000
Belgium		27,315
Bulgaria		53,800
Czecho-Slovakia		315,726
Denmark		209
Esthonia		13,587
France		20,000
Germany		
Great Britain		3,770
Greece		150,000
Hungary		112,000
Italy		1,000,000
Latvia		8,000
Lithuania		2,000
Norway		3,800
Poland		114,000
Roumania		50,000
S.C. Slovenes		142,999
Spain		4,000
Sweden		6,409
Switzerland		708
LATIN AMERICA	8 Countries	52,688
Argentine		41,668
Brazil		
Chili		
Colombia		
Costa Rica		
Equador		1,020
Paraguav		9,000
Venezuela		1,000
NORTH AMERICA	2 Countries	5,846,512
Canada		107,864
United States		5,738,648
AFRICA		1,006
South Africa		1,006
AUSTRALIA	4 Countries	875,714
Australia		80,000
Japan		763,411
New Zealand		1,800
Siam		30,503
TOTAL	36 Countries	8,944,243

To-day we may say that thirty-four such apple trees are planted, for thirty-four Red Cross Societies have organized peacetime Junior Red Crosses, five more are in the process of organizing junior sections, and another five are thinking of doing so. There are eight million children of both sexes, of various colors and of all races, united under one single banner. If they were congregated in one place they would outnumber the population of either London or New York. But there would be this significant difference: These nine million individuals would be a unity through being engaged in similar activities tending towards the realization of the same ideal.

The ideal is clearly stated in the 18th resolution of the General Council of the League of Red Cross Societies of March, 1922, in which it is recommended that the statutes or public announcements of each Junior Red Cross should include in their statement of its purposes a declaration to the following effect:

"The Junior Red Cross is organized for the purpose of inculcating in the children of its country the ideal and practice of service, especially in relation to the care of their own health and that of others, the understanding and acceptance of civic responsibility, and the cultivation and maintenance of a spirit of friendly helpfulness towards other children in all countries."

That is to say, the purposes of the Junior Red Cross are:

1.—The promotion of health.

2.—The rendering of service.

3.—The development of international friendship.

These purposes are the same in countries as different from each other as Siam and Sweden, or Esthonia and Ecquador. The activities for the realization of these purposes are, of course, different in different countries. What we are here concerned with is the spirit underlying these activities.

For the spirit of the Red Cross furnishes to the children the motive—and a powerful one—for putting into practice in daily experience the instructions which they have received. It gives meaning and a degree of permanence to individual or collective efforts which unless so illumined might be but mechanical and transitory.

All the more remarkable is the fact that the spirit, at once vitalizing and inspiring and rare in itself, has become part and parcel of the lives of nine millions of boys and girls. The time has not yet come for us to give a full account of what the Junior Red Cross movement will leave to posterity. It is not difficult however to predict that what is sown in the hearts and habits of the young generation of to-day will be reaped in the characters and actions of the responsible citizens of to-morrow. Turgienief quotes in one of his books a peasant's axiom to the effect that virgin soil should be turned up not by a harrow skimming over the surface, but by a plough biting deep into the earth. The ideals of health, of service and of international friendship have been and are to-day being ploughed deep into the virgin soil of children's minds in practically every corner of the globe.

The Junior Red Cross has come to stay and to spread. It is here to stay because it performs a function which until the last few years has been left unperformed. The chaos and disaster which overcame the whole world at the time of the great war is witness of its necessity. It is sure to spread because fruitful ideas are invincible.

"Stone walls do not a prison make,
Nor iron bars a cage,"

nor oceans a barrier, so far as the Junior Red Cross movement is concerned.

Up in the wintry north of snow-covered Alaska, where life remains undisturbed by the rough and tumble of a more merciful climate, little Eskimo boys and girls, knowing that the subscription price of the American Junior News is required of all classes, gathered together "a scrap of fur of a baby seal, a bit of white fox, a tiny bit of precious ivory, two walrus teeth, a tiny bead of rich ivory, sinew of walrus and a small bit of whalebone and leather, as the equivalent of their dues of 50 cents."

This is the poetry of life. Single-mindeded eagerness, whole-hearted devotion to a desire born of the purity of youthful souls, and efforts to satisfy it, are among the rarer beauties of life. They may be but by-products of the Junior Red Cross movement, but they demonstrate the hold it has over children of every race and clime.

Soap as a Dentifrice

Recommended by the American Society for the Control of Cancer

The reasons why the American Society for the Control of Cancer recommends scrubbing the teeth and mouth with soap and water are as follows:

1. Soap is the best aid to the toothbrush in mechanically removing particles of food, masses of bacteria and mucous from the teeth and the recesses of the mouth. Soap macerates dead epithelial cells, which harbor bacteria, and hastens their removal from the mucous surfaces. It macerates food particles and masses of bacteria. The effect of maceration becomes apparent only after somewhat persistent use of soap. The constant use of soap gargles will even excavate and cleanse the crypts of the tonsil, but it is not recommended as a means of control of established disease of any sort. It is a preventive of disease. Soap is very effective in washing tobacco juice from the teeth and throat.

2. Soapsuds has a very considerable bactericidal effect, especially on disease-producing bacteria, and it is probable that this chemical effect is about as severe as the mucous surfaces will stand over a long period. It may be useful for a lifetime without deleterious effects, which is more than can be asserted for most other chemical disinfectants.

3. Soap causes a secretion of mucous from thousands of mucous glands that line the inside of the mouth. The mucous secretion is Nature's method of removing dangerous bacteria from the mouth, and protecting the mucous surfaces from penetration by bacteria.

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.

