

# Public Health Reform in Canada and Urban History: A Critical Survey

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## RESEARCH NOTE/NOTE DE RECHERCHE

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### PUBLIC HEALTH REFORM IN CANADA AND

### URBAN HISTORY: A CRITICAL SURVEY

*Paul Adolphus Bator*

The attitude of the public to social reforms is slowly changing. Half a generation ago there were subjects impossible of discussion before an audience ... which were taboo in the newspaper. There has been a great change in this respect. Those of us who have had experience in public health work are aware of the progress made in our short official lives. Often one is discouraged by the slow progress made, but we are consoled with the thought that the beginning of reforms in these matters is but two or three generations old, and that it is the constant dripping of water on the stone that makes the impression.<sup>1</sup>

Although enunciated over fifty years ago, Dr. John McCullough's defence of the "slow progress" of the public health movement's campaign to improve the health of the ordinary Canadian is a fitting introduction to a review of some of the major materials available for historical research on the nature of Canadian public health reform. His statement tried to counteract the growing skepticism of many of his contemporaries about the value of public health work during the previous three decades. His remarks might also be directed at critics of these reforms in our own generation. Despite their paternalism, prejudices, and

professional self-interest, public health reformers in cities like Montreal, Toronto, Winnipeg, and Vancouver waged a lengthy but successful campaign against contagious diseases.

In the decades after 1900, Canadian public health reformers brought about, albeit only gradually, a significant betterment in the health of the common Canadian. Their efforts saved thousands of lives, especially among the young, traditionally lost to the ancient scourges of diphtheria, scarlet fever, smallpox, typhoid fever, and tuberculosis. Admittedly, their methods were not always appreciated, and they were too often subject to questionable motivations. Some argue that the apparent absence of primary research sources, such as personal papers or departmental files, strictly limits our understanding of these reformers. Moreover, the material that does exist, an assortment of federal, provincial and municipal health reports and other documents, has been heretofore dismissed as secondary sources of very little historical value. The purpose of this article is to urge, as a number of historians have started to do, a reconsideration of these documents and to point out to researchers their significance not only in illuminating the work of public health doctors and nurses but also their worth as records of Canadian

social history. Before undertaking this task, a brief historiographic review of public health literature is necessary since it should not be assumed that this topic has been totally ignored until now.

Prior to the 1970s, histories of the Canadian public health movement were primarily written by doctors involved in that field of medicine. Four of the earliest examples of this type of historical writing are: Dr. Peter Bryce, "A Hundred Years of Sanitation," in Ontario, *Sessional Papers 1892*, Number 26, pp. 3-16; Bryce, "The Story of Public Health in Canada," in Maszaryk P. Ravenal, ed., *A Half Century of Public Health*, jubilee historical volume of the American Public Health Association (New York: American Public Health Association, 1921), pp. 56-65; Dr. J.W.S. McCullough, "A Decade of Public Health Progress," *Canadian Public Health Journal*, XI, No. 7 (July, 1920), pp. 293-300; and McCullough, "Early History of Public Health in Upper and Lower Canada," *Canadian Journal of Medicine and Surgery*, I, No. 2 (February, 1922), pp. 60-84. The most notable example of this tradition is Dr. R.D. Defries, ed., *The Federal and Provincial Health Services in Canada* (Toronto: Canadian Public Health Association, 1959), which is an updating of an earlier study on the development of public health published in 1940. Defries also authored an interesting examination of one of the first pioneers of public health organization in the Dominion: "Edward Playter, A Vision Fulfilled," *Canadian Public Health Journal*, XL, No. 9 (September, 1959), pp. 368-77. In that same vein is Dr. Ad. Groulx, *Le Service de santé de la ville de Montréal: évolution et*

*organisation actuelle/The Department of Health of the City of Montreal: Evolution and Present Organization*, Revised Edition (Montreal: Department of Health, 1954). The recollections of health officials in different Canadian cities provide background on the establishment of modern public health administration as demonstrated by Hamilton's Medical Officer of Health in Dr. James Roberts, "Twenty-Three Years of Public Health," *Canadian Public Health Journal*, XIII, No. 12 (December, 1928), pp. 551-59. A more recent addition to that tradition is Dr. George J. Wherrett, *The Miracle of the Empty Beds: A History of Tuberculosis in Canada* (Toronto: University of Toronto Press, 1977). Equally worthy of mention are volumes composed by a non-medical man and a medical practitioner: William Perkins Bull, *From Medicine Man to Medical Man: A Record of a Century and a Half of Progress in Health and Sanitation as Exemplified by Developments in Peel* (Toronto: The Perkins Bull Foundation, 1934), and Dr. G.M. Godfrey, *The Cholera Epidemics in Upper Canada, 1832-1866* (Toronto: Seacombe House, 1968).

