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A NEW PUBLIC HEALTH PROGRAM
for NEW YORK STATE

Discussed at the Ninth Annual Meeting of Boards of Counsel



THE ninth annual meeting of the boards of counsel of the Milbank Memorial Fund was held in New York City in conjunction with the New York Health Conference on March 19th and 20th. These meetings were the occasion for review of the New York Health Demonstrations, which terminated as such on December 31, 1930, and for consideration of the present and future significance of these demonstrations particularly in relationship to the new public health program of New York State. The outstanding subjects of discussion during the two-day meetings were the report of the New York State Health Commission and recommendations of what the Commission believes to be im-

portant health problems requiring State legislative action.

The Commission was appointed by Governor Franklin D. Roosevelt on May 1, 1930. In alluding to its work in his address at the dinner meeting of the Fund's boards of counsel, Dr. Livingston Farrand, its chairman, stated that the sole aim of the Commission has been to study facts and to recommend administrative changes which had already been satisfactorily tested in certain communities and found practicable in the judgment of its members, and which, if applied to New York, would immeasurably advance public health in the State. Dr. Farrand stated that every recom-

RECOMMENDATIONS of the New York State Health Commission suggest several ways in which public health administrative machinery in the State can be improved. Some of the new measures proposed require Legislative action and all are based on demonstrated practice. At the ninth annual meeting of the boards of counsel of the Milbank Memorial Fund, attention was focussed particularly upon those of the Commission's recommendations upon which the New York Health Demonstrations has offered some experience. (The meetings which are reported upon in the leading article of this issue of the *Quarterly Bulletin*, were held as sessions of the 1931 New York Health Conference.

mendation in the report was the considered result of experience—the experience in a large measure of the New York Health Demonstrations. Had it not been for the experience in better health administration which has been afforded by these demonstrations, he declared, it would have been quite impossible for the Commission to have presented its recommendations with any hope of success.

In its preliminary report, as submitted to Governor Roose-

velt, the Commission recommends as an outstanding need the reorganization of the whole system of local health service in New York State on a county rather than a town and vil-

NEW YORK CITY is to have its own chain of district health centers at strategic points, just as today it has its own district police stations and fire headquarters. Purchase or construction by the City of sixteen district health centers by the end of 1934, and expenditure of \$4,000,000 for that purpose is anticipated. In an article beginning on page 37, Health Commissioner Shirley W. Wynne traces the development of this program and reports current progress in its realization. (Brief reports of current inquiries into the incidence of tuberculosis and of contagious abortion among dairy herds in Cattaraugus County appear in later pages.

lage basis, with provision for qualified personnel, both in counties and cities. The Commission believes that effective results in all other aspects of public health cannot be secured without such reorganization. Its report urges that legislation be enacted substituting the county as the unit of local health administration in place of the town and village.

There are now in the State 1,099 local health jurisdictions. Excluding county and city health units, there exist 1,036

local health units with a population ranging from a few hundred to a few thousand persons. "Designed to meet conditions of 1850," the Commission's report reads, "the present system of town, village and small city boards of health fail utterly to meet the needs of 1931, because these units of population are too small to provide the services which modern public health demands." The report states that the four New York counties where county boards of health have been organized provide more effective public health service than do other counties in the State and enumerates fourteen ad-

vantages to be derived from a county administrative unit.

The Commission makes no recommendations for any major changes in the essential structure or policies of the New York State Department of Health itself. It believes that this Department is second to none in organization and in functioning. After giving careful attention to the policy of state aid in public health, which has been in operation in the State for ten years, the Commission concludes that such aid is necessary in the development of new activities, particularly in rural areas, and recommends that such encouragement of the development and operation of local health activities be continued.

The State's important public health needs, requiring legislative action, are summarized as follows in the Commission's preliminary report:

1. Effective local health departments with qualified personnel;
2. More effective service in the control of tuberculosis, cancer and venereal diseases;
3. More comprehensive measures to reduce infant deaths and deaths among mothers from causes incident to child birth;
4. Further coordination of school hygiene with other health services;
5. Better organization for the discovery and cure, rehabilitation and care of crippled children;
6. The extension of public health nursing throughout the State to reach the standards now in effect in a few areas;
7. Protection of the public health through additional safeguards in the purification of water supplies and the prevention of stream pollution;
8. More attention to the growing problem of industrial hygiene.

An entire session of the New York Health Conference was

devoted to consideration of a new public health program for New York State with special reference to these needs.

The major recommendations of the Commission as summarized in its preliminary report, and as conveyed to the State Legislature in a special message from Governor Roosevelt, are as follows:

1. *County Boards of Health.* That county boards of health be organized in all counties to provide for the rural areas and villages more effective control of tuberculosis, the venereal diseases, and other communicable diseases; protection of maternity and infancy; safeguarding of public milk and water supplies, more effective public health nursing service, and other elements of a modern public health program.