A Great Experiment

THE Junior Red Cross has been a world-wide experiment in education that has proved successful. We do not know as yet what the end will be. But through numerous reports we know that the Junior Red Cross in Canada is supplying the inspiration and motive necessary to put life into methods which had been used years before the Junior Red Cross was thought of. The Junior Red Cross has brought into its organized groups a human touch which expresses itself in a kindly interest in others. It has provided a great stimulus to effort through association with millions of other children working in a common cause and for common objectives. It is developing in the Red Cross Junior a desire for health, not only for himself but for others, as well as a civic spirit and the best kind of patriotism. It has captured the imagination of the child and enabled the teacher to capitalize this in making the daily task more interesting and more effective for herself and pupil.

We are always coming to obstacles in our path but the obstacles of two, three and four years ago have been passed and now lie forgotten in the distance. We are continually facing new difficulties but these are more and more the difficulties to be expected in a rapidly expanding movement. The growth of the Junior Red Cross in Canada will depend largely on the efforts of the directors and the extent of these will be a matter of the time available for the purpose. If the Junior Red Cross is desirable for 100,000 Canadian children it is equally desirable for 200,000 or 500,000 Canadian children. The problem for us is to discover how we can best meet a situation in which Supervisors of Education are advising their teachers more and more frequently to look into the merits of the Junior Red Cross.

One most important matter which has been frequently discussed is the necessity of demonstrating to teachers-in-training in all the Normal Schools of Canada not only the merits of the Junior Red Cross, but the necessity for conserving their own health and the means whereby this is done. Such teaching has been carried on in the Normal Schools in Saskatchewan for years.

In 1925 with the approval of the Executive of the National Red Cross Society the experiment was made in the Normal School in Truro, Nova Scotia, of having a special instructor devote full time to this work, one-half of her salary to be paid by the National Red Cross Society and one-half by the Department of Education of Nova Scotia.

If young teachers are to realize the importance of health as a factor in education and are to teach the subject of health by precept and practice, these teachers must understand what they are talking about. Every student in a Normal School should receive a medical examination, should have remediable defects corrected and should be induced to practise good health habits. In this way practical knowledge will be obtained by the young teacher of what remediable defects are, of how they may be detected, and of how they may affect health. They will learn what a vital role the practice of health habits play in the life of the child, and as a result of this training will be in a position to intelligently refer to defects and pass on to their pupils practical instruction in matters of health, which teachers without such a foundation cannot possibly do. Such medical inspection and health instruction of Normal students should be tried out in one or two Normal Schools in every province, in order to demonstrate to educational authorities the value of what would seem to be self-evident. But none of these students should be allowed to pass through the Normal Schools without knowing all about Junior Red Cross as well as how to take care of themselves and teach others intelligently.

MEADOW LAKE RED CROSS STATION DOING VALUABLE WORK ON EDGE OF CIVILIZATION

Regina Daily Post

From Meadow Lake, Saskatchewan, the beginning of civilization for the hunters and trappers of the northern part of the province, Mr. Kerr has returned to the city after an inspection trip of the Red Cross outpost at that point. It is the most northerly of all Red Cross outposts in the province. W. F. Marshall, Red Cross Field Secretary for Saskatchewan, accompanied Mr. Kerr on the trip of inspection which was the first one to be made since the opening of the outpost four years ago.

One hundred and thirty families claim Meadow Lake as their post office, and in times of illness go to the Red Cross Hospital there. This little log cabin with its one doctor and one nurse also serves an even larger surrounding territory including about 1,600 people in all. Occasionally when special operations have to be performed, one of the old settlers dons a white coat and comes to the assistance of the medical staff.

Every month the local Red Cross office ships a supply of magazines and other reading material to the Meadow Lake outpost which is taken from the village along with supplies that go out in the packs of the trappers, or the grocery boxes of the settlers.

Miss Cordelia Hudson, the nurse in charge, is from Weyburn, Sask., and according to Mr. Kerr, her overseas experience is especially valuable in accident cases which frequently occur in that out-of-the-way part of the province.

A Sister Society in the South

The Valuable Peace-time Service of the Mexican Red Cross

WHEN one crosses the northern boundary of Mexico on a southward journey one steps into what seems like a different world. The surface of the country changes, the people are different, the language and customs are different. As the journey continues the differences become more marked. The great mountains rise like huge sentinels guarding the lovely valleys, the sky and atmosphere take on brilliant blues, golds and crimsons and as one ascends the higher altitudes the climate becomes sweetly temperate. When one reaches Mexico the great difference in the architecture from that of northern cities is most marked. All the big buildings, new or old, are beautiful and in the old ones particularly, the unmistakable influences of Old Spain are too apparent to need comment.

But in the midst of so much that is different the writer came in contact with one organization that connects itself in interest with the lives of thousands of Canadians and that is the Canadian Red Cross's sister society in the south, the Mexican Red Cross.

The President of the Mexican Red Cross Society is Senor Jose R. Aspé, a prominent lawyer of Mexico City. He took a leading part in the Pan-American Red Cross Conference at Washington last May and June. With charming courtesy he took time from a busy day and personally showed the writer some of the work the Society is doing.

The principal services the Red Cross Society is rendering in the United States of Mexico are Organization for Disaster Relief, an Ambulance Service in the cities of Mexico, Vera Cruz, Tampico, San Luis Potosi and El Oro, and a free hospital in Mexico City.

The contours of the country make parts of Mexico particularly susceptible to floods and it is not long since the Society's Organization for Disaster Relief was called into action owing to in floods in the State of Nayarit. Again, early in July, it took the field for humanity's service in relief work after the great distress caused by floods in the City of Leon in the State of Guanajuato. There, without warning, through the bursting of a dam, practically the whole of the large town was laid in ruins and in addition to many deaths thousands were rendered homeless. The Society was immediately in the field with its humane work of relief and for its good work in this regard it has received the high commendation of the Federal Government.

