

OF NOI

# THE UNIVERSITY OF NORTH CAROLINA

# NEWS LETTER

The news in this publication is released for the press on receipt.

Published Weekly by the University of North Carolina for the University Extension Division.

AUGUST 1, 1928

CHAPEL HILL, N. C.  
THE UNIVERSITY OF NORTH CAROLINA PRESS

VOL. XIV, No. 38

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Entered as second-class matter November 14, 1914, at the Postoffice at Chapel Hill, N. C., under the act of August 24, 1913.

## NORTH CAROLINA HOSPITALS

### A STEADY GAIN

The recent report of the Hospital Section of the Duke Endowment contains a wealth of information about hospitals, physicians, and the condition of the medical service generally in the Carolinas.

We are reprinting a part of one table showing the distribution of hospital beds in the counties of the state. Forty-four counties have no general hospitals at all and sixteen others have less than one bed per 1,000 population. In only five counties—Cumberland, Durham, New Hanover, Mecklenburg, and Buncombe—are there as many as four beds per 1,000 population. Seventeen other counties have at least two beds for each 1,000 people.

Altogether there are 102 general hospitals in the state with a capacity for 3,753 white patients and 949 colored patients. Of these hospitals 72 are private and 30 are public. The public hospitals are classified as follows: 14 community; 11 religious; 2 county; 3 municipal. The two county hospitals reported are in Rutherford and Vance counties. Since the report was made, however, a county hospital has been established in Haywood county. The three municipal hospitals are located at Raleigh, Winston-Salem, and Shelby.

In addition to the 102 general hospitals in the state there are 36 tuberculosis sanatoria, ten of which are public, and 14 special hospitals, seven of which are public institutions—that is, supported wholly or in part by the public. This number includes the state tubercular sanatorium at Sanatorium and the state orthopedic hospital at Gastonia. The nine counties having tuberculosis sanatoria are Forsyth, Buncombe, Guilford, Mecklenburg, New Hanover, Edgecombe, Halifax, Henderson, and Moore.

North Carolina is still deficient in hospital facilities, but the deficiency is gradually being overcome. The generous assistance rendered to public hospitals by the Duke Endowment is resulting in both a larger number and a higher quality of such institutions. With the establishment of a thoroughly equipped medical school on the Duke University campus further impetus will be given to the hospitalization effort.

### Hospitals Essential

No field of knowledge has made more progress in the last two decades than the science of medicine and surgery. But the larger knowledge of disease and of disease control are of little use to a physician unless he has the equipment with which to work. Much of this equipment is very expensive—too expensive to be owned personally. Some of it is too complicated to be operated by any except a specially trained technician. Thus the general practitioner is dependent on a hospital. Furthermore, modern medical practice demands a degree of cleanliness that only a hospital can provide. Hospitals have thus become an indispensable part of the medical service and no community can expect the best results from its doctors unless it supplies them with a hospital through which to work. Indeed without a hospital it may not be able to attract a well trained doctor at all, for a doctor, like any other workman, will insist on having tools.

A few extracts from the report referred to above follow:

"Medical personnel with the right proportion of nurses and technical assistants and with adequate hospital facilities means medical personnel with potential service doubled, quadrupled, multiplied many times.

"Nurses save the time of physicians which would otherwise have to be given to such essential services in the care of the sick as the taking and recording of temperature, pulse and respiration, the bathing of the patient, catheterizing patients, giving enemas, suturing, bandaging, etc. Technicians save the time of physicians that would be given in large measure to simple laboratory tests. Hospital facilities eliminate distances between patients and time consumed in travel and make one visit to patients grouped in a hospital do where many would be required with patients in scattered homes. A physician in a rural section with his practice scattered over a large ter-

ritory, given the assistance of hospital facilities, nurses and technicians, may accomplish from three to six times the work that would be possible in the absence of such facilities and assistance.

"Medical service rests on a tripod of services, medical personnel, nursing and technical personnel, and hospital facilities, and the weakness or absence of any one of the supports results in a service breakdown. The three, doctors, nurses, and hospitals, are interdependently related, and any complete and satisfactory consideration of the care of the sick must think of these three services not fractionally but as a whole."

### HOME COUNTY STUDIES

Denmark is a conspicuous modern instance of local patriotism as a national asset. The thing that most impresses a visitor in the Danish Folkskolen is not the agriculture or the home economics, but the local folk-lore, the home-bred myth, song, and story, the chronicles of Danish heroism, patriotism, and achievement that fill the teaching of literature and history to overflowing.