2. *Local Health Administration.* That in cities of more than 50,000 population and in the large counties, health commissioners hereafter appointed be required to devote their entire time to the duties of their office.

3. *Tuberculosis.* That the State establish three additional state tuberculosis sanatoria, primarily to receive patients from counties which are too small in population and wealth to maintain suitable sanatoria, the counties reimbursing the State for maintenance of their patients; that the administration of the State Sanatorium at Ray Brook be placed under the Department of Health, and that provision be made for early diagnosis and more effective home supervision and assistance of tuberculous patients through county health departments.

4. *Venereal Diseases.* That provision be made for the diagnosis and treatment of the venereal diseases as a public health problem.

5. *Cancer.* That a division of cancer control be established in the Department of Health.

6. *Maternity, Infancy and Child Hygiene.* That adequate

measures for protecting the health of mothers and children be included in the program of every city and county health department.

7. *Public Health Nursing.* That public health nursing services be extended, particularly in the rural areas, as an integral part of the program of county health departments.

8. *Crippled Children.* That the administration of the State Reconstruction Home at West Haverstraw be placed under the Department of Health, and that state and local services be extended for the discovery and care of crippled children.

9. *Industrial Hygiene.* That the inspection of certain industrial establishments in villages and towns be performed by the Department of Labor instead of by local health officers.

10. *Public Water Supplies.* That the approval of plans for proposed new, and extensions of existing, public water supplies, in so far as the sanitary quality is concerned, be vested in the Department of Health.

11. *Stream Pollution.* That the pollution of streams by industrial wastes, dangerous to the public health, be regulated in the same manner as pollution of streams by sewage.

12. *Public Health Personnel.* That the present authority of the Public Health Council to establish qualifications for certain public health personnel be extended to include other positions in the public health field.

Legislation was passed during the Spring 1931 session of the New York State Legislature containing provisions for carrying out all the important recommendations of the Commission except that requiring the establishment of a county health unit in every county. Although receiving a great deal of important support, including the approval of the State Medical Society and the state association of local health officers, this suggestion had met some opposition from other parts of the State, and the legislative leaders thought it de-

sirable that action on it be postponed until a later session to afford further opportunity for its consideration and discussion.

The creation within the State Department of Health of divisions of cancer control and of orthopedics, and establishment, under the jurisdiction and control of the Department, of three state hospitals for the care and treatment of tuberculosis, are provided in the new law.

Inasmuch as no public funds were available for the Commission's work, the Milbank Memorial Fund, in 1930 made a grant for this purpose of \$10,000 to the New York Academy of Medicine which undertook to raise the funds necessary to meet expenses, including the cost of special studies and publication of its reports. The Commission plans to publish its final report later in the year. The work of the Commission has been done chiefly through committees, a total of eighty-six persons of special experience and training in public health having served in these groups and participated directly in the accumulation of data upon which the body based its findings.

In addition to Dr. Farrand, the chairman, Dr. George W. Cottis, Dr. Simon Flexner, Homer Folks, Dr. Edward L. Keyes, John A. Kingsbury, Agnes Leach, Henry Morgenthau, Dr. Mathias Nicoll, Jr., John M. O'Hanlon, Dr. Thomas Parran, Jr., Dr. William H. Ross, Katharine Tucker, and Dr. Linsly R. Williams, comprise the Commission's membership.

The dinner meeting of the boards of counsel of the Milbank Memorial Fund was held on March nineteenth. It followed morning and afternoon executive sessions of the Fund's Advisory Council at which the present and future program of the Milbank Memorial Fund was discussed. Dr. William H. Welch, chairman of the Advisory Council presided at both the dinner meeting and the executive sessions. Albert G. Milbank, the Fund's president, welcomed the guests on

behalf of the Board of Directors. Other speakers at the dinner meeting, in addition to Dr. Farrand, included Dr. Reginald M. Atwater, commissioner of health of Cattaraugus County; Dr. George C. Ruhland, commissioner of health of Syracuse; Dr. Shirley W. Wynne, commissioner of health of New York City, and Dr. Thomas Parran, Jr., commissioner of health of New York State.

At the opening session of the Advisory Council tribute was paid to the memory of Dr. Veranus A. Moore, noted scientist and Dean Emeritus of the New York State Veterinary College of Cornell University, who died on February 11, 1931. Dr. Moore had been for many years a valued member of the Advisory Council, and he was chairman of one of its most active committees, the Advisory Committee on Animal Foods.

The New York State Health Conference was sponsored by a group of national, state and local health organizations, including the United States Public Health Service, the New York State Department of Health, the New York City Department of Health, the New York State Medical Society, The State Charities Aid Association, the Bellevue-Yorkville Community Health Council and the Milbank Memorial Fund.