The Mexican Red Cross hospital in Mexico City has a capacity of eighty beds and they are nearly always filled. So great, indeed, is the need that the Society has already made plans for enlarging this work and will do so as soon as sufficient funds are available. The institution shows every evidence of capable operation and kindly, sympathetic and efficient administration. A spirit of cheerfulness and confidence seems to pervade patients and workers alike and the high ideal of service towards which the hospital is conducted is manifest in the notice at the entrance:

"ALL THE SERVICES OF THIS INSTITUTION ARE FREE WITHOUT ANY EXCEPTION WHATEVER."

The Society has a large staff of voluntary workers, many of whom give all their spare time to its services.

The ambulance base in Mexico City is located at the hospital and the machines stand ready at a moment's notice. Mexico is a city of high speeds and varied activities and accidents are numerous. There are eight ambulances in Mexico City and two in Vera Cruz, two in Tampico, one in El Oro and one in San Luis Potosi.

In May, 1924, a severe smallpox epidemic occurred in the region of Mixquihuala, State of Hidalgo. Unable to cope with it, local authorities asked for help from the central committee, which immediately formed a corps composed of Dr. Vincente Barcenas and Dr. Davis Flores, with ambulance personnel who, at considerable self-sacrifice, went into the area and performed vaccinations on a wholesale scale, thus saving the lives of a great number of people. October 12, 13 and 14, 1925, were days selected for intensive Red Cross propaganda. A parade of Red Cross officers, personnel and equipment was organized, including the ambulance corps. Motor cycle dispatch riders bearing Red Cross pennants, the signal corps, the council of administration, the medical corps, volunteer nurses, stretcher bearers, with the new and comfortable stretchers, and all the ambulances followed. The need for a new hospital building in Mexico City was especially borne in mind at the time of this campaign for subscriptions, as the Red Cross hospital has been giving service in a large number of accident cases for some time. In 1923, for instance, it cared for 2,028 patients and in 1924, for 2,955, the latter number being composed of 1,898 men, 481 women, and 576 children. Another Red Cross day is being held this autumn, and it is confidently hoped that sufficient funds will soon be available to acquire the much needed addition to the hospital.

With the means at its disposal the Mexican Red Cross has already accomplished much for the mitigation of suffering and it is also working steadily with a view to influencing official and public opinion towards the end that its volunteer services may be utilized as an aid in the Society's great mission of helping the government authorities in the work of preventing diseases.

The greater amount of the large current expenditure of the Society is provided by funds raised by enterprises such as social gatherings, of various kinds, "fiestas" they are called. The Society also receives help from prominent business firms of Mexico. For instance, the Petroleum Companies give the Society one day's receipts each year from each of its stations and when a new station is established, the whole of the first day's sales are donated to the Society.

The total expenditures are $3,000 monthly (Canadian currency value) of which the ambulance services require some $600 monthly—*F.D.*

You Can Seat a Child at a Table But—

By A. D. Weaver in "Hygeia"

"I KNOW what she should eat," explained the distressed mother; "but how can I make her eat it?" Her adorable Mary Frances had a will of her own (as she properly should have), an alert eye that saw every movement of her elders, and she had a keen desire for drama with herself the centre of the stage.

The thinking mother who reads even one woman's magazine to-day knows all about the invincible trio of milk, fruit and vegetables. She knows how to prepare them, but the stumbling block is how to get the child to eat them. Here are a few simple little hints that will help and may actually solve this perplexing problem.

FATHER MUST CO-OPERATE

First, one must get the co-operation of the head of the house. Many a man has learned to eat spinach to show a child how good it is, that daddy eats it and if sonny wants to grow up big and strong like daddy, he must eat it, too. By the time sonny has learned to eat it, daddy has forgotten that he called it fodder or food for bovines. Wonderful indeed is the power of example. Children are imitators, so the mother should take advantage of this natural instinct to aid her in her task.

Only small servings should be given at first. Many children will not hesitate to eat a small portion, and even ask for a second, whereas if the serving is large, the appetite is somewhat dulled by the feeling that he cannot eat that much. Isn't this true with adults? When they view a task in its entirety, it seems too large to accomplish, but when they view it in its component parts, they can attack each part with a will.

Many people think that children do not appreciate the attractiveness of a dish, but I have discovered that they are quick to perceive attractive color combinations. I recall that one day for luncheon we had peas and carrots. Billy, our little guest, was not much impressed with this dish. Finally, our own Johnny, who was eating his with gusto, said, "Look, Billy, red and green, just like Christmas." This evidently raised them in Billy's estimation, for as I removed the plates, I noticed that Billy's was as clean as the others.

A bit of chopped lettuce makes the sandwich more attractive, and adds to its nutritive value as well. The peeling left on a few of the apples makes stewed apples prettier. Shirred eggs or eggs a la goldenrod offer a pleasing variety.

GETTING CHILD TO DRINK MILK

Perhaps mothers have the hardest struggle to get children to drink milk. If they are allowed to drink it from a measuring cup, they are delighted to watch for the marks and forget their objection. Drinking milk through a soda fountain straw adds interest. Many children like a drink from a pretty cup, from one with a flower at the bottom or one of their choosing.

The stimulus for little Peggy next door is that milk makes her cheeks rosy. Yesterday she remarked to me, "Mama's cheeks are getting rosy, too. She drinks milk like I do." Of course, milk may be concealed in soup, creamed vegetables, custards and junket. If the children get sufficient each day, the method matters little.