Denmark is recited and sung in every class every day. Her agriculture is wonderful, but her blazing national consciousness goes further toward explaining her rise into greatness in the last half-century. Danish patriotism is not narrowly parochial. It is intense, but it is broadly intelligent.

Be it said to the honor of North Carolina, there never was a time when a North Carolinian could be a gentleman and be ignorant of the history of his mother state. Familiar, loving acquaintance with the home county and the home state is a necessary foundation for effective citizenship.

### The Rearward Look

The vital study of a county is the study of what is vital in a county. It is a study of the big, main things, the causal, significant, consequential things in community life. Things that are trivial and superficial, incidental and inconsequential have small place in such a study. If so be they indicate the characteristic mood, humor, or temper of a people, then they have a very large place in an interpretative study; but not otherwise.

First of all, it ought to begin with the rearward look. What the county was day before yesterday is related to what it will be day after tomorrow. What lasts on and on in any community grows straight out of the nature of human nature in that community.

An understanding of the economic, social, and civic life of a country or a county calls for acquaintance with the historical background, with origins, racial strains, resources, advantages, obstacles, occupations and industries, noteworthy events and achievements, localities and memorials, with community-building leaders, with notable, noble personages and their contributions to the industrial or spiritual wealth of the county. The field under survey ought not to be cluttered up with trifles light as air, however interesting or appealing to family pride.

### The Roundabout Look

But the vital study of a county also calls for the roundabout and the forward look. It is a homespun study of community forces, agencies and influences, drifts and movements that have made the history we study today and that fatefully are making the history our children will be studying tomorrow.

It is examining the economic and social forces that operate in the small, familiar area of the home county. They are forces that have something like the steady, fateful pull and power of gravitation or any other natural law. They are creating opportunities or obstacles. They are making or marring community life. They need to be definitely known and to be harnessed for beneficent uses, as we harness electricity for traction, light, and warmth.

It means a study of community resources and their development; of populations and occupations; of economic classes and conditions; of factors in the production and retention of com-

### COOPERATION

Whether we like each other or not we all have to live together in a world which is becoming smaller every day—and we must either fight each other or cooperate. The basis of cooperation must be understanding.—Dennett, America in Asia.

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Cooperation is the device which enables the small-holders of Europe to keep their place side by side with the capitalist farmers.—Irvine, The Making of Europe.

community wealth; of the economic surplus and its relation to the self-sustaining, self-protecting, self-elevating abilities of the community; of market and credit conditions; of organization and cooperation; of facilities for communication and transportation; of homes and home conditions; of public health and sanitation; of recreations and amusements; of school, church, and Sunday school conditions and problems.

It is a study of the near, the here, and the now; of the everyday, workaday problems of life. Many of them are persistently nagging, harrying, and harassing. Every minute of every day they call for solution.

It is not only a vital but a vitalizing study. Intimate, competent knowledge of the home community, county, and state means real education and culture, stimulation and preparation for effective citizenship. It quickens social conscience and civic courage.

The right of suffrage—the careless reverie of voting, as Gerald Stanley Lee calls it—is not the essence of citizenship; genuine, generous concern about community welfare and well-being is.

Charles Edgeworth Jones, once upon a time, wrote about The Dead Towns of Georgia. It is a significant title. Every state has its dead towns and dead counties; dead as Dickens said Mr Marley was—dead as a door nail. Other counties are half-awake, half-asleep, half-alive, half-dead. Others are building prosperity upon insecure economic foundations. Others are winning a prosperity that is substantial, safe, and abiding.

Is the home county marking time, moving forward, or lagging toward the rear? What are the causes? What are the consequences? What are the remedies? What means and measures are worth proposing to check decline and decay, or to promote real progress and prosperity?

The vital study of a county finds answers to these and many more questions of similar sort. They are important, worth-while problems, and a competent grasp of them makes for efficient social service and effective civic effort.

Compare a county with itself during the last census period, in the important concerns of economic and social development, and rank it with the other counties of the state, and the results are arresting—sometimes startling. But, also, the response makes every social nerve tense and taut—that is to say, if the student be capable and worthy of real citizenship.

### The Method

Bulletin No. 9, issued by the Extension Bureau of the University of North Carolina, is entitled Home-County Club-Studies. It shows in brief, definite detail how to make a vital study of the home county. The County Clubs, and the North Carolina Club at the University, are studying the state as a whole, and county by county. They are following the outlines of this little bulletin. Seventeen county bulletins are already in print.

Correspondence courses in home-county studies are offered by the University for a trifling registration fee. Extra-campus clubs and individual students here and there in the state are undertaking these studies.

