

A talk to the Thursday
Evening Club, Boston.

My subject is the need of a state wide organization for the health of its citizens. We can see its beginnings, here a little and there a little, And my dream is the development and co-ordination of the resources of the community, of public officers and philanthropic interests, so as to form a net work of helpfulness for health, so close in its meshes that no person shall fall through unaided.

Interest and activity in health is manifest today increasingly. Of public health work as most generally considered, the fight by health officials against germs, in field and laboratory, I shall not speak. And I shall mention by title only that new association which helps us, practically without price, so to live as to ward off especially the dangers from degenerative diseases which do so easily beset us, as we age. The manifestations of health work of which I venture to speak are chiefly of its extension into homes and neighborhood life, are bits of the educational service, which, when put together with many others, may make perfect the public-health picture.

Medical inspection in public schools began in Boston in 1894. It has broadened from detection of contagion to include health matters of pupils, teachers, other employees and school housing. Last year, a very large majority of the children had defects, if we include teeth, and four-tenths had other defects. For treatment of teeth, nearly 1200 children went weekly to a dental infirmary. One half of these went to the Forsyth, under a plan of co-operation between it and the schools. As to eyes, one child in eight had defective vision. Obviously the possibilities of effective treatment of children in school are very great, to give them the best start in life,--if community resources are well developed and used. The last Public Health Bulletin issued by the State Commissioner of Health, that of November, gives a careful study of the present condition of medical inspection in the public schools of Massachusetts. It shows very unsatisfactory conditions in many schools. Again, a study of families,* all over the state, of mothers with dependent children, who are

* Survey, July 24, 1915.

aided by the public under the law of 1913, shows much lack of health which seems preventable.

Do you know that Framingham, so we read, is being watched by the whole world; that the world will follow her example, if she succeeds- in a community health demonstration. This is not newspaper notoriety but is from recent publications of the Framingham experiment, which is promoted by the National Association for the Study and Prevention of Tuberculosis, and made possible by a grant of \$100,000 by the Metropolitan Life Insurance Co. The committee in charge represents those and other agencies; the director* is an official of the National Association named. There is a local committee of leading citizens of Framingham. The services of many physicians and nurses have been enlisted, without pay. The work is only partly done, as yet. Early in 1917, a census was made, to find sickness or disease. The number of families included was 1,455; of persons, 6,582. Nearly a half of these families were believed to be economically in good condition. The rate of sickness found was 6+%, higher, says the report, than sickness rates in other cities. This may be due to the extensive publicity and intensive work, the director suggests. This census prepared the way for a careful physical examination, of persons consenting. This examination included 742 families, 1,687 persons. There were Italians, Irish, Poles, Jews, but chiefly Americans, so-called. They were believed to be wholly typical of the community. Of the 1,687 individuals examined, 82% were found to be in need of medical or surgical advice or treatment. Seven hundred and thirty-nine were school children with 155 dangerously enlarged, infected tonsils and 119 cases of advanced teeth decay. Of tuberculosis cases, 71 were discovered, and were put under treatment. All the ailments discovered in the examinations were ten times the sickness rate of the preliminary sickness census. The director suggests that persons fearing illness are more likely than others are to agree to examination. But the figures, even then, are striking enough. And 84% of the ailments found were preventable by known but unused means. Among the results of the examinations were such "special health interests" to be followed up to remedy, as better food;

*The director of the Framingham Health Demonstration is Dr. Donald B. Armstrong, Framingham Mass.

elimination of flies, mosquitoes, rats; disposal of sewage; removal of swampy conditions. The Community Health Station in Framingham is continuing its drive. More persons are being examined through it. And it is urging those who were examined, in its campaign of last Spring, to go to their own physicians now, for re-examination. Notable already are the progressive steps in organizing and vitalizing local agencies and forces, as parts of the health war. So it is reaching homes, schools, industry; the Board of Health and other public officials; the hospital; the Anti-Tuberculosis Society, the Civic League; and societies for material relief and aid. A local medical club has been formed, managed by a committee of five, in order that no jealousies should arise from the election of any one doctor as president. The nursing activities of the town, which include nurses of a half-dozen specialties or sources, are being co-ordinated. One chief aim in the Framingham demonstration is to show how a whole community can be roused, with reasonable pride, to work together against sickness and for health.