One cannot expect a child to eat a square meal soon after he has eaten candy.

Of all the crimes committed against childhood this practice of eating candy at any hour of the day is one of the worst. It has three distinct, harmful effects: Candy on an empty stomach irritates the delicate linings; sweets in excess destroy the desire for bland foods, such as milk and vegetables, and they kill the feeling of hunger so that when meal time comes the child has no appetite.

Mothers think they are being kind, when they reason in their indulgent way, "He likes candy. It is good. Therefore he should have it." Of course, he may have it after a meal. Then it can do little harm.

Highly seasoned foods, such as pickles and relishes, have no place in the child's diet. They likewise kill the desire for bland foods.

OVERWORKING THE STOMACH

The little girl next door eats constantly. Whenever I look out the window she is munching either an apple or a cracker. Her mother says, "Apples are good for her." This is true, but surely her poor little stomach should not be compelled to work every hour in the day. How can she eat a square meal at meal time? She cannot.

THE SELF-CENTERED CHILD

The desire to be the center of the stage, the desire for attention is a little more difficult to recognize and to cope with. Many children will eat if coaxed or they will eat if someone will feed them. These children should be given a chance to eat their meal, and if they refuse, the mother should carefully explain to them that if they do not care to eat they may leave the table. They should not be allowed any food until the next meal. They are sure to eat then. Inhuman? Not at all.

An eminent child specialist says that a child may go forty-eight hours without food and not suffer at all. The difficulty is that many mothers will relent and give in to the pleas of the child that he is hungry, instead of making him wait until the next meal. Of course, it is no easy task for a mother to withstand a child's cries for food, but for the good of the child and for the effect of her authority and discipline, it is worth the agony.

PASTEURIZATION PREVENTS

Nathan Straus, the great national authority on milk for children, says:

"Don't be misled by "Pure Milk" signs, or statements of raw milk pedlars. Be sure your milk supply is properly pasteurized. There has never been a milk-borne epidemic on record where the milk was pasteurized. The supply of milk everywhere should be pasteurized."

Our Most Valuable Food

By George G. Nasmith

Where milk comes from—

THE milk supply of any large community is obtained from hundreds of farms and from all kinds of cows.

Milk is taken care of in vessels which may or may not be clean. Cows are milked by milkers who sometimes have clean hands but often not clean. Milk is brought to cities sometimes not chilled, to dairies which may or may not handle it with sanitary precautions. There are, however, many clean farmers who do keep clean cows, clean barns and clean utensils. The milk produced by such farmers is clean and of high quality, but even inspected milk may not be safe.

How contaminated milk is made safe—

Some of the milk may contain cow manure, or dirt from unwashed utensils or germs of typhoid fever, septic sore throat, diphtheria, tuberculosis or other human diseases from milkers. Unpasteurized milk may sometimes be dangerous for these reasons. The process of pasteurization in which raw milk is heated to a temperature of 142 deg. F. to 145 deg. F. for twenty to thirty minutes destroys the germs which cause disease.

Since the mixed milk from all sources is certain to contain some dirt and germs from both the human and the cow, does it not seem reasonable that all milk received in the city should be given treatment that will remove all danger and make the milk safe for human consumption? The reduction of milk borne diseases such as typhoid fever, septic sore throat and intestinal disorders has been very striking where pasteurization has been enforced.

Pasteurization destroys the germs which cause Tuberculosis in Children—

A large proportion of ordinary cattle are tuberculous. The Canadian government very properly is attempting to eliminate tuberculous cattle and create "accredited herds."

Yet a certain number of cattle free from the disease one year show the presence of tuberculosis the next year. In spite of every precaution nearly two per cent. of one group of 4,800 milk cows, tested and found to be free from tuberculosis, reacted the following year.

The effects of cattle borne tuberculosis are disastrous in children. In abdominal tuberculosis fourteen per cent. of adult cases and forty-seven per cent. of those in children under five years of age are due to tuberculosis from cattle. In children under five years of age, sixty-one per cent. of the cases of tuberculous glands of the neck are due to cow infection as well as three per cent. of pulmonary tuberculosis. In New York City about ten per cent. of the tuberculosis and four per cent. of the mortality of little children was considered to be due to infection from cattle. Many cases of spinal disease and infections of joints are due to tuberculosis among children and are derived from the same source. Pasteurization destroys the germs of tuberculosis in milk.

The National Commission on milk standards recommends that all milk be pasteurized, even "certified milk," because cows sometimes develop tuberculosis during the period between tuberculosis tests.

Pasteurization does not affect nutritive qualities of milk—

Pasteurization does not injure the digestibility or nutritive value of milk. Groups of babies fed on pasteurized and unpasteurized milk showed a slight difference in the average daily gain in weight. The difference was in favor of the babies fed on the pasteurized milk.

Two of the three vitamins found in milk from properly fed cows are unaffected by pasteurization. The third vitamin is affected to some extent but this vitamin can be supplied to infants in the form of orange or tomato juice. All modern physicians recommend the early use of orange or tomato juice in infant feeding.

The cost of clean milk—

Clean, inspected, pasteurized milk costs about a cent a quart more but surely such an expenditure is worth while, when one considers that this ensures not only clean milk that cannot produce disease, but also a milk that is richer in butter fat and other constituents. What better insurance against disease could one have for children? It should never be forgotten that milk is the most nourishing food known for growing children and that a glass of milk goes far to correct any ill-balanced meal for old or young.

