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MEETING OF THE ADVISORY COUNCIL

THE Advisory Council of the Milbank Memorial Fund held its second annual meeting in New York City on November 15, 1923, with almost its entire membership present. The purpose of the meeting was to review the progress of the demonstrations in Cattaraugus County and in Syracuse and to consider a tentative plan for the proposed New York City demonstration, which as shown in a later section (p. 39), had been carefully developed by the Technical Board and submitted in advance to the members of the Advisory Council for their individual criticism. While it is not possible to present here all of the interesting and inspiring suggestions brought out in the discussion, this issue of the Quarterly Bulletin has been enlarged to include extracts and summaries of some of the speeches.

The members of the Advisory Council were welcomed on behalf of the Fund by Edward W. Sheldon, president of the Board of Directors. The meeting was presided over by the Chairman of the Council, Dr. William H. Welch, Dean of the School of Hygiene of Johns Hopkins University. A tribute to the late Dr. Hermann M. Biggs, former Commissioner of Health of the State of New York,

and member of the Fund's Advisory Council and Technical Board, was presented by Dr. T. Mitchell Prudden and adopted as a minute of the Council.

SUMMARY OF THE PROCEEDINGS

EDWARD W. SHELDON, *President, United States Trust Company of New York:*

Mr. Albert G. Milbank, who presided at the first meeting of the Advisory Council, has asked me to express, on behalf of the Directors and Officers of the Milbank Memorial Fund, a welcome to you tonight and our most cordial greetings. I like to feel that all of us, hosts and guests, are thinking of that noble woman whose gracious hospitality we are now sharing and who devoted her life and her talent variously and constructively to the great cause of making the world a better place for other people to live in, and to whose prescient judgment our gathering here tonight owes its cause. I shall always treasure in my heart, with grateful pride, the faithful and inspiring friendship with which she so long honored me, and may I ask you to rise and drink to the dear memory of Elizabeth Milbank Anderson?

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Since our last meeting a year ago, this Council and the whole State of New York has suffered a tragic loss in the death of Dr. Hermann M. Biggs, one of the original members of this Council and of our Technical Board. Dr. Prudden has kindly consented to prepare for our minutes a tribute to Dr. Biggs. Owing to the condition of his voice, he feels unable to read this himself, so the secretary will present it to the Council. . . .

HERMANN M. BIGGS, since its organization a member of this Council, died on June 28, 1923. Born at Trumansburg, N. Y., in 1859, of English descent, he graduated from Cornell University in 1882 and in the following year from the Bellevue Medical College. After his internship in Bellevue Hospital and a year of medical study abroad, he was made Director of the Carnegie Laboratory in New York and for several years was a teacher of various phases of science relating to medicine, and finally became Professor of Medicine at the Bellevue School.

For twenty-two years he served on the Department of Health of the City of New York.

It is difficult for those who did not live through the period of great enlightenment which the new knowledge of bacteria and their significance in infection ushered in, to realize how utterly changed was the outlook for helpful service in the prevention and treatment of disease, and how fundamental and far-reaching were the problems crowding in upon the pathway of medical research. It was in this period, back in the closing years of the last century, that Dr. Biggs found many of the sources of his inspiration, and framed his steadfast purpose to bring as speedily as might be the new acquisitions of science to the service of mankind.

In all the phases of sanitation and disease control and prevention in the great city, to which the new outlooks in science gave promise of help, Dr. Biggs, as an officer of the Health Department was ready with new projects for advance just as soon as the fitting hour arrived.

In 1892 he organized a Division of Pathology, a new feature in health administration. He established a Muni-

pal Laboratory for the early detection on a large scale of infectious germs, the first in the world, which presently became a model.

He initiated the crusade for the prevention of tuberculosis and set about the education of the people and the medical profession, almost as soon as the tubercle bacillus had been discovered. Visiting nurses were secured for tuberculous patients; the Otisville Sanitarium was created; the Riverside Hospital was adjusted for the hopeless, and finally after some years of constructive pioneer educational work, notification of tuberculosis came without a murmur, even from the scores of eminent physicians who at first would have none of it. And his eager interest in the rescue of mankind from the universal scourge never wavered, his sturdy efforts never flagged.

The Bureau of Child Hygiene took form and grew under his inspiration; he initiated milk inspection; he was a helpful member of the Advisory Board at Quarantine. He early recognized the importance of the antitoxin for diphtheria and started its manufacture in the new laboratories, so that it might be available at moderate cost.

In 1902, Mayor Seth Low called Dr. Biggs to fill a new office in the Health Department, that of General Medical Officer, which he held for eleven years.

When finally Dr. Biggs laid down his tasks in the service of the City of New York he was called by the Governor of the State to assist in the preparation of a new Health Law under which he was presently appointed Commissioner of Health and Chairman of the newly organized Public Health Council.

The Health Department of the State was speedily re-organized. It swung abreast of the new currents in science,

entering a period of active and far-reaching usefulness. A new and remarkable *esprit de corps* sprang up in the Department and spread to all phases of its activities, and the Health Department of the State of New York soon became an example for many commonwealths. Great laboratories materialized, reaching in their ministrations every corner of the State. New forms of service developed, the old took on new life.

But the vision and activities of Dr. Biggs had a wider range than the purlieus of the great metropolis or the health interests of the State. He wrote or inspired many scientific papers on subjects relating to the public health. He was a leader in organizations for the promotion of human welfare the world over. He was a member of many learned societies. He ministered to the poor and friendless in several hospitals. He received high honors and wide public recognition of his service from many sources. He was head of a Commission sent by the Rockefeller Foundation to study tuberculosis in France. He was a member of the Foundation's War Relief Commission. He was for a time Medical Director General of the League of Red Cross Societies in Geneva.