In the last decade more academic attention has turned to an historical evaluation of Canadian public health reform. One of the first scholarly treatments of this movement is Neil Sutherland, "'To Create a Strong and Healthy Race': School Children in the Public Health Movement, 1880-1914," *History of Education Quarterly*, XII, No. 3 (Fall, 1972), pp. 304-33, which is based on the author's doctoral thesis, completed at the University of Minnesota in 1973. The book version of Sutherland's work is *Children in*

*English-Canadian Society, 1880-1920: Framing the Twentieth Century Consensus* (Toronto: University of Toronto Press, 1976); see especially Part II, pp. 39-88. Just as significant in terms of breaking new ground is Alan F.J. Artibise, "Public Health Versus the Private City," chapter 13 of *Winnipeg: A Social History of Urban Growth, 1874-1914* (Montreal and London: McGill-Queens University Press, 1975), pp. 223-45. At the same time, some historians began to attack the motives and results of public health reformers, a perspective evident in Terry Copp, *The Anatomy of Poverty: The Condition of the Working Class in Montreal, 1897-1929* (Toronto: McClelland and Stewart, 1974), Chapter 6, "Public Health," pp. 88-105; and in Michael J. Piva, *The Condition of the Working Class in Toronto, 1900-1920* (Ottawa: University of Ottawa Press, 1979), Chapter V, "Public Health and Housing," pp. 113-42. Geoffrey Bilson's "Canadian Doctors and Cholera," in the C.H.A.'s *Historical Papers 1977*, pp. 104-19, analyzed the response of the medical profession to epidemics in the nineteenth century. The reactions of one Canadian city and the whole country to another contagion in the twentieth century are the subjects of J.P. Dickin McGinnis, "A City Faces an Epidemic," *Alberta History*, XXIV, No. 4, (Autumn 1976), pp. 1-11; and Dickin McGinnis, "The Impact of Epidemic Influenza, Canada, 1918-1919," in the C.H.A.'s *Historical Papers, 1977*, pp. 120-40. Margaret W. Andrews, "Epidemic and Public Health: Influenza in Vancouver 1918-1919," *BC Studies*, No. 34 (Summer, 1977), pp. 21-44 covered the outbreak of the Spanish Flu on the west coast. Andrews also examined the nature of health care

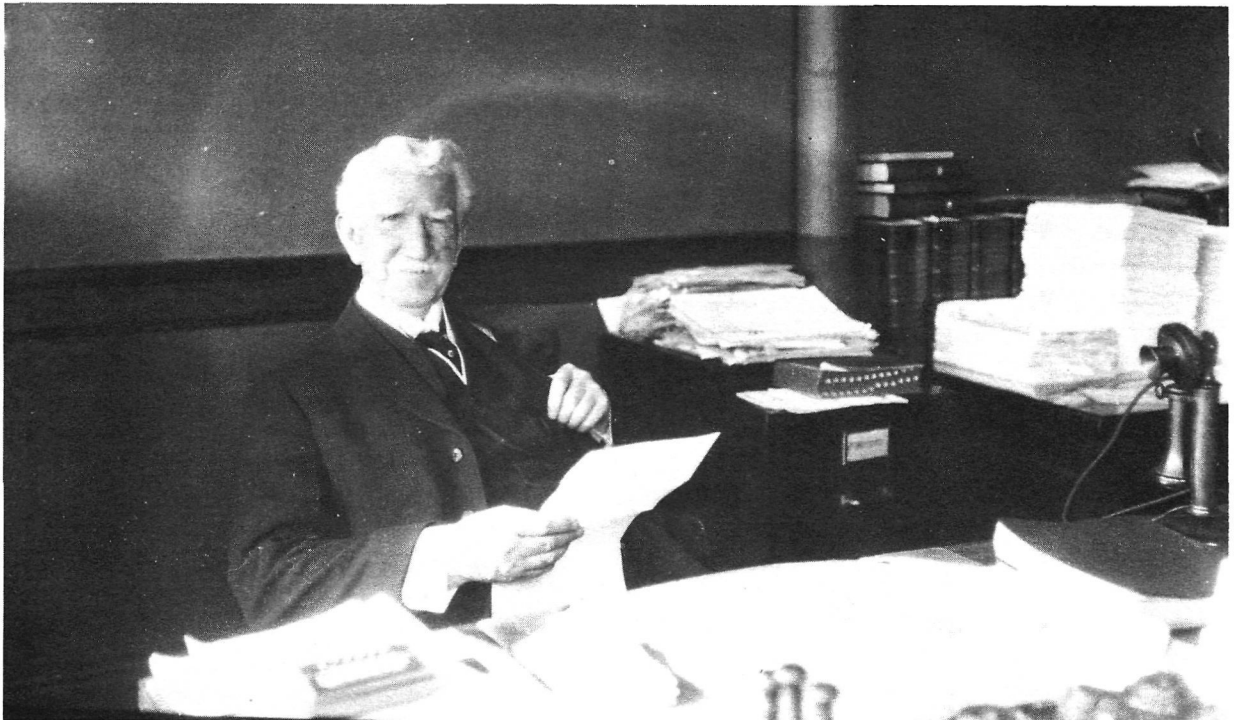
in "Medical Attendance in Vancouver 1886-1920," *BC Studies*, No. 40 (Winter 1978-79), pp. 32-56. A fuller historical treatment of the development of public health is available in Andrews, "Public Health in the City of Vancouver, 1886-1920," Ph.D. Thesis, University of British Columbia, 1979. For a similar study on Toronto, see Paul Adolphus Bator, "'Saving Lives on the Wholesale Plan': Public Health Reform in the City of Toronto, 1900 to 1934," Ph.D. Thesis, University of Toronto, 1979. The attitude of health reformers to the urban poor is discussed in P.A. Bator, "'The Struggle to Raise the Lower Classes: Public Health Reform and the Program of Poverty in Toronto, 1910 to 1921," *Journal of Canadian Studies*, XIV, No. 1 (Spring 1979), pp. 43-49. A history of public health nursing in Toronto is presented in Margaret McNeill Risk, "A Study of the Origins and Development of Public Health Nursing in Toronto from 1890-1918," Master of Science of Nursing Thesis, University of Toronto, 1973. The influence of public health reformers - and it was significant - on public policies concerning mental health and immigration is partially examined in Terry L. Chapman, "Early Eugenic Movement in Western Canada," *Alberta History*, XXV, No. 4 (Autumn, 1977), pp. 9-17; and in Zlata Godler, "Doctors and the New Immigrants," *Canadian Ethnic Studies*, IX, No. 1 (1977), pp. 6-17.