The greatest health authorities and associations in Canada, the United States and abroad state that all milk should be pasteurized. Statistics overwhelmingly prove that where pasteurization of milk has been carried out milk-borne epidemics of disease have ceased. It is admitted by the medical profession that tuberculosis, due to infection from cows is rapidly disappearing in cities where milk is pasteurized, whereas it continues its ravages where the milk is not pasteurized. If we know all this and that we are ensuring our children better health, freedom from disease, and a more nourishing article of diet we will surely help to make the laws necessary to ensure the safety of this most valuable of all foods. Advanced cities are insisting that all milk sold shall be pasteurized because it lowers the death rate reduces the amount of preventable disease; and cuts the expenditures on public health in other directions.

Where the householder comes in—

The householder should understand the value of clean, pure, safe milk and demand it, just as he or she demands clean bread, fresh meat, untainted fish or safe water.

Don't let anybody convince you that inspection ensures a safe milk supply. When all great authorities agree that even certified milk, which is produced under the best of conditions, must be pasteurized if it is to be rendered absolutely safe, how much more necessary is it that ordinary market milk should be pasteurized.

We should all drink more milk but we want safe milk, just as we want safe drinking water and safe foods. The law of supply and demand still holds good. If we all will demand safe pasteurized milk we will get it.

Red Cross Health Service in Foreign Settlements

With the Ukrainian Organizer in Alberta

MORE than twenty years ago if you had travelled by trail over the wilder parts of Alberta you would have observed with interest, and no doubt much sympathy, the small mud house, made of Mother Earth, and inhabited by a swarming family of strange looking people, whose garb proclaimed that they had come from other and more distant lands.

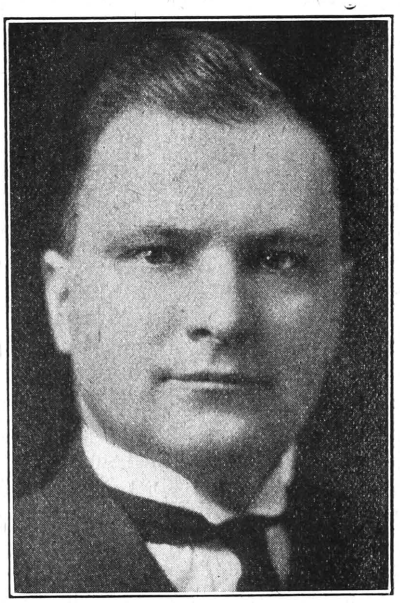
You would have wondered how it was possible to raise a family and keep the wolf from the door, and make any headway in the art of civilization. Everything seemed against the settler from the start. He did not understand the language, or the customs, or the people of his new land. He was poor, and had to leave home to work on the railroad to provide the flour and feed for his stock, human and otherwise. His home was in the care of the wife and mother, and she had to do the best she could with very little to come and go upon.

As a rule she was a woman of rude health, accustomed to field and garden work, and with but little time for the real business of bringing up babies. Confinements were considered in many cases in the light of fatalistic events. If the child lived—it lived; but if not, little alarm was exhibited at the tragedy of the death of a day old infant. The little body was committed to the earth with the thoughts:

"Some come to live, some to die," and the old weary round of work, and yet more work, went on and on.

But that was yesterday, the yesterday of twenty years or more. To-day, let us glance at the same homesteader. Unremitting toil and ceaseless saving has worked a miracle. Let us enter the big brick or frame house with its ten rooms. Here, at last one will expect to find ideal health conditions for the large family. From the window we observe the "big barn" with many head of horses and cattle and a "full line" of machinery. The environment is entirely different from those "days before yesterday."

But with wealth and its possibilities there has not come the knowledge of the art of using their hardly acquired riches. True to their old traditions and superstitions, we find the whole family still inhabit one room and are averse to modern ventilation by windows or otherwise. The growing children are being wrongly fed and their health mismanaged. Before their girlhood is spent, the younger women often take



N. M. OSTRYZNIUK,

Manager of the Dominion Colonization Company, of Edmonton District. He takes great interest in the Red Cross health work among the Ukrainians.

upon themselves the tasks of wifehood and motherhood. That they are entirely unprepared for these grave responsibilities has not entered into their reckoning. It was the way of their race for centuries. We find the woman of thirty years wearing the haggard face of sixty. In the race for life she has been used right up—unattended childbearing, ignorant habits of feeding herself and caring for herself, have made her old before her time.

Here is wealth, well earned, and but little enjoyed. Of health and hygiene they are still uninformed, of the duties of citizenship and its opportunities they are unaware. The question of great moment is what is being done to alter conditions and who is doing it?

At the Annual Meeting of the Alberta Division of the Canadian Red Cross Society a few years ago, an address was given on the "Foreign Settlements of Alberta" by Dr. John Orobko, graduate of McGill and Alberta Universities. Dr. Orobko, himself of Ukrainian origin, is a splendid example of the foreign citizen who has taken advantages of the facilities Canada offers educationally. He has devoted much time and thought to the study of his own people, their progress in health and education. At his suggestion the Red Cross has been able to begin a worth while work for better conditions among the Ukrainian settlers.

In June of last year a Ukrainian organizer, Mr. Plawiuk, was attached to the staff of the Provincial Division. Mr. Plawiuk travels with a set of lantern slides and lectures to the settlers in their own language. He enters a settlement and remains there for a few days, interesting the people in public health and Red Cross work.

Mr. Plawiuk has been received with much acceptance by his own people, and has been successful in forming eight senior branches and many Junior Branches of Red Cross. Generous financial support has been received through donations of grain from these foreign districts. Through the co-operation of several Ukrainian doctors Health Literature has been translated and distributed amongst these settlements. This work has been undertaken as an outcome of a resolution passed at the first meeting of the Advisory Public Health Committee, representing the Red Cross, Women's Institutes, Medical Association, and the Registered Nurses Association of the Province. This Committee strongly recommended that action be taken by the Red Cross to interest foreigners of the province in health propaganda, and to provide for some instruction in the foreign districts.