And withal he was a successful and well beloved practicing physician.

New projects in the interests of health seemed always forming out of the wide reaches of his knowledge and experience. If the summons to advance sometimes seemed audacious to his associates, sooner or later they usually realized that he had chosen wisely the occasion and the hour. His judgment of public opinion was sound. He was not readily baffled by opposition. But he could always wait. The potent and varied forces of education seemed

ever in his consciousness and formed the basis of the great forward movements in public welfare which he dreamed of or carried to triumphant conclusions.

He knew human nature; he readily won unswerving loyalty; he was trustworthy, far-seeing, wise. And his devotion to his fellow men, whether as public administrator, educator or physician, was untiring.

He cherished an eager interest in the establishment of the Milbank Memorial Fund. He shared generously in the counsels of its officers and friends. Here as elsewhere his great knowledge, his experience, and the wide range of his vision, gave to his service as counsellor a priceless value.

He was a great leader, a good citizen, a steadfast friend, a benefactor of mankind.

MR. SHELDON: We have all listened to this beautiful and discriminating tribute to Dr. Biggs. Those who are in favor of adopting it as read, and spreading it upon the records of the Council, will kindly manifest it by rising. . . . The minute is unanimously carried.

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I cannot refrain, on behalf of the Directors of the Fund, from uttering a word of admiration and gratitude to the individual members of the Advisory Council who have so generously promised to give us the aid of their experience and the benefit of their criticism in developing and carrying on this interesting experiment in humanitarian effort. Mr. Kingsbury has been good enough to prepare a memorandum setting forth the roles of the Advisory Council, the Technical Board, and the Directors, and he has, I think very wisely, had it printed so that each member may

take a copy with him.¹ You are all so highly experienced in so many fields of social endeavor that we are embarking confidently on this new voyage of discovery in search of perhaps a fairer golden fleece. Now I have the satisfaction of yielding the floor to your distinguished Chairman. Several years ago I remember that I had the advantage of his wise counsel in connection with another important effort for the well-being of this city, so that I feel tonight deeply convinced of the privilege I have in sitting at his feet now.

WILLIAM H. WELCH, M.D., *Dean of the School of Hygiene, Johns Hopkins University*, Presiding:

I was unfortunate in not having been able to attend the meeting a year ago, when I was elected Chairman of the Advisory Council. I esteem it a very great honor, indeed. Speaking in behalf of the membership of the Advisory Council, Mr. President, I am sure that every member of the Council considers it a very great privilege to be permitted to serve on this body. While it is a pleasure to be able to contribute what we may in advice, many of us here who are active in the cause of public health and social endeavor shall, I am sure, derive as great a benefit from, as we can possibly bring to, the deliberation and work of this great undertaking.

I have been asked to say a few words on "The Significance of the Health Demonstration." It seems needless before this audience to dwell upon this theme. It is a natural expression of the thoughts and activities of the founder of the Milbank Memorial Fund, Elizabeth Milbank Anderson. A woman of very broad vision, she was

¹ This memorandum appears on p. 35, under the title "The Advisory Council."

convinced that the best philanthropic activity is preventive and constructive, not merely palliative, relief-bringing and meeting only the emergency of the moment. I doubt whether any enterprise could have been conceived which is more in harmony with her thoughts than this one.

The methods which are to be adopted, or have already been adopted in carrying out these demonstrations, will serve as a model for similar undertakings. No new machinery is being created. The work is being done through the cooperation of the constituted health authorities and existing agencies. A demonstration such as this, which has as one of its main objects to show how public and private health endeavors can with effective results be coordinated to a common end, is well worth while even if nothing more come of it.

Of course, no one can, at this early stage, entirely predict the significance of these demonstrations. Whether large results are to be achieved is not problematical. Much has already been shown by the Framingham Demonstration. It is very fortunate that we have had the services of Dr. Donald B. Armstrong, executive officer of that demonstration, as a guide in entering upon this one. Again, in the anti-tuberculosis activities of the New York Association for Improving the Condition of the Poor there is enough to give a sure basis for undertaking this step. What at first may seem very incidental, even by-products of an undertaking, often turn out to be in some way the most significant. While in the anti-tuberculosis movement, for example, the emphasis lay primarily upon the control of tuberculosis, we now see that this is fundamentally a general health problem, and that it cannot be treated successfully as an effort directed solely toward the prevention

of this one disease. While we can be sure of very significant results, we can be equally confident that they will be in directions which no one at the moment can fully realize. While I should not venture to predict, I feel quite certain from all experience in public health efforts that these results—accessory, if you like, incidental, if you like—will loom very large when the work is completed. I have every confidence that the demonstrations are going to be successful.

Those interested in the prevention of disease and the promotion of health are heartened that such men as those which constitute the Board of Directors of the Milbank Memorial Fund have lent an ear to the appeals of public health men that an opportunity be given to apply the knowledge which we now possess to the prevention of disease, and the improvement of health. This is the first effort made on a varied and large scale, in which there is going to be anything approaching an adequate application of existing knowledge about the problems of public health. And how many open problems there are, upon which light surely will be shed by these demonstrations!

That great results are to follow from this work, which will serve as a model, advancing greatly the cause of public health, not merely in New York State and in America, but in the world—I essay to speak in behalf not only of the members of the Advisory Council, but I think I may speak also for those interested in public health (and particularly public health officials) the world over.

We are to have the opportunity of hearing reports on the rural and urban demonstrations that are now under way in Cattaraugus County and in Syracuse, and on the proposed New York City Demonstration. The up-state

demonstrations are under the general operating agency of the State Charities Aid Association, and it gives me great pleasure to present Homer Folks, who will tell something about the progress there.