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In the early 1970s when this author began research for a doctoral thesis on the campaign against slums of Dr. Charles Hastings, Toronto's Medical Officer of Health from 1910 to 1929, it

became more and more evident that there was a large amount of material on the response of Canadians to rapid industrialization and urbanization in the reports of health departments. Instead of dealing with the problem of uncovering sources for the history of housing reform, the puzzle became one of how to organize and evaluate this immense body of information on the diverse and confusing activities of public health officials before the First World War. The study turned into an examination of the establishment of modern public health administration. The footnotes and bibliography of the thesis present ample evidence of the rich quality of public health records as sources for urban history.

The research into the history of the Canadian public health movement was made more challenging by the lack of private papers of any of its major leaders. It became necessary to rely primarily on the public record. Surprisingly, official reports, special studies, and articles in medical journals presented an insight into the character of these reformers. One admonition must be given concerning such material. Because public health advocates were very conscious of the use of history to promote their goals, the researcher should be aware of the built-in proclivities of the documents. Fortunately, the coverage of public health campaigns in the newspapers permits one to gain a different point of view on the movement. The critics of health departments were very vocal



*Dr. Charles Hastings, Medical Officer of Health for Toronto (1910-1929). Hasting's international reputation attracted large numbers of health officials from other countries to study Toronto's health department in the 1920s. (Source: City of Toronto Archives).*

in their opposition to health authorities. The bitter confrontation between anti-vaccinationists and health officials was an excellent illustration of the resentment within the community which can be found in the press. These sources demonstrated the fact that there is a large amount of historically relevant material outside the traditional confines of archival collections.

Because public health services before the First World War in Canada were primarily the responsibility of local governments, municipal archives are the principal repository for documents on public health work in the nineteenth and early twentieth century. One city, Toronto, is an essential starting point for research on this subject for two reasons. In the first place Toronto's doctors, nurses and philanthropists were prominent in the leadership of the public health movement both nationally and internationally. The city's health department was an acknowledged pioneer in the development of public health administration as a fundamental part of modern government.<sup>2</sup> It served as a model around the world, annually attracting large numbers of visitors who hoped to emulate its example in their own jurisdictions. In the early 1920s, a distinguished French professor of preventive medicine applauded the Toronto health department as the finest he had ever seen.<sup>3</sup> The second reason for singling out Toronto is far more practical. The City of Toronto Archives (C.T.A.) offers the researcher an abundance of records that are easily accessible due to the institution's well-organized system and helpful archivists. The key to the

effective use of these sources is an understanding of where to find information on the wide variety of issues which preoccupied health officials. One must consult these documents in order to unearth the historical roots of the modern role of governments at all levels in social programmes such as public housing, the inspection and regulation of food, health care, and industrial health. They also illuminate the origins of a new breed of modern professionals in the area of urban planning and social work.