Among the foreign people are three distinct divisions: Ukrainian Catholics, Ukrainian Protestants and the Bolshevists.

The appointment of a Ukrainian Nurse, Miss Jasenchuk, who is engaged in the organization of Home Nursing Classes, is working out satisfactorily. It must be noted that the request for this work was brought to the Red Cross at the Annual meeting of Alberta Division

in March by Mrs. Svarick, the first Ukrainian Delegate to attend. This lady pointed out the acute need of health instruction, especially amongst mothers. She described the bad health conditions of many homes, and mentioned the needs of the foreign children whose health requires attention and treatment.

One of the first Ukrainian Life members under the peace policy is Mr. N. M. Ostryzniuk, of Edmonton, Manager of the Dominion Colonization Co., of Edmonton, Alberta, through whose office many immigrants arrive in Alberta. Mr. Ostryzniuk is greatly interested in the Red Cross work amongst the Ukrainians and has firm faith that Red Cross Health Education will prove a great blessing in raising the standards of living.

Nutrition—A Much Needed Study

FOR the purpose of giving the Canadian delegates to the Pan-American Red Cross Conference at Washington an opportunity of learning something about the Nutrition campaign which is being conducted on a large scale in the United States, Dr. Jas. W. Robertson arranged a luncheon at which the principal speakers were: Miss Louise Stanley, and Miss Miriam Birdseye of the Home Economics Division of the Extension Service of the Federal Department of Agriculture, and Miss Schuman, Chief of the Nutrition Service of the American Red Cross.

The three speakers gave excellent addresses which were of a very illuminating character and opened the eyes of the delegates to the possibilities and the value of giving the public an opportunity of studying the very important question of a suitable, wholesome and economical diet for the people generally.

One of the speakers who had done considerable work in the field stated that it had been quite a revelation to her that men had taken keen interest in this subject and the most satisfactory results had been accomplished in places where the movement had been initiated and fostered by men's organizations.

Nutrition classes are now being conducted in over thirty states by co-operation between the Federal Department of Agriculture, The State Agricultural Colleges, and voluntary organizations of women in probably two thousand communities. Many of the Red Cross Chapters employ a specialist in Nutrition to carry on the classes and visit homes.

Harmful Diets

WHEN McCollum and Simmonds were preparing to write their book, "Food, Nutrition and Health," they spent some time investigating eating habits. One day they lunched at a Y.W.C.A. cafeteria. They took a table near the food counter and spied on the girls as they passed by with their trays.

One had meat pie, stewed tomatoes, white muffins, and butter. A second had corned beef hash, mashed potatoes, succotash, cornbread, and butter. A third, meat pie, raised biscuits, potato salad, and coffee. A fourth, beef croquettes, mashed potato, stewed tomato, bread and butter. A fifth, stewed tomato, white flour muffins, cornbread, butter, currant pie, and lemonade.

Knowing something of what people of like kind had had for breakfast and would have for supper, the authors went back to their desks and wrote: "Many people wonder why it is that so many men and women begin to look old at 40 to 50 years. Why it is that their bones become so brittle as to break easily and why their teeth are so poor that they decay easily. The answer is: People are not taking the right combinations of food."

To the same cause they also ascribe overtire at the end of the day's work, "restlessness in the evening," "evenings of excitement and entertainment rather than rest and self-improvement."

But the answer means even more than the charge. They say to avoid this list of ills modify the diet as follows:

"Eat approximately a quart of milk a day. Eat it in milk soups, cream vegetables, bread made with milk, puddings, custard, cottage cheese, butter, buttermilk, ice cream, cheese and milk.

"Eat a liberal serving of cooked greens at least once every day. Eat a salad once a day.

"Eat what you want after you have eaten what you should."

This advice classes the three above named groups as foods which should be eaten. It assumes that the appetite will crave a proper amount of meat, bread, vegetables, and fruit to supply calories, protein, minerals, and vitamins needed in addition to those found in milk and the leafy salads and greens.

Milk and greens they call protective foods, and they assume that our eating habits make us crave the energy and repair foods more.

FROM THE CHRISTMAS CARD OF A BISHOP

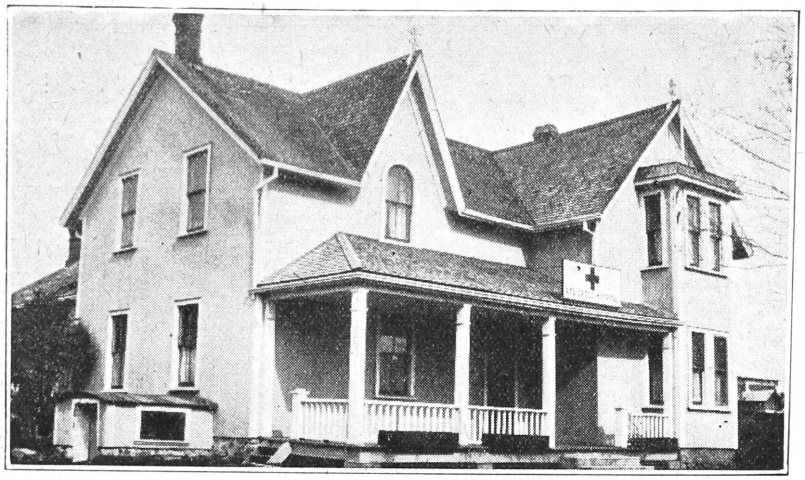
GIVE me a good digestion, Lord,
And also something to digest.
Give me a healthy body, Lord,
With sense to keep it at its best.
Give me a healthy mind, good Lord,
To keep the pure and good in sight,
Which, seeing sin, is not appalled,
But finds a way to set it right.
Give me a mind that is not bored,
That does not whimper, whine or sigh;
Don't let me worry overmuch
About the fussy thing called "I".
Give me a sense of humour, Lord,
Give me the grace to see a joke;
To get some happiness in life
And pass it on to other folk.