HOMER FOLKS, *Secretary, State Charities Aid Association:*

The up-state demonstrations are now ten months old in the County of Cattaraugus, and about six months old in the City of Syracuse. It was fundamental, in the philosophy and planning of this undertaking, that whatever was done should be thoroughly grounded in the institutions and the life and public affairs of the community in which the work was to be done, and should not be regarded as a strange something imported into the community. I shall try, in the short time allotted me, to indicate what has been done in these localities towards securing a sound basis, sound basic machinery for what other public health activities may thereafter be built upon it, leaving it to the representatives of these localities to speak of the more particular things which have thus far been done.

In the development of the public health policy of New York State and in the State's health work since 1913, it has become increasingly evident that a single community, town or village, is too small to permit a health administration isolated therein to be effective. Step by step we have moved toward the possibility of a larger unit; and two years ago we passed in this State a permissive law by which a county might establish its own health board and have its own health officer. It was in our thoughts that at some future time, in some perhaps distant and indefinite period, some county might be moved to take that step as an example to the other counties. It has been the good

fortune of this State that the first step taken in the development of this demonstration in Cattaraugus County has been, as you know, to act under that permissive law and to establish a County Board of Health there. A County Health Officer has been appointed there also, the only county health officer in the State of New York, and we have him with us here.

A very important phase of public health work is that connected with the schools. In approaching this problem in Cattaraugus County, we were confronted with the individual school district, the logical unit of school health work, but one which is still smaller than the town or village.

Although there was a crying need for a wider unit for the school health work in the rural districts, no provision was made by the law for either an individual district unit or a larger one. As a result, without having any law, warrant or authority, or anything at all except the good offices of the Milbank Memorial Fund and some of its resources, there was created in Cattaraugus County an office of county superintendent of school health. Without any legal status, this official called together a few months ago the trustees of all of the rural and village schools in the county, and invited them to establish a County Council of School Health. Under this Council, the trustees were to see that every child received an adequate medical examination. Fifty-three hundred of these children, living in the least accessible parts of the county, have already been examined; and letters have gone to their parents telling of the defects discovered. For the first time in this State, we have here really effective county-wide harmonious administration of the health of school children.

No less apparent, as far as we could see, was the primary

necessity for the co-operation of voluntary organizations of citizens. There was a County Tuberculosis and Health Association in Cattaraugus County (one of a sisterhood of sixty-four such county units in this State) with an excellent history of accomplishments to its credit, but unable with its limited resources really to effect a firm vital connection with every hamlet, every village and every school district there. By providing for that organization a very efficient, competent, mature executive secretary, who also serves as the county public health education official, this wide contact has been made possible.

Now, passing a moment to Syracuse. The situation there is quite different because in that city of 175,000 people we have had for years a well-organized division of school health in the department of education, and also we have had a county health association. There are difficulties, however, even in our cities. It is the habit of New York municipalities to elect a new mayor every two years and it is the rule and not the exception to change them. It is, I am sorry to say, the rule and not the exception for an incoming mayor to select a new health officer. With no guarantee of continuity of office and without adequate remuneration, it has not been possible, therefore, to get full-time health officers in our cities. That was the condition in Syracuse, but there we have at least helped to build up the basic machinery by providing as an aid to the health officer, the full-time services of an administrative assistant.

The chief work in Syracuse has been to build up the particular services (tuberculosis, contagious diseases, public health education, the work for children of pre-school age, etc.), of which Dr. Thomas P. Farmer, Dr. John L. Heffron and others will speak. It has been a pleasure,

too, to help the Department of Education there round out its program and to demonstrate how a more complete service of nursing and of home visitation can benefit school children in such a city. Here, too, a public health education expert has been added to the staff of the local Onondaga County Tuberculosis and Public Health Association.

In both of these localities (fully in Cattaraugus County and largely in Syracuse, but in the process of further development there), we have secured in a short period of time the basic machinery upon which may be established, as rapidly as the communities can assimilate new ideas and new methods of work, every phase of public health activity which may be desired of the public health authorities, school authorities, or volunteer agencies.

DR. WELCH: I can't imagine anyone more interested in these demonstrations than a health officer in whose province they are going to take place and I am sure that the Health Commissioner of the State of New York fully appreciates his good fortune in that regard. It is a very great satisfaction to introduce Dr. Nicoll, who will speak to us on "The New York State Health Department and the Demonstrations."

MATTHIAS NICOLL, JR., M.D., *Commissioner of Health,
State of New York:*

These demonstrations come at a very opportune time in the progress of the work of the State Department of Health. As I have said on many a previous occasion, it is my personal opinion that under the present organization we have about reached our limit in the methods of control of disease and the improvement of health in the State of

New York. It has always been necessary to administer the affairs of health in the fifty-seven counties of the State, practically from Albany. That was very important in the beginning but, as I say, we have reached the limit of results by any such method. I think we who have had any experience in rural public health work, are agreed that the only way to accomplish efficient work is by moving the direct unit of control nearer to where the work is to be done. In other words, to establish the county unit. We were making very little progress until this opening, which is but one of the benefits of this demonstration, was brought to us and resulted in one of our progressive rural counties adopting the step which Mr. Folks has described.

I am glad that he emphasized the inspection of the schools. It is not only the finding of defects but the taking of steps to remedy them that is important; and there is nothing which will result in more good from this county demonstration than the proper inspection and thorough physical examination of school children, with attendant provisions for correcting defects.

