THE EFFICACY OF THE SCHOOL MEDICAL EXAMINATION

THE school medical examination has become so routine a health procedure in the public school system that any challenge of its efficacy almost smacks of heresy. Yet recently its efficacy is being questioned more and more frequently. A few references to the chorus of doubts may be pertinent:

Franzen, in his studies of school health procedures, arrived at the conclusion that "thorough examinations by the physician are very desirable but very rare."

Downes, reporting upon a study of defects and diseases as discovered through medical examinations and as revealed by sickness experience in a group of children in the Olean, New York, schools, pointed out:

If the fairly common assumption were true, that a medical examination, as a method of revealing hidden defects and impairments, is an adequate means of appraising the health of the individual, one should expect a fairly consistent and high correlation between the existence of defects or impairments and the incidence of actual sickness during a period of 2 years in a group of school children. This was not found to be the case in the experience recorded.²

In England, doubts are being expressed as to the value of school medical inspection as conducted there. Cronk,³ in a recent article, asserts that the existing routine, in which every child is examined thrice in its school life, is wasteful of the physician's time, is superficial, and is unnecessary for most children.

Kerr, in his review of Cronk's paper, comments that the paper "observes in practice conditions of failure predicted at the outset of the school system, when the pursuit of school hygiene was abandoned for medical inspection 'on the broad basis of public health.' "4

The attitude of the healthy skeptic as regards this public health pro-

¹ Franzen, Raymond: An Evaluation of School Health Procedures. American Child Health Association School Health Research Monograph No. V., p. 72.

² Downes, Jean: Sickness Records in School Hygiene. American Journal of Public Health, November, 1930, p. 1204.

³ Cronk, H. L.: School Medical Inspection. Public Health, 1930, 48, pp. 253-7.

⁴ Kerr, James: Bulletin of Hygiene (London) July, 1935, pp. 422-423.

cedure is expressed by Burke, writing from Canada in a recent article. He said:

It seems to me that on this continent the guiding minds in school medical inspection are, after twenty years, still trying, by the mere finding of physical defects in school children, to justify their work and its subsequent cost to the public in both the upkeep of the machinery and the direct cost to the families in correcting the defects so found. I think the time is overdue for taking the machine apart to see how it is constituted, to determine carefully its efficiency, and, above all, to see whether it is headed in the right direction.⁵

The cost of medical inspection or examination is so gigantic that the procedure calls for scientific appraisal of its value. Probably there will be few who would demand its abolition. Some of the more important aspects of the question which need clarification and evaluation are: (1) improvement in quality of the medical examination itself; (2) the determination of when and where it can be used to real advantage; and (3) its proper place in a program of school hygiene and its coordination with health services to preschool children as well as to school children, including health education and the training of teachers in hygiene and public health.

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METHODS AND MATERIALS OF HEALTH EDUCATION

It is difficult in the rapidly growing field of school health education to keep pace with modern trends. Teachers left with the responsibility of developing effective programs often find a conflict between methods by which they, in their own school days, were "taught health" and the present-day philosophy that health education is the "sum of all experiences which favorably influence habits, attitudes, and knowledge relating to individual, community, and racial health." They are confused with the vast amount of health educational material that comes in their direction and often lack bases for properly evaluating it in terms of the well-rounded growth and development of the whole child.

⁵ Burke, F. S.: The Preschool Child and School Medical Inspection. *Canadian Public Health Journal*, April, 1933, p. 170.