There is a great deal of information on the evolution of the public health movement in Toronto's municipal records, but a problem arises from the fact that it is not located in the obvious places. For example, very little official material, outside of annual or monthly reports, has survived from the early years of the health department. Unfortunately the daily records of Toronto's Department of Public Health in the C.T.A. are largely missing for the period prior to World War II. After that time there are correspondence files which are closed to the public. However, the nature of Toronto's civic government guaranteed the preservation of documents relating to the activities of health authorities prior to the 1920s. The chain of local authority in the city made every committee or department accountable to City Council through its executive committee. As a result, there still exists a significant number of records on the city's public health activities, dating from the late nineteenth and early twentieth century.

The reports of the Local Board of Health and its predecessors in



*Toronto's Baby Clinics, like this one in Earlscourt, provided instruction to mothers on the care of their infants. It was this kind of programme that helped to cut the city's infant mortality rate in half between 1910-1925. (Source: City of Toronto Archives).*

Toronto's municipal structure, published in the appendices to the *Minutes of Proceedings of the Council of the Corporation of the City of Toronto*, are the basic source for the history of public health reform. Prior to the 1880s the only ongoing public health measures were the responsibility of the Markets and Health Committee which tried to improve the sanitary state of Toronto. In the beginning of the 1880s the province passed legislation that created the Local Board of Health (L.B.H.) which many

municipalities attacked as an infringement on their authority over local matters. This provincial action resulted in the establishment of permanent health departments in cities. It was through the L.B.H. that the head of the health department submitted a monthly account of his departmental work to council. An unbroken series of the reports of the Medical Health Officer, called the Medical Officer of Health after 1912, are located in the *Toronto Council Minutes* and date from the

latter part of the 1880s.

Unfortunately, the correspondence and internal files of the L.B.H. in the C.T.A. are incomplete. They date only from 1923. The C.T.A. has arranged this material in a separate record group which is entitled R.G. 20. These documents are principally composed of reports from the M.O.H. that were printed in the council minutes. There are a few pieces of correspondence on public health issues in the 1930s which indicate the importance of the M.O.H. as the chief policy maker for health in the municipality.

Until a few years ago, the chief source of information on the history of the health department was restricted to the reports of the L.B.H. in the *Toronto Council Minutes*. The decision of the department to hand over records to the archives led to the creation of R.G. 11. There are two parts to this collection. The first section is made up of correspondence folders following 1945, account books that started in 1913, records of the City Employees' Relief Fund, and the Food Inspection Division and the Dental services from 1920 to 1968, as well as the files of the Public Health Nursing Division and the Ambulance Service. The most enlightening material is found in a number of historical files from the Public Health Nursing Branch. The majority of the documents transferred by the health department to the C.T.A. are publications withdrawn from the library. The second part of the health department's records are historically the more interesting. It is composed of the annual and monthly reports of the four doctors who directed the department from the 1880s to the 1930s.<sup>4</sup>

In terms of content and style, the most valuable records on the development of public health administration in Toronto are the monthly reports, special studies and departmental publications from Dr. Charles Hastings' era as Medical Officer of Health. Unlike both his predecessors and successors, Hastings created a high public profile for the position of M.O.H. Consequently, his official publications provide a great deal of information not normally found in government documents. His firm belief in the efficacy of public education was behind the health department's publicity campaigns which filled the local press with the gospel of preventive medicine. Not satisfied with the coverage given in the newspapers, Hastings set up his own Health Bulletin in 1911 for distribution to the homes of ordinary citizens. This series of bulletins, preserved on microfilm in the City of Toronto Archives, reveals much about the tactics and activities of the city's crusading health officials.<sup>5</sup>

Charles Hastings' innovativeness in public health work was further demonstrated by his employment of photography in the battle to ameliorate the health of the common man, woman and child. The camera was shrewdly used to document the appalling living conditions in the city at a time when many observers regularly disclaimed the existence of slums. The M.O.H. silenced these disbelievers by giving photographic evidence of the unpleasant and distressing state of housing in many neighbourhoods.<sup>6</sup> He also utilized the camera to record the work of public health nurses in Well Baby Clinics. For him, these pictures were another tool in his campaign to educate the general

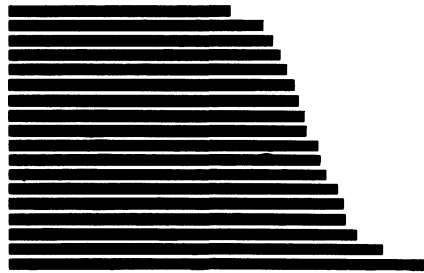


# TORONTO HAD A LOWER GENERAL DEATH RATE IN 1914 & 1913 THAN ANY LARGE CITY OF AMERICA OR THE UNITED KINGDOM IN 1913

*One of the many charts used to illustrate the general improvement brought about by the Toronto Department of Public Health. (Source: City of Toronto Archives.)*