Through its Director of the Bureau of Vital Statistics, Dr. Otto R. Eichel, the State Department of Health has been, I am glad to say, of some assistance to the demonstrations in doing statistical work. The Department has loaned one of its epidemiologists to assist the Syracuse Commissioner of Health, Dr. Thomas P. Farmer, as his deputy, and one of his nurses to aid the Cattaraugus County Health Officer, Dr. Leverett D. Bristol. We have done what we could and are ready to do as much as we possibly can to further this work. We are agreed that it is the most important step that has been taken in the State for the advancement of public health.

I think we are rather prone to speak of a demonstration of this kind as accomplishing results which can be measured statistically—by taking out a slide rule and figuring out death rates. I doubt very much whether at the end of four or five years our statistics will show any surprising number of lives saved in Cattaraugus County, for example. But there are many things that cannot be measured by a statistician, which make for the health, welfare and happiness of the community, county or city, which has a good health administration. We must take that into account and not be discouraged if, as the months go by, we cannot determine very definite results in the lowering of the incidence of disease and of deaths from disease. I do not mean to say that these results will not show, especially in the cities. If Syracuse, for instance, does not eradicate diphtheria within five years, I shall be very much disappointed. I feel that very strongly and would like to make a prophecy that it will come about.

I look forward with a great deal of hope and assurance to the success of these demonstrations. They will succeed because they must succeed. I cannot conceive of any greater disaster than the lack of their success.

DR. WELCH: We are now to hear about the Cattaraugus County Demonstration. I was much interested to learn that Dr. Leverett D. Bristol, Commissioner of Health of the State of Maine, had been willing to transfer his activities from a state commissionership to a county in the State of New York. That shows what county health work in New York, as contrasted with that of states in other parts of the country, holds in the way of opportunity for

progressive health officers. It is a great personal pleasure to present Dr. Bristol.

LEVERETT D. BRISTOL, M.D., *County Health Officer and Director of the Cattaraugus County Health and Tuberculosis Demonstration:*

In the first place, let me say that the demonstration is being received with whole-hearted anticipation and favor by the people of Cattaraugus County. The clinical services, for example, have developed a very marked appreciation, some clinic visitors voluntarily traveling as many as thirty or forty miles for examination. Our records show that the clinics were first attended chiefly by persons brought in by the nurses, but as the clinics have become established, people have come to them largely as a result of publicity.

Again, in the County Board of Supervisors we have a splendid spirit of co-operation. The Board has under consideration the increase of its 1923 county health budget of \$9,300 to \$16,000 in 1924, and there are encouraging prospects that they will take this action.²

We find also that the President of the County Medical Society and most of its members are in harmony with the Cattaraugus County demonstration, as is the medical profession generally throughout the county. The Secretary of the Society is a member of the County Board of Health. As a result of sending three local physicians to the Trudeau School of Tuberculosis at Saranac Lake, a small group of the younger medical men are meeting monthly for the discussion of health problems.

That the local authorities in the towns of the county are

² Since this meeting, the Board of Supervisors of Cattaraugus County have granted this appropriation. See p. 44.

co-operating in the work is shown by the fact that quarters for three of the six district stations that have been established have been provided rent-free. In one or two of these localities we anticipate that we will receive local financial assistance in the maintenance of the stations located there.

With such local co-operation as these instances indicate, we fully expect the Cattaraugus County demonstration to be a success. We expect that our work will demonstrate that the county is the logical unit for carrying on rural health work. Meantime, we hope to inaugurate many activities for the promotion of the general health of the county. To mention but one or two of our many objectives, we hope to develop courses for the local health officers, post-graduate courses for physicians, and a unit for the training of nurses in rural public health nursing. A course for special training in rural public health nursing is particularly needed.

DR. WELCH: We are now to hear about the Syracuse demonstration and I will first call upon the Health Commissioner of that city, Dr. Farmer.

THOMAS P. FARMER, M.D., *Commissioner of Health, Syracuse, New York:*

First of all, I feel that, as the official head of the Health Department of Syracuse, I cannot let this opportunity go by without expressing on behalf of the official city government and of the City itself, our appreciation to all here that the demonstration for a middle-sized city was located in Syracuse. I wish to assure you that the City is greatly interested in the project. We feel also that it is a great

privilege to be invited to participate in a movement which has had its origin in the work and interest of the philanthropic woman who has been so beautifully described by Mr. Sheldon, and which has received official direction from a man who had such noble ideas about public health and welfare as he whom Dr. Prudden has described.

As Mr. Folks has remarked, the Syracuse demonstration has been going on for only six months and we are just beginning to make progress. Our chief work thus far has been with tuberculosis. Several nurses and doctors have been added to the personnel of the Tuberculosis Bureau, and by opening new clinics we have been able to reach a larger number of people than heretofore. Clinics held in various foreign sections of the city, under the auspices of the Onondaga County and Public Health Association, have been very well attended and have brought to light a number of cases of tuberculosis which were unknown before.

At the present time, we are conducting in Syracuse a course of instruction given by prominent specialists on tuberculosis. This course consists of two hour clinics at the Onondaga County Tuberculosis Sanitarium, followed by a lecture given elsewhere.

We are making great improvement in our methods of record keeping in the Department of Health. Previous to the establishment of the demonstration, this has been one of the weak points of the health administration. Recently, we sent a representative of the Department to study the methods of recording used in the State Department of Health and in the New York City Department, as one step in bettering our record keeping routine.

It is, of course, important that the Department of Health be assured that patients in the community suffering with

communicable diseases are receiving adequate medical attention and supervision. The Department can have this assurance about patients who are being treated by private physicians, only when these physicians report on such cases periodically. It is not so difficult to get a doctor to report such a case in the first instance as it is to get him to continue to report on it. To prompt his co-operation in Syracuse, we have adopted the procedure of telling the physician that if at the end of any two-week period he has not kept the Department informed that such a case is still under his care, we will assume that he is no longer controlling it and that he is willing to have a public health nurse visit the patient. In such instances we assume, of course, that if the patient has changed doctors, the new attending physician will have reported the case to the Department.