We should notice other interesting experiments, or experiences of proved value, in Massachusetts; which are illustrations of the beginning of our net-work of helpfulness for health. Much of the anti-tuberculosis campaign is an old story, but not so is the first care and follow up work connected with our State hospitals for the insane and inebriate and with our schools for the feeble-minded. Out-patient clinics are scattered all over the State, open at stated times for free advice to any persons who are suffering from illness of mind or fear of it, or from the drink habit. These clinics for persons suspected of feeble-mindedness will advance the day when there will be knowledge of every feeble-minded person in Massachusetts, for the end of help to the persons, and protection of the public from the increase of that poison. Again, we should note the health center recently opened at Hyde Park by our Instructive District Nursing Association, by which is ensured the care of doctors, nurses and skilled attendants, as may be needed for families of moderate means as well as for the poor, and by which are prevented unnecessary visits in the homes by uncoordinated agencies.

* For information on this Hyde Park Center see Miss Mary Beard, Director of the District Nursing Association, 561 Mass. Ave. Boston, Mass. Instructiv

We should note, also, the pre-natal instruction carried on under the Women's Municipal League of Boston.

The State Board of Charity is now urging a law to require registration and inspection of all hospitals and dispensaries, in order to protect ignorant persons from imposture.

You recall the physical examination of Harvard Freshmen by Dr. Lee, with its results not merely in treatment for ill but in encouragement to the well.

Such lessons as these which we are learning at home are re-enforced by words from all over the world. For instance, in a certain Ohio town, a "Bureau of Community Service" is trying to bring better living into unenlightened homes. The death-rate of infants and of persons from infectious diseases is high above the general average for Ohio. It is pathetic, says the head nurse, to see how eager the mothers are to learn of proper care of children and how inadequate is our force for instruction. In Detroit there has been made a study of 2000 cases of child-birth with reference to care. There was little pre-natal care or use of trained nursing; a mid-wife was used in over a third of the cases, a doctor in few. In many, the mothers were expected to be up and at housework within two or three days. And this lack of care exists in many families which are fairly well-to-do. It comes primarily from lack of knowledge and of an organized service. Such facts as these, gathered widely, have just led our Federal Children's Bureau to suggest a plan for supplying information about child-care to mothers, in smaller places especially, by financial help from the national government; very much as information for better farming, for raising cattle, pigs, hens, is being given by federal help through State agricultural schools. Very interesting if not startling, are some of the data given in this 1917 report of the Children's Bureau. For instance, the Bureau has made a study of infants born in one recent year in eight industrial cities where births are registered. Thirteen thousand babies were included. One quarter of all the fathers earned less than \$550 a year. The death-rate of the babies of those fathers was one in every six. One-eighth of the fathers earned \$1,250 or more a year, and the death-rate of their babies was one in sixteen. Of all the families only eight mothers refused to co-operate by giving information.

The same report tells briefly of the work done in Europe, especially in England, to protect mothers and babies. Further details of this may be found in the paper read by Dr. Grace L. Meigs, the section on Health of the National Conference of Charities and Correction, now the Conference of Social Work, held in Pittsburgh in June 1917. (See Proceedings of the Conference soon to be published, or a reprint from the American Journal of Diseases of Children, for August).

The U.S. Bureau of Labor Statistics has just issued a report on medical, surgical and hospital treatment for employees in industry. It covers 431 establishments, 375 of which, with 1,204,010 employees, have some provision for medical treatment. The most stimulating word is that, of the many employers who require physical examination of employees, several report efforts to help applicants to correct minor defects which are found. One firm, employing many, reports that one quarter of those turned down at first are afterwards taken. Another firm reports those first turned down as 7% of applicants but those finally turned down as only 2%.