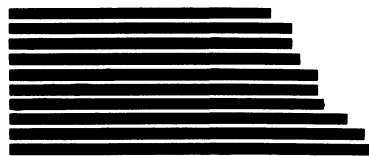
## DEATHS PER 1000 POPULATION (CITIES OF OVER 350,000)

TORONTO 1914	11.8
TORONTO 1913	12.9
MILWAUKEE	13.2
NEW YORK	13.3
CLEVELAND	14.1
ST LOUIS	14.3
SAN FRANCISCO	14.7
LOS ANGELES	15.0
CHICAGO	15.1
PHILADELPHIA	15.7
BUFFALO	15.8
BOSTON	16.1
CINCINNATI	16.7
WASHINGTON	17.0
DETROIT	17.1
BALTIMORE	17.7
NEW ORLEANS	18.0
MONTREAL	21.5



## (CITIES OF OVER 300,000)

BRISTOL	13.3
LONDON (COUNTY)	14.4
EDINBURGH	14.4
BIRMINGHAM	14.5
SHEFFIELD	15.7
LIVERPOOL	15.7
MANCHESTER	16.0
GLASGOW	17.2
LIVERPOOL	18.1
BELFAST	18.8



population. When supported by background information from the departmental reports, these photos present another dimension to our historical understanding of the problems faced by public health reformers.

There are almost one thousand negatives in the Toronto Department of Public Health photographic collection. This series of pictures dates from Hastings' years

as M.O.H. in January of 1911 to World War II. There is an index to the photographs.<sup>7</sup> For example the first sixty prints deal with slum housing. Later pictures depict the variety of health problems tackled by the department from the elimination of infected or dirty milk to the filtration of water and the medical inspection of school children.<sup>8</sup>

Public health reformers

employed the medium of the photograph not only to inform the citizenry, but also to scare them into action. This policy resulted in the preservation of important sources on the history of public health reform, namely pamphlets, posters, advertisements and cartoons designed by health reformers to persuade a reluctant public to adopt healthy living habits or accept certain unpleasant and even painful forms of prophylaxis. Some of the best examples of the use of scare tactics by public health officials were the publications turned out to combat the anti-vaccination movement in Ontario during the first two decades of the twentieth century. For instance, the Ontario Provincial Board of Health printed a pamphlet for free distribution that graphically depicted with photographs the horrors of smallpox. "A series of illustrations show in a most striking manner the loathsome character of the disease in the unvaccinated," a British medical journal announced in praising the effectiveness of the publication and then added the comment that a "very remarkable illustration is a photographic reproduction of two infants in the arms of an attendant; one of them - a most unsightly object - showing smallpox in an unvaccinated child which died, the other, a chubby healthy looking child protected by vaccination; the two infants are actually in physical contact with each other."<sup>9</sup> This type of approach indicated that public health reformers could be brutally realistic in their campaigns to educate the general population in the realities of preventive medicine. If the average man or woman wouldn't listen to a reasonable explanation for accepting immunization, health

authorities resorted to fear in order to persuade them to submit to inoculation. Such scare tactics were later applied in the battle against venereal diseases.<sup>10</sup>

The exploitation of fears about social degeneracy were a dominant theme in the variety of special studies undertaken by Dr. Hastings in Toronto. These investigations are an important source of information on the social conditions created by a rapidly industrializing and urbanizing society. The most celebrated example of this kind of report was Hastings' examination of slum conditions in the city which was made public in July of 1911. With a combination of statistics, photographs and interviews, the Hastings Slum Report shattered the comfortable and smug illusion of many Torontonians that their city was immune to the proliferation of slums similar to those in American and European centres. Subsequent civic reports on social ills in Toronto provide a grim picture of living standards for the ordinary family.<sup>11</sup> There are also a number of special studies, commissioned by Toronto City Council and available in the C.T.A., that reveal the major problems and responses of the municipality to a spectrum of difficulties in public health and social relief.<sup>12</sup>

In addition to records in the City of Toronto Archives, there are a number of sources relating to the provincial public health efforts of the government deposited in the Archives of Ontario. The majority of these documents originate from the post-1945 period. However, there is some material on the provincial public health nursing branch in the 1920s and the 1930s. The collection is composed in the large part of the field reports of



*The Laboratory of Toronto's health department effectively employed technology and the science of bacteriology to clean up the city's water and milk supply, a major source of contagious disease before 1914. (Source: City of Toronto Archives).*

the Department of Health's nurses. The files are arranged on a county by county basis in alphabetical order. This section is made up of twenty-two volumes and comprises eleven feet of records. Each volume contains standard forms, reports, correspondence, and surveys of health conditions in villages and rural regions across

the province. A variety of material designated as historical files include a selection of pamphlets, bulletins, regulations and photographs employed by the Provincial Board of Health (P.B.H.), the predecessor of the Ontario Department of Health, in the promotion of preventive medicine after 1910.