Dr. Nicoll has said that he wants us to eradicate diphtheria from Syracuse. We have already cut it down to half the rate it was last year. We hope that our newly adopted milk code will be a model for other cities in the State. We have put into it everything the New York City milk code has and, I believe, a few improvements besides.

DR. WELCH: There is nothing more characteristic of the modern public health movement than its progress in the public schools. It is very important that we should hear from a representative of education and I have pleasure in calling upon Mr. Hughes.

PERCY M. HUGHES, *Superintendent of Public Instruction, Syracuse, New York:*

Dr. Farmer has expressed the appreciation of the City of Syracuse for this demonstration. May I say to the

Board of Directors of the Milbank Memorial Fund that we in the schools esteem most valuable the work which has been done there through the public schools. Our corps of medical attendants has been increased by the addition of a supervisor of health education, a chief medical inspector, an assistant inspector, five nurses, and by dental hygienists. We are getting a teacher of hygiene and sanitation, who will teach health principles to the children in the schools.

A day and a half after school began last fall, all of the children in the grade schools of Syracuse, 19,670 of them, had been given medical examinations, and 141 cases of more or less serious contagious disabilities had been discovered. During the month of October, 1923, the nurses visited 937 homes of school children, whereas during the corresponding month of the preceding year we had been able to visit only 574 homes. Through the instruction of the children and through the influence of the nurses in visiting the homes of parents, we believe that we are reaching also the children of pre-school age, and that this work of reaching the younger generation of the City of Syracuse will have its fruitage in the years to come.

DR. WELCH: Nothing is more important in this demonstration than that it has the sympathy, interest, understanding and support of the practitioners of medicine, the general medical profession. I think, therefore, we are very fortunate in the opportunity of hearing from a distinguished representative of the medical profession in the City of Syracuse. I take pleasure in presenting Dr. John L. Heffron of the Medical School of Syracuse University.

JOHN L. HEFFRON, M.D., *Dean Emeritus, Medical School,
Syracuse University:*

I think that no memorial could be devised that should so signally honor the memory of a great and good woman as one devoted to the betterment of the health of the public. The members of the profession of medicine in Syracuse are profoundly grateful that the City was chosen for a health demonstration. We are unanimously behind the work of our Department of Health; and we are to a man behind this demonstration. Our most difficult problems have grown out of the lack of financial resources. The assistance of the Milbank Memorial Fund has put courage into our hearts. But we shall have to proceed slowly; not attempt too many things at once; and not push improvements faster than they can be assimilated.

Commissioner Farmer has told you some of the things we have done. He has not told you, however, what I think you ought to know. He feels, and so do all of us who consult with him, that there should be in Syracuse a Director of the Demonstration, who has such a reputation for thoroughness of training and for successful administration of health work that he will command the respect of the members of the profession of medicine in Syracuse. Dr. Farmer has given much time to this demonstration. He has and will administer the regular work of his office in a way to meet the full approbation of his confreres. But a special director is needed, who with the advice of the Technical Board, will inaugurate new measures and suggest improvement in present methods. He is needed to co-ordinate these measures and methods with those already functioning in the department of health; he is needed to lead in the health education of the people; he is needed to

keep our volunteer organizations and our people in touch with the progress of the work of the Demonstration; and he is needed as a method of communication with our neighbors concerning the accomplishments of our demonstration. I believe that no expenditure could be made that should insure so certainly the success of the Syracuse Demonstration.

DR. WELCH: It has been gratifying to hear these reports on the rural and the urban demonstrations. We are eager to hear about the proposed New York City demonstration, which, complementing these, makes this project national in application and significance. The experiences of those who had been active in the Framingham Demonstration and in the work of the New York Association for Improving the Condition of the Poor were among the influences which led the Board of Directors of the Milbank Memorial Fund to enter upon these demonstrations. Bailey B. Burritt, the General Director of this Association, has contributed a great deal in thought and effort to the framing of the plan proposed for the New York City demonstration. I have great pleasure in introducing him to you.

BAILEY B. BURRITT, *General Director, New York Association for Improving the Condition of the Poor:*

From the first, it was felt that New York City offered a great opportunity for a health demonstration. Its problems are typical of those in many large urban areas, where lives a sizable percentage of the population of the United States. The rest of the country is in the habit of looking, more or less, to this city for leadership in different avenues of its life—and because New York City and New York

State have been so peculiarly leaders in this field, I think it looks here, in part, for guidance in its health work. Most of the public health movements that are expressed in voluntary national health organizations have had their origin in and are located in New York. Then, too, there are here a number of well developed local voluntary organizations, with activities already well co-ordinated with the work of the public health authorities. For reasons, of which these are but a few, we decided that, although there were many obstacles to overcome, it was well worth while to undertake a demonstration in New York City.

Careful consideration has been given to the question of where in the City the demonstration should be held. Several months were spent in analyzing the situation, studying social and statistical data pertaining to ten areas in the Boroughs of Manhattan and the Bronx. A study was also made in the Borough of Brooklyn. These surveys led us to the conclusion that the area bounded by 14th Street and 63rd Street, Fourth Avenue and the East River presents the greatest opportunities for a successful metropolitan demonstration.

