THE
FLESHERTON ADVANCE

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The Vagabond Farmer

S. S. Quilcene, Between British Columbia and Washington State

(By Alex. Sim)

Sometime, somewhere this afternoon on board the Quilcine we crossed the International boundary line at a point many miles below the 49th parallel. At the moment of the crossing our Trans-Canada trip comes to a close. The rest is anti-climax, a three thousand mile dash across our sister nation back to Ontario. At the Immigration Office we had to give our race. I said Canadian.. There is no such thing as a Canadian race, I was told, there is a Canadian nationality, but no race. What extraction are your parents, I was asked. I said Irish and Scotch, so he wrote down English. Neither point was worth an argument, the latter possibly did violence to the rest of my ancestors. The former, about recognition of a Canadian race, is a problem to which my generation must soon address itself.

Since last week we have covered less than one hundred miles. We spent eight days in Vancouver with our little tent on the Spanish Banks for headquarters. We finally sailed from there to Vancouver Island with Floradora and all our possessions. Landing at Nanaimo we drove leisurely southward to Canada's westermost provincial capital, Victoria. Today we left Victoria and Canada, our next letter will come from Holstein. While it will take something less than a fortnight's furious driving for us to pilot Flora, the Ford, back to the garage. This letter, posted by air mail at Seattle tonight, will arrive in Toronto within fifteen hours, at a cost of six cents. Prior to 1885 there was no railway to our coast, and the journey we can make nonchalantly in fifteen hours today, was a feat accomplished by none but the most hardy.

In a decade Canada, the great sprawling waste of land and water, will have been drawn by air service into an area smaller than England of 1885, if calculated in travel-hours. What this will mean to the realization of Canadian unity no one can say.

A Right Little, Tight Little Island

A Canadian may step off his country to the right of Cape Breton, to the left of Vancouver Island in order to contemplate the Dominion objectively. Writing from Baddeck, Cape Breton, about eight weeks ago, you recall my description of that island, its insularity, its feeling of aloofness from us poor land-locked Canadians. Vancouver Island has the same aloofness, the same insularity; it, too, has lumber, minerals, fish; rather than Cape Breton Gaelic, you find here a peculiar type of Englishman. The type who leaves home to escape income tax, and British weather, he comes here to spend as little as possible, to live as long as possible, but ultimately to die. It is, a young man told me, an Englishman's graveyard. Victoria, he said, has the highest death rate in the world. Which you may believe if you wish.

Taken as a whole, the island is different. Rich in natural resources, rich mines, fertile soil, giant trees, waters teeming with fish. Most of its goods are exported; it imports most of the foodstuffs with the exception of truck. Its streets are narrow, the English accent is predominant, the people are settled with no desire for change. One youth said he had never been off the island, and never hoped to be. The world's best little island. What a contrast to the mainland of British Columbia! and the Prairies! There the streets are wide; non Anglo-Saxons predominate, fifty per cent. in Manitoba; the people are not deeply rooted, they will move in a day if something better shows up. As we saw in Saskatchewan, where the people are being so tragically expatriated.

But do not mistake the Island for some dreamy Valhalla, peopled by deceased Englismen. We went inland to see the logging operations where giant trees are felled and carried to the sea in trucks carrying over 10,000 feet in a load with logs over 100 feet long. We rode into seemingly impenetrable jungles on 100 horsepower caterpillars, to drag the logs out to the open. At the sea the logs were loaded on ships bound for New Zealand and Japan.

Here the Twain Shall Meet

Kipling was wrong, the East and West must meet, they are meeting. The British Columbia coast stirs a man's soul. Land of opportunity, gateway to the Farther West. Here the ships of two score nations ply our waters. We have a market in the millions of the Orient. Here is a future for Canada: to develop trade in Asia, to cultivate friendship among potential enemies.

In Vancouver there is a great Oriental population, Chinese and Japanese. They have their own daily papers, churches, fraternal societies. On occasions, when their native lands were at war, there has been trouble. Finally, their leaders met and decided to live agreeably together in Canada. It is the genius of Canada to find a place for every race within it. First with the Indians, then the French, then with the Continental Europeans. Now the Oriental.

Yet we refuse these industrious and loyal races a vote. Unless we place a trust in them, how can we exact a ful neasure of loyalty in return.