Unfortunately, there are no correspondence files from the era before the 1920s.<sup>13</sup>

To a surprising degree, the history of public health services in Ontario before World War I has been preserved in the reports of the Provincial Board of Health published in the Ontario Sessional Papers. They present an unbroken record which sheds light on the origins and development of public health administration in the provincial government. The value of these documents rests on the fact that they are remarkably frank accounts of the bitter opposition and general indifference of local politicians and the government to the P.B.H.'s attempts to establish basic public health measures such as water and sewage treatment plants or a clean milk supply in Ontario. The officials of the board, principally its first three secretaries, Peter Bryce, Charles Hodgetts and J.W.S. McCullough, were not afraid to engage in political controversy. Their reports have provided the researcher with a useful source of information on the slow evolution of public health in the province.

The annual reports of the P.B.H. are particularly helpful in unearthing facts about the nature of public health conditions in centres outside Toronto. They contain reports from health officials in the different cities, towns, and villages of the province. Such records provide statistics and descriptions of sanitary standards in Brantford, Kingston, London, St. Catharines, Ottawa, Hamilton, and Windsor in the period before the 1920s. The absence of reports from rural localities demonstrated the fact that contagious diseases were

generally regarded as an urban problem.<sup>14</sup>

Besides the reports of the P.B.H. on its yearly activities, there are some noteworthy investigations into health conditions in Ontario in the opening decades of the twentieth century. A provincial commission on the production and distribution of milk in 1910 documented the alarming state of unsanitary conditions in the dairy industry which was a major source of infectious diseases such as diphtheria, typhoid fever and scarlet fever.<sup>15</sup> Other studies examined the health and social problems caused by unemployment,<sup>16</sup> housing shortages for workers,<sup>17</sup> the care of the mentally retarded,<sup>18</sup> and the treatment of venereal diseases.<sup>19</sup> Most of these reports went beyond the confines of public health work, thus demonstrating the extent to which public health reformers had expanded their concerns in order to ameliorate the health of the common person.

The special reports on public health problems completed by Dr. Helen MacMurphy warrant some attention. MacMurphy was a prominent leader of the campaign to save the lives of babies threatened by the uncontrolled growth of the industrial city. In three special studies on the causes of high infant mortality in Ontario, she delivered a scathing attack on the "uncivilized" nature of the Canadian city.<sup>20</sup> She was a strong advocate of medical inspection of school children. Moreover, MacMurphy was a leading pioneer in the field of the diagnosis and care of the mentally retarded.<sup>21</sup> Between 1907 and 1919, Helen MacMurphy produced a yearly account for the province on the state of



*An example of how Toronto's health authorities utilized photography to document the existence of slums in the city, to raise fears concerning the effect of such conditions on children, and to promote the campaign for housing reform. (Source: City of Toronto Archives).*