This district has a population of 216,000, of which 37 per cent. are foreign born, as compared with 35 per cent. foreign born in the Greater City. The two largest foreign racial groups in the area are the Italians and the Irish; the former constituting 25 per cent. of the foreign born population, and the latter, 19 per cent. Our studies show that the age grouping in the district is fairly typical of that in the entire city. There is also in the district quite an interesting distribution of income ranges, including those whose families are among the poorest and the richest. The birth rate is practically identical with that of Manhattan. The

death rate is somewhat greater than that of this Borough, being a little over 17.6 there as against 14.3 in all of Manhattan. Infant mortality is similarly higher and the death rate from tuberculosis somewhat greater than in the entire Borough.

The district's social service facilities are fairly well developed and it presents exceptional opportunities for medical training—a factor which is considered very important by the Technical Board of the Milbank Memorial Fund, which originally recommended the selection of this area.

The plan outlined for the development of the demonstration in this district presupposes that all of the activities there of the volunteer organizations and of the public health department can be co-ordinated and concerted towards the ends in view. If the plan doesn't mean this, it fails to meet the purposes we have in mind. It is a pleasure to report that in what contact we have had with the heads of the local official health department and the volunteer organizations, we have found a sympathetic interest in the plan and a responsive determination to co-operate in making it a success.

DR. WELCH: In listening to what the various speakers have told us about these demonstrations, a great many questions may have arisen which one would like to have discussed. I think that it is a very wise provision that an item appears on the program entitled "General Discussion." I am going to ask Dr. James Alexander Miller to open this part of the program.

JAMES ALEXANDER MILLER, M.D., *President, New York Tuberculosis Association:*

It was with a very peculiar pleasure that I have listened

to Mr. Burritt and realized how far we have progressed since last year, when it was my privilege to speak at the first meeting of this Council. I have come more and more to the belief that there is no place in this country, and perhaps no place in the world, where a bigger success can be made of a health demonstration than in this City. It is heartening to realize that we are now actually to start on the undertaking.

There occur to me certain advantages which will come from this New York City demonstration, and which might be emphasized at this time. A project of this kind must be thought of largely in terms of co-operation. We have found that co-operation has already been given in the rural county and in the urban demonstrations. There is no place where this is more necessary and more difficult, and withal more possible, than in New York City, where we have already come to learn, in part, how to co-operate.

One of the broader aspects of the metropolitan demonstration is that it will afford extraordinary opportunities for a training school and educational center, for those who are actively engaged in public health work and for those who are students in it.

There is no place where better facilities are at hand to offer training and field work to physicians themselves, and to health officers, social workers and medical students.

Again, careful consideration will need to be given to the interpretation of results as they are attained in these demonstrations. We expect to have very accurate book-keeping, and in interpreting the facts recorded, the Advisory Council can no doubt be of very material aid. This is a very important part of the demonstrations because it is

thus that their findings will be made most useful to the entire country.

One of the opportunities in these demonstrations, and particularly in that in New York City, is offered in showing not only how far we can successfully apply methods known to prevent disease and to promote public health, but how far we can progress in attaining new methods—how far we can apply what we know, and how very materially we can widen the horizon of the knowledge we now have. In other words, we have here an opportunity for good organization. If we are also to have expert direction, we must realize the necessity of depending upon scientific medicine. That will mean research, not only in the medical laboratory but in the broader social laboratory which such a district as the one chosen for the metropolitan demonstration will especially offer.

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After this discussion of the plan for the proposed demonstration in New York City, which had been submitted to the members of the Advisory Council before the meeting, the body adopted the following resolution, introduced by Dr. William H. Park, Director of the Bureau of Laboratories of the Health Department of the City of New York:

RESOLVED, That the following expresses the consensus of opinion of the Advisory Council in relation to the proposed New York City Demonstration:

1. That the plan of organization as revised by the Technical Board in the light of criticisms and suggestions submitted by the members of the Advisory Council is soundly conceived and meets with the approval of this body.

2. That it is desirable to undertake the proposed demonstration as soon as satisfactory co-operation of public and private agencies concerned is definitely assured; a detailed scheme of organization, which guarantees unity of operation, is developed and subscribed to by the co-operating organizations involved; and effective leadership is known to be available.

* * * * *

DR. WELCH: We are to listen now to one who, I think, delights in criticism, but who has been one of the great forces in furthering public health movements in America. Dr. Lee K. Frankel, who has organized the health activities of the Metropolitan Life Insurance Company, has, I think, introduced a new and very important idea in life insurance. Dr. Frankel is also Chairman of the National Health Council, a very promising and already very active and potent organization.

LEE K. FRANKEL, PH.D., *Third Vice-President, Metropolitan Life Insurance Company:*

This is one of the occasions on which I have absolutely no criticism to make. There have been times possibly when I have questioned whether New York State, with its tremendous health organizations, was the state in which a demonstration of this kind should be carried on. If I ever questioned that, my doubt was dispelled yesterday when, coming down on a train, I happened to be reading one of the Rochester papers, one I believe of considerable standing in the community. In that one issue I must have seen from fifteen to twenty advertisements of patent medicines

and proprietary articles, representing every imaginary cure for every imaginary disease. It struck me that that was rather indicative of the type of health education to which the great public, even in the State of New York, is now too much subjected. It strengthened my conviction that those who constitute this public are, after all, the ones who must be reached and gotten back of any health movement. I think that one of the primary objects of these demonstrations will be to bring the subject of health right down to the people, to show them in their own terms what scientific medicine means, what the health movements are, and, in other words, to cultivate a health habit among them. I am delighted that the project is going along so nicely in these three different sections.

The Framingham Demonstration is now in its last year. Probably nothing is more significant in the result there than that practically every activity undertaken in the demonstration, and every suggestion made, will be taken over next year as a part of the community's current practice.

DR. WELCH: Probably no one is in a position to get a better perspective of the national significance of these demonstrations than the head of the Public Health Service. I think it is most gratifying that the chief of that Service, which has come to occupy a position of primacy among welfare agencies in the country, is one who represents the cause of public health so effectively and so worthily. I take pleasure in presenting Dr. Cumming, the Surgeon General of the United States Public Health Service.