—Contributed by Rev. Canon Plumptre.

INVALID SOLDIERS TAUGHT BASKETRY

A Committee was formed to take charge of the work in the Soldiers' ward of the Civic Hospital. An ex-soldier was engaged to teach basket work, with excellent results; not only were men taught basketry, but numbers of others were entertained and helped by the work. The Branch supplied underwear and socks for the benefit of the men in hospital. A number of friends sent in cards and games and these with a moderate number of cigarettes were distributed by another member of the committee.

—From Annual Report, Ottawa Branch, Canadian Red Cross.



St. Joseph's Island Outpost Hospital conducted by the Ontario Division. This building, with enlarged accommodation, was taken over to meet the requirements of an expanding service for the locality.

The Ontario Division in Red Lake District

THE Ontario Division has added another Outpost Hospital to its already large list. This time it is in the Red Lake Gold District where some of the great Porcupine mining companies are carrying on extensive exploration. In June Dr. Routley the Divisional Director went in by the Patricia Airways 'plane and made preliminary arrangements. The air trip took fifty minutes against four days by trail and lake. In this new venture the Ontario Division has the hearty co-operation of the Ontario government,the big mine operators, and the men who are exploring the area.

Speaking of the new Outpost the Northern Miner said:

"An emergency outpost of the Canadian Red Cross Society is being established at Red Lake, and Miss Gamble will be the nurse in charge. Dr. F. W. Routley, director of the Red Cross for Ontario, has been in to the new camp looking over the ground there and he, with Miss Clara Wheatley, in charge of the emergency outpost at Hudson, and Miss Jessie Brown Gibson, daughter of T. W. Gibson, deputy Minister of Mines for Ontario, have been arranging for the equipment to be sent in to Red Lake.

"Miss Gamble will have an assistant at the new outpost, and they will co-operate with the doctor at Red Lake and the management of the Dome and McIntyre mines there. The Red Cross Society is gradually extending the field of its peace-time operations in Ontario. It now has nursing outposts in the following places:

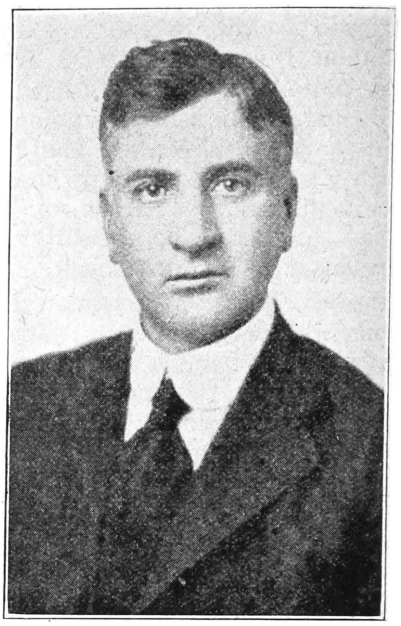
Wilberforce, Dryden, Englehart, Haileybury, Nakina, Hornepayne, Thessalon, St. Joseph's Island, Lion's Head, Rainy River, Quibell, Nipissing District, Kirkland Lake, Loring, Whitley, Hudson, Red Lake and New Liskeard.

Minerals in Diet Build Teeth

Dr. Grant's Interesting Lecture to Red Cross Nursing Classes

WHY the next great step in preventive medicine must be taken by the dentist, was discussed by Dr. Edmund A. Grant, Director of the Dental Service in the Toronto City Schools, at a largely attended meeting of the Red Cross Home Nursing classes, held at Sherbourne House Club.

The importance of good health was recognized in the present age in which medical science is trying in every way possible to prevent disease, he pointed out. Would the dental profession accept the challenge that theirs was the first step in promoting health? The need of dental care was evident in the fact that in Toronto before the schools' dental service was started there were ninety per cent. of the children with defective teeth. The same alarming conditions prevailed in other communities, also, before the question was given attention. The way to build up the teeth, he said, was to provide the necessary minerals in diet to be found largely in whole wheat, green vegetables, fresh fruit and milk. Vitamines were necessary to promote the absorption of minerals in the food, he said. Up to the age of twenty the teeth were being formed and replaced and there was constant need for minerals.



His Honour Colonel Henry Cockshutt, Lieutenant-Governor of the Province of Ontario, Honorary President, Ontario Red Cross.

In the bulletin of the Ontario Division referred to on page 16, His Honour says:

"The good work that is being carried on by the Canadian Red Cross should be highly commended, and it deserves to be widely known to the people."

HIS EXAMPLE

There's a wide-eyed little fellow who believes you're always right,
And his ears are always open, and he watches day and night;
You are setting an example every day in all you do,
For the little boy who's waiting to grow up to be like you.

—Edgar A. Guest.

Give the Red Cross your steady support. It needs your help in carrying on its good service for the people of Canada.

Department of Immigration Appreciates Red Cross Seaport Nurseries

In the latest Annual Report of the Department of Immigration and Colonization the following appreciation is expressed of the work of the Canadian Red Cross Seaport Nurseries:—

"In the Dominion immigration buildings at Quebec, Halifax and Saint John, very important work is carried on by the Canadian Red Cross Society. This welfare work does not stop at the port. The trained nurse in charge has a quiet conversation with the mothers regarding their children, and finds out from them whether they wish a visit from a public health nurse. Then cards are forwarded by whoever is in charge at each port to the Red Cross Head Office in Toronto. From there they are distributed to the various centres, where arrangements are then made for a representative of the Red Cross, or of some other organization, to visit the family. The nurseries are always open to both British and foreign families. A cup of tea is given to the tired mothers, and milk and biscuits to the children.