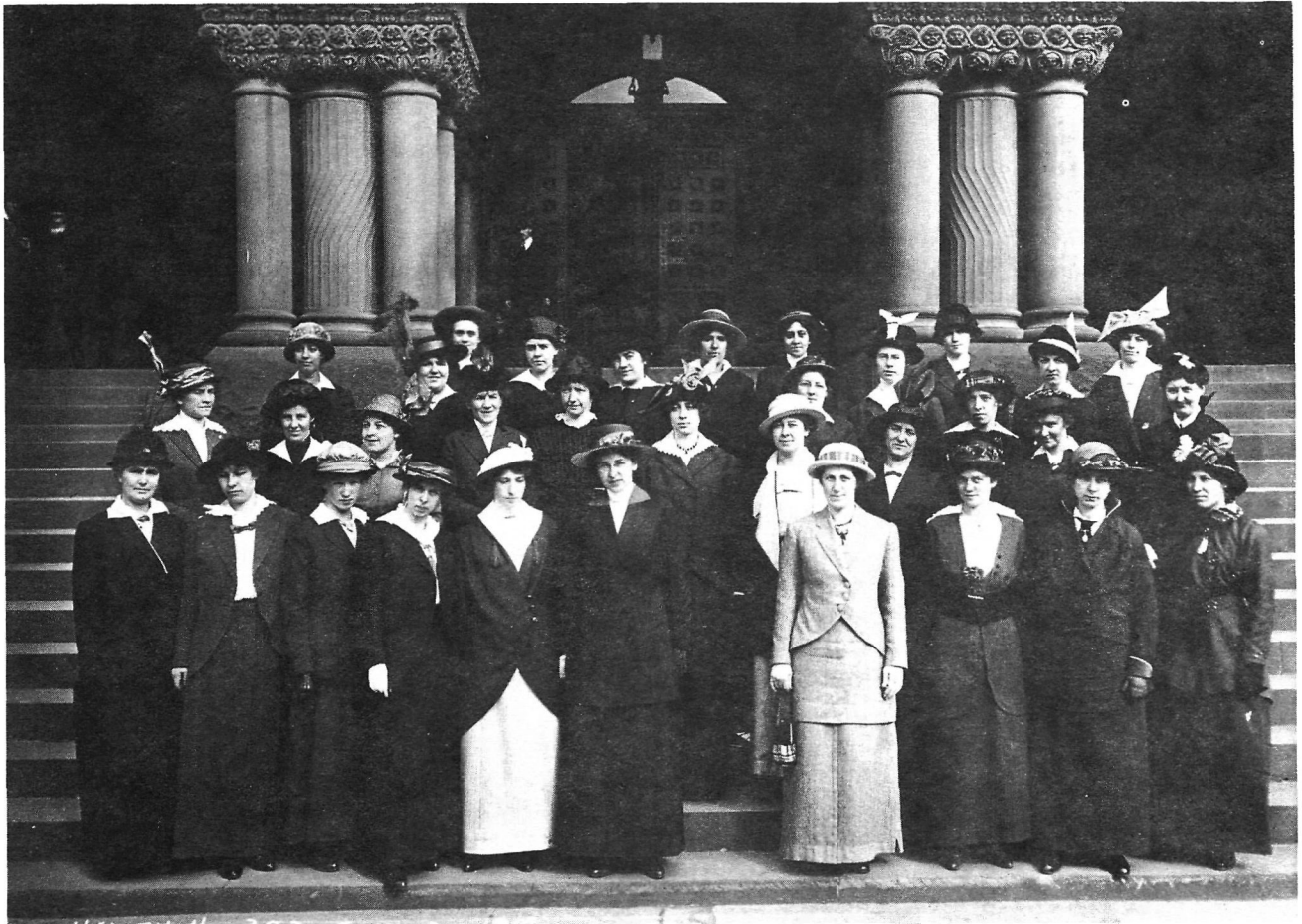
the "feeble-minded." In fact, they were attempts to persuade both provincial and municipal authorities to establish colonies for the segregation of those deemed to be intellectually defective. Interestingly, MacMurphy, along with other reformers, believed that such a policy would eliminate the mentally backward from Ontario society by the 1950s.<sup>22</sup> After

World War I, she left Ontario to work as head of the child welfare division in the new federal Department of Health. In going to Ottawa, MacMurphy was following the pattern of so many of that first generation of public health reformers.

The federal government's

restricted role in the field of public health services prior to 1919 is the major explanation for the absence of substantial material on the early development of health care in the Public Archives of Canada. The limited amount of federal public health work from that period is evident in the reports and records of a variety of services within different departments. In the decades after 1867, the Director of Public Health in the Department of Agriculture guarded the country against the importation of infectious diseases.

By the 1880s the increasing consumption of manufactured foods forced Ottawa to set up a testing laboratory under the direction of the Dominion Chief Analyst within the Department of Inland Revenue. With the advent of massive immigration in the first two years of the twentieth century, the Dominion began medical inspection to monitor the entry of immigrants in order to prohibit the landing of the sick and immoral (see the reports of the Department of the Interior after 1904). That same decade witnessed the federal



*Nurses in front of Old City Hall, 1914. After 1900, the number of Toronto's public health nurses grew rapidly, from one in 1910 to over one hundred by the early 1920s. The use of nurses was applauded internationally as a pioneering innovation in public health administration. (Source: City of Toronto Archives).*

authorities moving to prevent the spread of "deleterious drugs" by the establishment of a special division within the Department of Trade and Commerce to supervise the manufacture of patent medicines.<sup>23</sup> The historical researcher must consult the annual reports of these departments in the Sessional Papers of Canada as well as the departmental records of each of these departments in P.A.C. - a time consuming task - in order to uncover relevant documents. The lengthy records of the Department of National Health provide this type of information for the period after the Great War.

The last major source which must be considered by researchers interested in the history of the evolution of health policies in Canada is not deposited in any archives but it is nevertheless one of the more important records of the public health movement. In the issues of the *Public Health Journal*, later renamed in 1928 the *Canadian Public Health Journal*, some of the most useful background can be uncovered on the activities of health reformers before 1918 at the municipal, provincial and federal levels. Originally entitled the *Canadian Theurapeutist and Sanitary Engineer*, the *P.H.J.*, although owned by a few Toronto physicians, became the official organ of the Canadian Public Health Association in 1910 just after the establishment of C.P.H.A. which eventually took over the ownership of the journal in the later 1920s. It was a major platform for the dissemination of the gospel of preventive medicine throughout the Dominion. Articles and editorials during its first two decades reflected the zeal of an ambitious reform movement. They contain a large collection of statistics,

descriptions of social conditions, and accounts of the origins of private and government health care programmes which illuminate aspects of Canadian social history not available elsewhere.<sup>24</sup>

Despite the lack of many of the traditional primary sources, the historical study of social developments, institutions and professions such as the public health movement in Canada is possible by relying on the public record. Government publications, reports, photographs, posters, professional journals and newspapers when imaginatively explored are an unusually abundant field of historical information on social conditions and on the reaction and response of different groups in Canadian society to the onslaught of industrialization and urbanization. This conclusion may be simple common sense. It is also a reiteration of the old adage that there is a great deal more to most things than meets the eye.