HUGH S. CUMMING, M.D., *Surgeon-General, United States Public Health Service:*

There has never been, I think, such an opportunity for

forwarding the public health movement in this country as is that now presented by these demonstrations. Such a provision of counsel, composed of leaders in the several forms of public health activity, has not before been brought together on a similar project. The Public Health Service will follow particularly the county health movement to learn from it lessons which, by application to their own problems, may help other states.

The demonstration in the area selected in New York City will be looked upon with great interest by the other large cities of the country. A great deal has already been in evidence which might be applied to cities of less than metropolitan size. The plans have been well thought out; there are very definite objectives; there is co-operation with the official health organizations, and there is counsel from leaders in all of the avenues which combine to make a comprehensive public health program.

These undertakings have been well called demonstrations, for with such guidance they could hardly be called experiments. Yet they are to be more than demonstrations, because if they are simply manifestations of problems already thought out, they are more or less failures. I feel particularly gratified that I am to associate with others on this Council in undertaking the pioneer health work, which is also to be a feature of these projects.

DR. WELCH: I do not believe that Dr. Livingston Farrand can make a greater contribution to public health in this country than he has made through his pioneer work in tuberculosis. He is to address us on the subject of the demonstrations.

LIVINGSTON FARRAND, M.D., *President, Cornell University:*

I hope that sight will not be lost of the great significance of this choice of activity by the Milbank Fund. After all, as I understand it, the Trustees of this Fund were not hampered as to the lines along which to direct that particular benefaction. It was only after the most careful thought on their part and after getting all the advice they could in all related fields, that they finally chose this series of health demonstrations as promising the greatest contribution to the welfare of humanity which they could see within the lines of their broad trust. Now, that fact would lead one to imagine that this was about the last word to expect in the way of promising results in this field, but as I have been sitting here thinking of what it was that led to this decision, it seemed to have been quite inevitable that we should have come to the agreement that what was needed was the application and demonstration of existing knowledge.

It seems to me that we are dealing here with a profound principle of education. It is not only a fact that public health, human vitality, lies at the very basis of our modern civilization; it is an admitted fact that following the war the problem of human vitality became an absolutely fundamental problem in the economic rehabilitation of society. That has, of course focused public attention upon the importance of this particular problem. Moreover, in the development of modern civilization, it has come to be equally apparent that about the most difficult thing with which the world has to contend is the lack of application of knowledge which is already in possession of the experts. Our enormous advance in scientific knowledge of every kind has been the great characteristic of the last fifty years.

There is no field in which that has been more strikingly evident than in the fields of medicine and of medical science. When we view the technical advances that have been made since the days of Pasteur, when we see, as we do, what would result if these discoveries were fully applied, and when we recognize that practically the only obstacle in the way of that application is recognition on the part of the public of those facts and of the possibilities of their application—then we begin to see why demonstrations of this kind were recommended, after sober consideration by the best counsel obtainable, as being the most promising way of attaining results in human welfare to which a trust, like the Milbank Fund, could be devoted.

We are primarily interested in the field of health, but I do not think that we want to lose sight of the fact that what we are doing here reaches far beyond the simple problems of health and the prevention of disease, and even the building up of human vitality. Any demonstration that can make good in this particular is going to reverberate far beyond its particular technical field. It is going to be felt not only in the field of health and in the whole field of social work, but it is going to be a tremendously effective factor in the maintenance of stability in the somewhat tottering situation in which the world finds itself today. There is no greater contribution, to my mind, that could possibly be made in any field by any trust, than this new undertaking by the trustees of the Milbank Fund.

DR. WELCH: As the last speaker, we are to hear from Dr. Haven Emerson, former Commissioner of Health of the City of New York and now of the College of Physicians and Surgeons, of Columbia University.

HAVEN EMERSON, M.D., *College of Physicians and Surgeons, Columbia University:*

We in the medical profession are nowadays getting far enough away from disease to think in terms of the preponderating group of healthy persons and to bend our efforts to make life consciously, instead of accidentally, successful for them. It is not death rates, but health rates, that we are concerned with. Nobody is really interested in death rates; people are interested in life. We can influence mothers with our education because they are interested in the life of their children. We can interest children because they are intensely interested themselves in whatever happens to their own careers. We can teach the sick when they are sick, we can teach communities when they have contagious diseases, but the average healthy person is not interested in health as long as he has it.

I believe we should estimate the results of the work that is under way not in terms of reduced death rates, reduced sickness, but in the certainty and continuity of family life. We see now, it seems to me, the family and the maturing child as our goal. The studies of the New York A. I. C. P. and the results of the anti-tuberculosis work in New York has shown that family life, upon which our whole civilization depends, has been made more secure by health. A demonstration of our confidence that science can save the family is one way, in addition to those which have been shown, of practicing our faith in the knowledge at hand. I should like to suggest that we make a study, so far as possible, of the extent of family breakdown. We can measure our health work, as we will, by the number of families that we prevent from breaking up. Certainly the first thing sickness brings into the household is the risk of

breaking down the family and if we have so diminished the hazards of sickness that a smaller number of families in Syracuse and in Cattaraugus County and in New York City are broken down temporarily or permanently, we have accomplished something more than the reduction of disease.

Dr. Prudden has referred to the clearness of Dr. Biggs' vision, when he conceived the possibility of eradicating diphtheria. We are approaching the threshold of the elimination of other diseases. We are looking forward, as we believe, to the elimination of tuberculosis. If this can be done, and we think we can accomplish it in this particular way, it is worth buying, worth spending money for.