These last illustrations of better things lead to a larger one still. We are all somewhat familiar with compulsory compensation of employers to employees, for disability or death in industry. This Workmen's Compensation, only some seven years old in this country, has spread over 37 of our 48 states. Five of those enacted such law, and others improved their laws, in 1917. This compensation recognizes that if human life and health are made of money value, then industry generally will not scrap - heap men but will protect them, for the good of everybody. For many years, we have heard of social insurance, enforced by the State, in Germany; and for several years, in England. Last January, Governor McCall surprised the conservatives of Massachusetts by advising the Legislature to enact laws for old age pensions and health insurance, compulsory. For health insurance he argued that, without it, the working man and his family in sickness must become objects of charity or must bear alone the burdens. That means that many workers try to lighten their load by doing the very things which make it heaviest in the end, - they work when ill, and worry, and go without proper medical care. Whereas a system of general, compulsory sickness insurance of small wage-earners

well arranged, would mean a mobilization of reputable physicians of the State for concerted effort for the general health. A State commission on this subject will soon report. The important points for us to note are that a like scheme of insurance, only voluntary, is already administered by many mutual benefit bodies; that the workers who need insurance most, because of small earnings and lack of knowledge, are least likely to enter it voluntarily; and that the participation of the State gives a desirable economy and stability of administration. Such an insurance system, well devised in details, should tend to improve the diagnosis and treatment of the sick poor, partly by preventing unfit doctors from practicing upon them. A special investigator of the American Association for Labor Legislation who has spent nearly a year in England studying the national insurance system there, reports that a very large proportion of physicians who practice among the poor have joined the "panel" from which are selected the physicians for insurance work; and that some physicians have been induced to locate in areas where the poverty of the people had before made medical practice on a charitable basis chiefly. In a system of compulsory health insurance, the chief end to urge is increased stress on prevention of illness, on health, by the contributions in money and interest by the three elements,- the workers, the employers, and the public through the State government.

Such health insurance, now urged increasingly, across the land,- Massachusetts and California have commissions on it,- is bound to receive impetus from a recent notable act of Congress, the Military and Naval insurance provisions of October 6th last. This law is indeed notable when we compare it with the prodigious and somewhat improvident pension legislation touching our former wars. The new law was framed after careful study of workmen's compensation, social insurance, re-education of the disabled soldiers and sailor. The leader in it was Hon. Julian W. Mack, formerly justice of the Juvenile Court of Chicago. It provided, beside allowance to the families of soldiers and sailors, to which they must contribute from their pay, and disability and death allowances, a life insurance feature. All the men in service are urged to take advantage of it. The government of the U.S. pays the difference in cost

between the usual insurance premiums which the men would pay and the high premiums necessary because of greater risks in war. And the government carries on itself the insurance business involved in the plan!

This topic brings me to my conclusion,- the ways in which the war is proving that an organized, vigorous, persistent campaign for health in our states and their subdivisions is absolutely necessary. Several millions of our young men are being examined physically, over half of them, we hear, to be sent home because of some physical lack. The many who are going across seas to be mowed down in war are the best physically.

But the war is not as much creating as it is accentuating tremendously many of our needs as a people. The Commissioner of Health of Mass. has just appointed a special committee on Child Conservation, with workers in the eight health districts, and co-operation with many voluntary forces. Again, a bill has been prepared by a special state commission, to provide systematic physical education in all public schools. We have been hearing much of the dangers of venereal disease to soldiers and sailors. What of it in civil life, with its harvest of incapacity! Our states are soon to vote on the proposed amendment to the U.S. constitution, for prohibition of liquor. In the small bit of Boston, Charlestown, there have been some seventy licensed places where liquor can be bought. We have read in recent papers that liquor dealers are agreeing not to sell even to the companions of men in uniform. Recently, an interested person* counted during ten minutes, after work closed in the Charlestown Navy Yard, the number of artisans and laborers who went out of one of the Yard gates into one saloon opposite. There were 90. Do such conditions concern us much?

Do we not all agree that, for war or peace, our communities must develop a sane effective system for protection and promotion of health? Why not as much as public education! If we began to think of it as a dream, we can claim now to be at least awake, perhaps partly out of bed, to work for its realization. And those of us who stay

* Miss Morgan, A.C. Secretary

at home, during this awful war,- we can help, for reaching the great end in such ways (beside doing well our usual tasks) as working out a state program for health. We are told that a leading purpose of the war is to make the world safe for democracy. What of the corollary to that, a proposition of which we hear less, but a work which is to be done here at home,- must we not make democracy safer, more fit to govern!