"The equipment and space is provided by the Department of Immigration, but the credit of the work is entirely due to the Red Cross Society. It is indeed difficult to estimate the value of the work which is done by this organization. Tired mothers are able to leave their little flock in the nursery while they attend to their luggage, and other business. On all sides one hears nothing but praise of this work done for women and children at our ports."

The Port Nursery Follow-up Card

"OH! WHAT'S the good of these old cards anyway?" was, perhaps, the thought in the mind of the tired Red Cross Port Nursery worker after an eight hour stay at Pier Two, when she wrote:

"Mrs. V . . . and child, proceeding to her husband at Sydney, Nova Scotia, with her daughter, Margaret, aged five years. Halifax, March 13th, 1926."

Yet the card was filled out, sent to the office of the Nova Scotia Division of the Canadian Red Cross and in due course to the Local Branch for investigation. Then comes the interesting story.

In less than a month the mother deserted the child, leaving her at a most undesirable home, and went herself to Montreal. It was some weeks before the child was discovered by the Red Cross worker. She was the convenor of the Relief Committee of the Sydney Branch, and made known the desertion to the authorities. On July 4th the Red Cross worker and the agent of the Childrens' Aid Society, visited the home, took the child in charge and on July 6th, County Judge Crowe made her a ward of the Aid Society. She was placed in a local orphanage.

Were it not for the Port Card and our practice of a Red Cross "follow-up," months or years might have passed before this child was discovered and rescued. One such instance is worth a lot of trouble. Oh, yes, the Port Nursery Card is worth while.

A Message of Hope

There is good news about cancer. In many instances it can be prevented and if treated in its early stages it can be eradicated. Sometimes it can be successfully removed, even when it has progressed beyond the early stages. It does not break out in another place when the removal is complete.

A cancer in the body is like a weed in a garden. It begins in one spot as a small growth. There is only one course to follow with cancer as there is with a weed—get rid of it immediately and entirely.

Do not imagine that because someone in your family died of cancer, you are doomed. In some families the tendency toward cancer seems to be hereditary, but the disease itself is not.

Cancer is not catching. To avoid sufferers is as stupid as it is cruel. There is not a single authenticated record of any person having contracted the disease through association with a patient.

Be on the watch for the first sign of cancer. Do not neglect any strange growth. Be suspicious of all abnormal lumps or swellings or sores that refuse to heal. Look out for moles, old scars, birthmarks or warts that change in shape, appearance or size. Jagged or broken teeth or ill-fitting dental plates may cause cancer, also continued irritation of any part of the body.

The failure of internal organs to function normally, or an unusual discharge from any part of the body should at once receive thorough and skilful attention. Make certain whether or not the cause is cancer.

Remember this: Once it has begun to develop, Nature alone is helpless to stop the growth of cancer. But it may be removed by surgery or destroyed by X-rays or radium. Do not wait, thinking the trouble will clear up. Do not wait for pain. In the early stages there is no pain. Time is a matter of life and death with cancer.

The greatest scientists of the world, though they have searched for years and are still searching, have not found a serum to prevent cancer or drugs to cure it. The great victories have come from surgery, X-rays or radium.

—Metropolitan Life Ins. Company.

Sustained by your help the Canadian Red Cross can continue and improve its services to the people of Canada and for humanity. Keep up your membership.

EFFICIENCY!

"The Best Possible Result, In the Least Possible Time, with the Means Available"

This is a good definition of efficiency. It is also a Canadian mother's impression of a Red Cross Home Nursing Class.

700 Red Cross Home Nursing Classes have been organized.

Organize your group for a class for the autumn and apply to the Headquarters of your Provincial Division. See Addresses on this page.

THE CANADIAN RED CROSS EXECUTIVE OFFICERS OF PROVINCIAL DIVISIONS

PRINCE EDWARD ISLAND:
Dr. S. R. Jenkins,
Charlottetown, P.E.I.

NOVA SCOTIA:
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Miss Ethel Jarvis,
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QUEBEC:
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45 Belmont Park,
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Dr. Fred W. Routley,
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MANITOBA:
Major J. W. Forbes,
187 Kennedy St.,
Winnipeg, Man.

SASKATCHEWAN:
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Regina, Sask.

ALBERTA:
Mrs. C. B. Waagen,
226 Traders' Bldg.,
Calgary, Alta.

BRITISH COLUMBIA:
J. Pitcairn Hogg,
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 contributions 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 .....

.....

THE ONTARIO DIVISION BULLETIN

Brightness, brevity and clearness of statement are the characteristics of a bulletin which the Ontario Division published in June last. The front page contains a commendation of the Society's helpful service from His Honour, the Lieutenant-Governor of the Province, Colonel Henry Cockshutt. The remainder of the bulletin deals with the expanding work of the Division, the Outpost Hospitals with particular reference to those at Red Lake and Hudson, the steady service of the kindly volunteers who keep the hospitals supplied with layettes, bed linen, dressings and garments, and also the helpful service for disabled soldiers that is being rendered by the Toronto Island Summer Hospital. The bulletin is designed to keep all the Society members in Ontario fully informed of the good work the Division is doing.

DO IT NOW

Your membership contribution helps on the Red Cross work described in the pages of this magazine. Send it in regularly. The Canadian Red Cross is grateful for your help.