

# DEPARTMENT OF PUBLICATIONS

## I. BOOK REVIEWS

### AMERICAN PUBLIC HEALTH PROTECTION.

By Henry B. Hemenway. Indianapolis: Published by the Bobbs-Merrill Company.

So much sickness is preventable that it is a community problem to organize forces, which can take the necessary steps to meet the condition. Not only will an efficiently organized public health service vitally touch the life of every citizen; but it will help to decrease the amount of poverty and crime. These facts prompt Dr. Hemenway to write a short history of the development of the science and profession of public health in America, giving also a present day picture of health work and pointing out how it may be made much more efficient.

Beginning with the earliest public health legislation in America, the Massachusetts quarantine law of 1647, the book covers all of the important measures for the protection of the public up until the present day. One of the greatest failures has been the lack of executive power given to health departments. Health work is essentially executive and administrative. Past failures have resulted from various causes. Owing to the indefiniteness of the science, so-called "practical men" have been chosen, political office seekers, often a law unto themselves. Moreover, public opinion has held a practising physician to be the proper individual for the carrying out of health regulations, while as a matter of fact his training, his professional work and his methods of thought are usually such as to make him entirely incompetent to carry out the duties of health official. The author feels that both the politician and the practising physician are equally unqualified for the task. Public health work has developed a new profession, requiring specially trained men.

One reason for the slow advance along the lines of public health has been the failure on the part of the public at large to appreciate that there is a vast difference between medical and sanitary education. Much of the training given to our physicians is not only unnecessary for the sanitarian, but tends to take the latter's attention away from the field of public health. Moreover the sanitarian must have definite knowledge along other lines, quite foreign to, and unnecessary for the physician. The practise has usually been to apprentice the young physician as health official until he has built up enough of a practise to be financially independent of the health work. This has proved to be wholly unfair to the public, to the physician and to the profession of public health. The young physician has been made to serve two masters, prevention and cure. As it is necessary for him to live, he has usually neglected the former and served the latter. There have been some public spirited physicians, who have been most faithful to the preventive work to the neglect of their own practises, but the public has made no return to them, and as a result they have suffered serious financial loss.

Sanitary education should begin in the secondary schools and should extend through normal school and college courses, with graduate courses offered in our higher institutions. Moreover the advanced courses should lead to some definite degree, which should receive due recognition. In this way sanitary inspectors and other workers in health departments, as well as those in charge of the work, would be able to get the preliminary training necessary to enable them to take up the work with intelligence.

The question is often asked as to why this work is necessary today while in past

generations there has been little or none of it. This the author explains by showing that there have been marked social and economic changes, which necessitate measures of prevention, quite uncalled for in the past. Formerly isolation, terminal fumigation and the abatement of nuisances constituted the main duties of the old boards of health. There were few diseases isolated, because it was not appreciated that other diseases than those designated were infectious. With our present day knowledge of the modes of spread of communicable disease, the list of quarantinable diseases has been greatly increased. The little isolated farm community offered but a small problem in health administration. However, as the transition took place from the small community to the city, wells were supplanted by a common water supply, privies gave way to cesspools, which in turn were supplanted by a common system of sewerage and sewage disposal. The sewage matter could no longer be emptied into the river, owing to the fact that a town nearby was beginning to get its drinking water from the river. Thus new rights had to be established. The water supply had to be watched and the proper disposal of sewage must needs be maintained, so that here alone were two large problems, calling for the best sanitary care. In addition to all of this the growth of population and the change from rural to urban life brought about a change in the milk supply. Instead of receiving milk from a near neighbor, whose family health and history might readily be known, large collecting plants became numerous and the milk was gathered from near and far. These demanded careful supervision as to the sources and methods of handling, for modern science has shown us that milk is a very good carrier of many infections. Pasteurization of the milk seemed the only safe means of protecting the public against milk-borne disease, but this again needed careful, expert supervision. These and many other conditions have arisen, which require men of expert and special training in things sanitary in order that the health and comfort of our people be properly provided for.