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#### NOTES

- 1 Dr. John W.S. McCullough, Chief Medical Officer of Health, Ontario Department of Health, in an address before the Canadian Conference on Social Work. See John W.S. McCullough, "Housing and Health," in *Proceedings of the First Annual Meeting*, Montreal, P.Q., April 24th, 25th, 26th, and 27th, 1928 (Ottawa: Metropolitan Life Insurance Company, 1928), p. 191.
- 2 Geddes Smith, "Health Un-Ltd," *The Survey*, LIII, No. 1 (Chicago, October 1, 1924), pp. 43-45.
- 3 Leonard Bernard, quoted in

- "Praises America's Work for Health," *New York Times*, November 12, 1922, p. 16.
- 4 The City of Toronto has a helpful series of inventories which list the holdings in the different record groups.
- 5 See Bator, "Saving Lives on the Wholesale Plan," Chapter IV, "Guarding A City's Health," pp. 112-139.
- 6 Toronto, *Report of the Medical Health Officer Dealing With the Recent Investigations of Slum Conditions in Toronto Embodying Recommendations for the Amelioration of the same July 5th, 1911* (Toronto: no publisher cited, 1911), pp. 5, 9, 11, 13, 15, 19, 21 and 25, deposited in the City of Toronto Archives.
- 7 Consult the subject index for the photographic collection in the C.T.A. for a listing of pictures.
- 8 Janice Sandomirsky, "Photographs As Historical Documents: Urban Reform and the Toronto Health Department, 1911-1918, A Case Study," unpublished paper for Professor S. Houston, History 512, Department of History, York University, May, 1979, deposited in the C.T.A.
- 9 Cited in Charles Hodgetts, *Vaccination*, second revised edition (Toronto: L.H. Cameron, 1908), p. 6, deposited in the University of Toronto Library.
- 10 See Bator, "Saving Lives on the Wholesale Plan," Chapter IX, "The Public Health Crusade Against the 'Social Disease' and the 'Social Evil,'" pp. 242-67.
- 11 For example, see Toronto, *Report of Housing Commission, December 1918* (Toronto: no publisher cited, 1918), deposited in the C.T.A.
- 12 For example, see Toronto, *Social Service Commission Report Dealing with the Origin, Duties, Growth and Work Since November, 1912* (Toronto: no publisher cited, 1921), deposited in C.T.A.
- 13 A general review of this collection can be found in M. Starkman, "Preliminary Inventory of the Records of the Department of Health, Record Group 18, December 1967," deposited in the Archives of Ontario.
- 14 For example, see Ontario, *Sessional Papers 1913*, Number 20, pp. 441-72.
- 15 Ontario, *Report of the Milk Commission Appointed to Enquire into the Production, Care and Distribution of Milk, 1909* (Toronto: L.K. Cameron 1910).
- 16 Ontario, *Report of the Ontario Commission on Unemployment* (Toronto: A.T. Wilgress, 1916).
- 17 Ontario, *Report of the Housing Committee Including Standards for Inexpensive Houses Adopted for Ontario and Typical Plans* (Toronto: A.T. Wilgress, 1919).
- 18 Ontario, Honourable Frank Egerton Hodgins, *Report on the Care and Control of the Mentally Defective and Feeble-Minded in Ontario* (Toronto: A.T. Wilgress, 1919).
- 19 Ontario, Honourable Frank Egerton Hodgins, *Report of Venereal Diseases* (Toronto: A.T. Wilgress, 1919).
- 20 Ontario, Provincial Secretary, Helen MacMurchy, *Infant Mortality Third Report* (Toronto: L.K. Cameron, 1912), p. 72.
- 21 Bator, "Saving Lives on the Wholesale Plan," Chapter VIII, "Public Health Reformers and



- the Mentally Retarded in Toronto," pp. 218-41.
- 22 For example, see Ontario, Provincial Secretary, *Feeble-Minded in Ontario Twelfth Report for the Year Ending October 31st, 1917* (Toronto: A.T. Wilgress, 1918).
- 23 J.J. Heagerty, "History and Activities of the National Health Division of the Department of Pensions and National Health," *Canadian Public Health Journal*, XXVI, No. 11 (November, 1935), pp. 528-40.
- 24 For a lengthy listing of the variety of useful articles on the history of the public health movement in Canada contained in the *Canadian Public Health Journal*, see the bibliography in Bator, "Saving Lives on the Wholesale Plan," pp. 382-420.