Among Those Not Mentioned

The difficulty in writing these letters is not to find material to write about, but to decide what to leave out. So we must leave unmentioned the fishing fleet, the canning factory, our fish dinners, that bowl of clam chowder, an enjoyable day at the Prince of Wales Fairbridge Farm School, where British children are brought from the slums to be trained for Canadian farm life, and I haven't a line for salt water bathing, or mountain climbing, or how we washed Manitoba mud off Flora. Flora, being the Ford, it was her first bath, and she looked beautiful.

My next letter will be written from Holstein, but it may not appear in the next issue. Between then and now we are citizens of Canada, without race, in transit in the United States of America.

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ONTARIO

The Ontario Department of Health

Presents a Statement by

The Academy of Medicine, Toronto, on

"INFANTILE PARALYSIS"

(POLIOMYELITIS)

Realizing the anxiety which exists in the public mind today with respect to the increased prevalence of Poliomyelitis ("Infantile Paralysis") in Toronto and other parts of the province, the Academy of Medicine of Toronto, which represents more than one thousand physicians, called a special meeting of its Council, September 1st, to review the whole situation. To this meeting were invited representatives from all departments of medicine interested in this subject.

At the conclusion of the conference, during which time all of the pertinent facts of the present situation were presented and discussed, it was felt that, in fairness to the public, an official statement should be made to set forth the facts exactly as they exist. To this end, a committee was appointed to prepare and issue an official statement, which follows:

Poliomyelitis ("Infantile Paralysis") is a communicable disease. It is definitely known that it is caused by the entrance into the body of a minute form of life known as a virus. It is known also that this virus enters commonly through the upper part of the nasal tract. There is no evidence that the disease is conveyed by flies or domestic animals.

When an outbreak of the disease occurs, healthy persons as well as those ill with the disease are found to harbour the virus in the secretions of the nose and throat. The disease is, therefore, spread through the contact of persons one with another.

Usually the virus occasions only a mild illness but sometimes the virus enters the central nervous system, which may result in paralysis. The majority of adults are not susceptible to the disease.

Present Situation

While the number of cases reported in Toronto is greater than in any previous outbreak of this disease, and there is no reason to presume that the incidence rate is likely to decline within the next two or three weeks, it must be borne in mind that not 25% of these cases show any evidence whatever of paralysis. Furthermore, among those developing paralysis, the majority eventually will recover complete use of their paralysed limbs. It would appear, therefore, that while there is every reason for the public to view the present situation with concern, there is no justification for undue alarm or hysterical behaviour.

According to figures computed by the Department of Health, Ontario, to date, there are estimated to be 750 cases in Ontario, of which 285 have occurred in the City of Toronto. Of this number, 212 cases have been admitted to the Riverdale Isolation Hospital, only 54 of whom developed some degree of paralysis. There were 11 deaths in this group. Statistics of a similar nature apply to the Hospital for Sick Children, which has received its cases not only from Toronto but from other parts of the province.

Control Measures

These include the strict isolation of all persons ill with the disease and the quarantine of those who have been in immediate contact.

In as much as it is not known who are or are not carriers of this disease, it is advisable to reduce to a minimum, contact with other people. In other words, keep out of crowds. As children are particularly susceptible, it is most important that they be kept as far as possible from mingling with other persons. For this reason, the opening of the schools of Toronto has been deferred and the Department of Health of the Province of Ontario has recommended to parents that they see to it that their children avoid attendance at theatres, playgrounds, bathing pools and beaches and other places of amusement where children congregate. The Academy agrees with the provincial and municipal health authorities that the responsibility for the control of the activities of children is primarily the duty of the parents.

The Department of Health of Ontario has completed within its own organization plans whereby serum for the treatment of this disease is available in any part of the province upon the request of the attending physician.

Nasal Spray

Experimental work with animals indicates that Poliomyelitis can be prevented by spraying the extreme upper part of the inside of the nose with a harmless solution of zinc sulphate. This was discovered during the past year. To date, its value in the prevention of Poliomyelitis in humans is not known. To be in any degree effective, the spray must be applied high up inside the nose. This can only be done with a specially constructed atomizer and by a physician thoroughly familiar with this type of work. The application of this or any other spray by an ordinary atomizer or to the lower part of the nose is quite useless. The possible value of the nasal spray properly administered is being determined at the present time in Toronto.

The Council of the Academy of Medicine of Toronto endorses the attitude adopted by the provincial Department of Health and the local Board of Health in respect to measures designed to control the present situation. We would respectfully suggest that the general public will best serve its own interests by endeavoring to follow the advice which is being given by these health authorities.

Chas. H. Hair MD

PRESIDENT OF
THE ACADEMY OF MEDICINE
TORONTO

H-1