## "YOUR SANITARY UNIT"

The history of the Board of Health reveals us, that the Province of Quebec was the first Province in Canada to establish a Board of Health. The first Banitary unit was organized in Beauce county in 1926.

The idea of such an organization has originated from the Metropolitan Life Insurance Co. This Life Insurance Co was alarmed at the rising number of deaths, especially in the infantile category in the town of Thetford Mines.

Therefore with a praiseworthy objective in view, even though they were financially interested, as these deaths were very costly to the Insurance Co. in this locality, the Insurance Co. asked, to what was known at that time, as the Provincial Public Health Service their permission to experiment by siting up a clinic for maternal and children hygine and home care. As personel, they appoint a doctor and a trained nurse, both working under the instructions of the Metropolitan Insurance Co.

The results were so encouraging that after three years of trial, the Insurance Co. was unable to meet the demands of the Public and passed the service over to the Provincial Government. The first Health Unit was established and many others followed. Paspé Followed the trend, as in 1932, a unit was set up.

The staff at that time was composed of:

F. X. Bosse, Medical Director.

Anita Lelièvre

Nurse.

Rose Gagnon

Nurse.

Amy Robinson

Nurse.

Joseph Beaulin

Health Inspector.

Fernande Lavoir

Secretary.

Thanks to the untiring devotion, the tenacious will power of these pioneers, your Health Unit has proved its worthfulness during the last 26 years although, it inerated frequently understaffed.

To-day the staff is composed of:

A medical director.

A hygienic educator.

Four visiting nurses.

A Secretary.

A Health inspector.

This is a great progress. But it is still inddequately staffed.

Now let us asked ourselves what is a sanitary unit.

A sanitary unit is the official organization of "Health", in the county where it exist. It is a small hygine office in which the staff takes the utmost care in protection and improving the health of the people.

What is health?

Health is, as per a definition of the world Health Organization, a complete state of physical, mental and social welfare of the people and not merely, absence of illness and maimmess.

According to Dr. Sylvestre: Health is a positif state of a person enjoying same, which is felt throughout his body. This state encourages him to emerge forth in activities of all nature. A healthy person is always in good humar and is prepared to meet all trials of Life.

We then can truly say that hygiene is the knowledge of health.

Its purpose is to protect and improve the health of the individual.

Public health has still a wider objective; it is also interested in the group. Its activities are to prevent disease, and improve health, so that will prolong life span of the human body and to obtain

a highest degree of physical, mental and social effecacity of the family. the community as a whole.

To reach these objectives many health services are required, for exeample:

- a) Diagnostic services.
- b) Treatments and care of the sick.
- c) Teaching of hygiene.

Which included the hospitals, clinies, sanatoriums, dispensairies, laborataries and health units, ets.

The health unit is a sound and educative service, because the public health problem is before all, the education and teaching hygiene and its knowledge of health is the main object and immediate intentions of all health services.

The teaching of hygiene must be carried on a large scale, if problems of the public health are to be known. A complete program is needed for this.

Preconceptional hygiene (Marriage courses and pre-nuptial certificates, etc.)

Maternal and prenatal hygiene.

Pre-scholar andiinfantal hygiene(It is the most important work of the visiting nurses).

The medical supervision of the student.

Dental Hygiene.

Mental hygiene.

The fight against infectuous sickness, diphteria, whooping cough, small pox etc... by immunisation and vaccination.

The prevention of tuberculoses: Education, vaccination by B.C.G. The early diagnostic, treatment at the Sanatorium.

The fight against veneria sicknesses.

The fight against cancer.

Nutrition and retional alimentation (a nurse should not make a visit in a home without mentioning at least one important factor of alimentation.

Encourage periodical medical examination and prevention of adult sickness.

Hygiene of sites.

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Heathful habitation and its essential needs: a supply of drinkable water, disposal of garbages, etc.

Medical care: to see that the sick persons, get treated.

by their doctor and that they follow the orders received.

With objectives as multiple and as necessary one as the other, we can say without fear that the visits at home by the visiting nurses are profitable, even if only one objective is attained at a time. We must not forget that hygiene teaching is slow work we must use patience and tolerence, give time and specially always keep enthusistic. Moreover we must fight prejudices, this is a daily fight.

Besides education, our health organism practices a sanitary supervision, directly on municipal services like removal of garbages filtration of water, supervision of milk and inspection of restaurants.

As your see, the field of action is large. The work is a long drawn out affair and results can be more or less delayed.

In sanitary units where sufficient qualified personel is available the reduction in infantile mortality and contagious mortality is greater than results in other sanitary units, although the rate of mortality has also been considerably reduced. Even tuberculosis has suffered a regression against the combined efforts of the Sanitary Units.

In the county of Beauce, the infantile mortality rate in 1926 was 121.5 per thousand living births. Let us look at the progress in 1950 the rate ofor the province of Quebec was 51 per 1,000 being a difference of 70.5

In Montreal where the population is dense, living in small overcrowded appartments, but where the health service is more complete, the personel sufficient, the infantile mortality rate was lonly 42.

It is the city of Drummondville, who was at the head in 1950 with an infantile mortality rate of 30. It is lower than the rate of the province. It is a sanitary unit, which is t e official organism of health in that city. There is still some work to be done, as in some places the reate is 82 deaths by 1,000 living births.

The tuberculosis mortality calculated by 100,000 of population dropped from 127.6 in 1926 to 13.6 for lung-tuberculosus and 1.20 for other forms for the first Six months in 1956.

The average life span which was in 1920 at 56 years old, 1940 at 63 years old, is now 67 years old.

Such results are eloquent and encouraging and they can prove the importance of Sanitary Units and their utility.

We must not forget that Health can be bought, and that each municipality can determine the rate of its mortality.

In concluding, les us say that the future of your Sanitary Unit is now certain, as it will be able in a very near future, recruit the members of its personel amongs its children: doctors, nurses, Sanitary inspector, they will all come from the Gaspé Coast.

The importance for this generation, is that your Sanitary Unit is yours, you must secure its replacements and its continuity.