In these demonstrations, we must have certain indices of our results that are not expressed in entirely the way that we have been accustomed to in measuring success in health work. As Dr. Nicoll has said, it is not the immediate results we must promise ourselves. It is the more remote, the more intangible, the ancillary results—not only the reduction of sickness, but the protection of family life, the securing of education and the development of character. The objective of school health work is not only to remove and reduce defects, but to deliver healthy children at the school to learn. I should say that the measure of success of this new effort will be determined by our ability to eliminate all of those elements that go to prevent the child from attending school because of low vitality and from receiving effective training while there.

We should measure our results also by the reduction in the annual bill for the purchase of the patent medicines to which Dr. Frankel has referred. If we haven't reduced these sales in the next five years, we will not have corrected

those present vicious and malignant forces in the community which use the power of advertising to prey upon ignorance and stupidity.

Again, I suggest that these demonstrations will have failed unless the people in the communities where they are conducted are taught to do as much for the protection of their own health as is now done for them. By that I do not mean merely the taking over of this work by the community, as is being done in Framingham. I should like to see more individuals in these communities take care of their health as they would a private investment. I should like to see them willing to spend as much on the health of their children as they are ready to spend on their own, to do as much for their children's health as the school systems and health departments will have done.

A radical change is needed in the common attitude towards public health service. It has been thought of as something which chiefly concerns our public and private health agencies. It must be made a part of our annual personal budgets and not be left entirely to the makers of the municipal, county and state budgets.

Our health departments, moreover, must be kept non-partisan. We shall not have succeeded entirely within these communities until they are convinced of the necessity of keeping their public health activities as much out of politics as they have their departments of education.

Finally, as I have suggested before, our problem in no little degree is to develop character. It was Dr. Osler, I believe, who in commenting upon the treatment of tuberculosis said that it is what is in the head more than what is in the lung that determines the outcome of the individual case. In any health activity we undertake, we must con-

stantly deal with character, with the reaction of the individual to the possibilities of life. I cannot think of the vision and faith of Mrs. Anderson and of the support that she gave to the A. I. C. P., in which she was so much interested, without believing that she would wish us to consider this not only a movement of science, but one of religion, an attempt to alter American character, to make a permanent impression upon the manner of life of our nation.

The Advisory Council

The Advisory Council was created by resolution of the Board of Directors of the Milbank Memorial Fund, May 22, 1922. Invitations to serve on this Council were issued to thirty-one men and women—recognized leaders in public health and social work, prominent business men and economists interested in improvement of public health and promotion of the general welfare.

The Council held its first meeting at the Hotel Commodore, November 16, 1922, with Mr. Albert G. Milbank of the Memorial Fund in the chair. It organized by electing Dr. William H. Welch chairman and John A. Kingsbury secretary.

With the maturing of the plans and the broadening of the demonstrations program, which originally dealt largely with tuberculosis, this Council has been increased until it now embraces a body of forty-two advisors, representing every important field of public health. In creating this body, the Board of Directors stated that the Council would be called together occasionally for criticism of the program and of plans and procedure, and that to its members would

be submitted from time to time reports of progress for such suggestions as they might offer.

In other words, the Board of Directors does not intend to make great demand on the time of the members of the Council nor expect them to attend regular meetings, but it does desire that each member take seriously the invitation to criticize the plans as they formulate and to make suggestions for the effective development of this health program.

The meeting of the Council on the evening of November 15, 1923, was the first since its organization, a year ago, when its members met to receive the report of the preliminary work relating to the selection of the county and the city for the upstate demonstrations, and to consider the program which had been the subject of months of careful study by the Technical Board, copies of which had been submitted in advance to the Council members.

Beginning with the present calendar year, a Quarterly Bulletin has been issued by the Milbank Fund for the purpose of keeping the members of the Advisory Council, and others especially interested, fully informed of the progress of the demonstrations.

Obviously it is not practical to call together so large a group as this Council for frequent conference. Therefore, a Technical Board was created which is responsible for maturing the plans for the demonstrations. This Board is expected to keep in intimate touch with the development and progress of the several demonstrations, to advise the Directors with reference to the selection of localities best suited for demonstration purposes and in regard to the designation of operating agencies, and finally to make recommendations with reference to the distribution of func-

tions and funds to the various participating agencies, official and voluntary. Naturally, all plans are subject to the approval of the Board of Directors of the Fund for they cannot delegate their trusteeship, but the Directors look to the Technical Board for recommendations and to the Advisory Council for general criticism of these recommendations.

RECENT PROGRESS IN THE DEMONSTRATIONS

Activities of Boards and Committees

The Committee on Bovine Tuberculosis of the Advisory Council, consisting of Dr. Theobald Smith, Dr. Veranus A. Moore and Dr. William H. Park, has had several meetings and has played an important part in shaping the work of the local official and voluntary agencies which are endeavoring to eliminate bovine tuberculosis from Cattaraugus County. A Statistical Advisory Committee has recently been appointed by the chairman of the Advisory Council. It includes Professor Walter F. Willcox, Professor Robert E. Chaddock, Dr. Louis I. Dublin, Dr. Otto R. Eichel, Miss Jessamine S. Whitney, Godias J. Drolet and Dr. W. H. Guilfoxy. A Nutritional Advisory Committee, consisting of Dr. Linsly R. Williams, Professor Henry C. Sherman, Dr. Haven Emerson, Dr. Charles Hendee Smith, Miss Flora Rose and John C. Gebhart has also been appointed.

The recent meeting of the Advisory Council has been reported on in the earlier pages of the Quarterly Bulletin. With one or two exceptions, all of the members were present, and there was very inspiring participation by most of those in attendance in the addresses and discussion. At