Little by little the public is coming to appreciate the fact that educating children to a certain point, and then having them either die from preventable disease, or else having them become a burden to the community because of simple physical defects, which might have been easily remedied in earlier years, is poor economy and poor humanity. Boston was the first to institute a system of medical inspection of school children, and its lead has been followed all through the world. Medical inspection deals not only with the matter of communicable disease, but also with every phase of the child's physical well-being. It should prevent the occurrence of gross physical defects by discovering them in their incipency. It should also eliminate those minor ailments, which sap the vitality of the child, and so prevent the child from making the progress which it should make in its school work. In this way the properly conducted system of medical inspection of school children pays many times over for the money invested. It not only shortens the time necessary for the child to cover the required curriculum, but also accomplishes a greater thing in enabling the child to live a more healthy life. The author feels that it is extremely important that the medical inspection in schools should be entirely under the board of education instead of being under the health department, except for prompt reporting to the latter of cases of communicable disease. The two boards should co-operate in this matter. The choice of well-qualified, full-time medical inspectors is at the basis of a successful system of medical inspection.

After discussing the work of the health department, the next question to which Dr. Hemenway turns his attention is concerned with the best kind of organization for carrying out the work. He points out in a very convincing manner that centralizing the authority in a single head, the health commissioner or health officer, is the only successful method of carrying on the work. The very nature of the work requires specialized training and technical knowledge. Moreover it is most difficult to obtain men of

the proper qualifications. With a number of men acting as an executive board the responsibility is divided, and the work is not carried on with proper despatch and decision. The single head of the health organization should be chosen without regard to politics, residence or other unimportant considerations. He should be chosen because of his knowledge of public health matters and because he knows how to administer the work. He should devote his entire time to the work. Where communities are too small to carry on the work by themselves they should combine with nearby towns and share the expense. This has been done with success in certain parts of the country. Such a man as described can be obtained only when the public has come to the point where it is willing to pay the price, so that young and able men will see enough of a future in the work to warrant their taking the training necessary to qualify in the service.

The preparation of men for the work is extremely important. The rudiments of public health should be taught in colleges and normal schools. Our graduate schools should be endowed, so that they can give courses in public health work and then grant appropriate degrees upon the completion of the same. The trained health worker will thus be recognized as belonging to an important profession. Short courses of study may be given in the winter time for those who may be in active service during the rest of the year, and who desire to keep in touch with the latest advances in public health work.

The author's ideas are for the most part very clear and very logical. One cannot read the book without feeling the growing need for more efficient health work, and the responsibility of the individual for making this possible. Not only is one impressed by the fact that the work demands able men, who are free from political and other bias, but one sees what a noble and useful profession has been born, and what wonderful opportunities it offers to men with a desire to serve a useful purpose.

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THE OPERATION OF THE INITIATIVE, REFERENDUM AND RECALL IN OREGON. By James D. Barnett, Professor of Political Science in the University of Oregon. New York: The Macmillan Company. \$2.

I have often regretted what seem to me the ultra tendencies of the times towards centralization in political literature. The extraordinary development of facilities for communication has thrown hundreds of cities and scores of commonwealths into the melting pot together. The obvious limitations upon the daily work of the average human mind have made it inevitable that the time spent in reading about world wars and national politics and in discussing them will curtail the amount of attention which can be given to state and local affairs. Of course, even from the standpoint of intelligence and efficiency, as a citizen of state or city, this consideration of the wide affairs of the world is not a dead loss; but, nevertheless, the natural passion of hard-worked and curious humanity to give its leisure to remote things which do not demand immediate action on the part of those who contemplate them, will, unless pretty closely restrained, impoverish the intelligence and the emotion rightly due to the community in which we live. I hope that there may be a partial reaction against the too great centralization in the organization of political intelligence. I hope that the time may come when these wonderful cities and states of ours may have individual distinctions great enough and vital enough to stimulate local literature and develop latent genius for description and analysis of local life by offering it the priceless reward of attention. It is a great mistake in political administration to try to suppress and conceal the individualities of the men who do the real work for the public, and to concentrate attention and rewards upon the one man who happens to hold the position of highest responsibility. The more recognized strong men we have in politics, the more stable and steadily progressive will democracy be. In like manner, a great nation such as ours is strengthened