The vital study of a county leads into a new field of learning. In the University of North Carolina the state itself has become a distinct curriculum concern, and occupies the entire time and attention of a department head.

The history of the state has always been explored and exploited at the University. The work of the new department concerns the economic and

social puzzles and problems of the state, their causes, consequences, and remedies. Together the departments of history, economics, and sociology are concentrated upon the rearward, the roundabout, and the forward look; upon the North Carolina that was, and is, and is to be.

The vital study of a county will concern county history, but also county economics and sociology. Such a study can hardly fail to be both vital and vitalizing.—E. C. Branson.

### CANNERY FOR SURPLUS

Operation of a cannery in Rocky Mount to care for the surplus fruit and vegetable crop of the section is being planned, it was learned today, by the Farmers' Mutual Exchange in cooperation with the home demonstration and farm agents of Nash and Edgecombe counties. Under tentative plans, the cannery will be operated at the Holt-Cobb warehouse, where the Rocky Mount curb market is held.

Farmers and farm women of the section will bring their fruits and vegetables to the market and all not sold will be canned under the supervision of the home demonstration agents. The products will be properly approved and will have the well-known label of the 4H clubs.—Selected.

### A COUNTY PARK

A county-wide gathering of more than 1,000 persons assembled at the county playground, Harmon Field, in the Pacolet Valley, Polk County, for an Independence Day celebration. The festivities included races, Rotary-Kiwanis ball game, singing, swimming, dancing, and a fine display of fireworks.

Harmon Field was dedicated in the spring, an initial gift of \$2,000 from Wm. E. Harmon, of New York, having made its purchase possible. It is in charge of the Park Commission of Tryon, and gifts from citizens of the county and visitors have aided in its development and equipment.

The new sand and pebble beach at Lake Lanier and the dance pavilion on the edge of the lake were opened on July 4th. They are situated in the third basin, which commands a beautiful view of the mountains with the water in the foreground. Lanier

Beach is said to offer the best swimming and boating opportunities of any place in that section of the state and promises to be a favorite resort during the warm season.

So far as we know Harmon Field is the only county park and playground in the state. What a fine thing it would be if every county had a picnic ground and recreational park belonging to and available to the entire citizenry. In these days of good roads and automobiles it is easy for the people of a county to assemble for a day's festivity. And it is good for a county when its people know each other better and mingle together in holiday mood. When people learn to play together it is easier for them to work together and vote together for the upbuilding of their county.

### A COMMUNITY ASSET

The importance of health as an element of primary importance in a community's prosperity is emphasized in a bulletin issued by the insurance department of the chamber of commerce of the United States.

An annual saving of at least \$1,200,000,000, the Department points out, has been effected by the reduction of the tuberculosis death rate since 1900.

General Gorgas's sanitary program, a part of the project for the construction of the Panama Canal, saved the United States Government, it is said, \$30,000,000.

The advantage of proper sanitary conditions is of no less importance, from an economic viewpoint, to every community.

"The ability of a man to work," the bulletin continues, "depends in large measure upon his health. Whatever reduces his earning capacity in any way reduces the assets of the community. Any decrease in earning power is naturally reflected in reduced purchasing power with the result that every case of illness or premature death involving a loss of wages has an effect upon the community. This may not be noticeable in individual cases, but the total sum is tremendous. According to an eminent statistician, the average workman loses seven days a year due to sickness, a loss of about 2 percent of his earning capacity. This amounts in the aggregate to at least \$2,000,000,000 for the entire country. Premature death accounts for an even larger loss, conservatively estimated by the same authority to be \$6,000,000,000 annually."—Greensboro Daily Record.

## NORTH CAROLINA HOSPITALS

### General Hospital Beds, by Counties, December 31, 1926

The following table is adapted from a more comprehensive one which appears in the annual report of the Hospital Section of the Duke Endowment for the year 1926.

In the 100 counties of the state there are 3,753 general hospital beds for white patients and 949 for colored patients. This is an average of 1.7 beds per 1,000 people or one bed for each 595 people. There are 30 counties which exceed this average, 26 counties which have fewer hospital beds than this average, and 44 counties which have no general hospitals at all. Of these 44, Moore county has a tuberculosis sanatorium with 72 beds and Mitchell county has a special hospital with 20 beds. The other forty-two counties have no hospitals of any description.

Cumberland, Durham, New Hanover, Mecklenburg, and Buncombe are the only counties in the state with at least four hospital beds per 1,000 people. Hospital authorities consider this ratio fairly adequate. On the other hand, sixty counties of the state have less than one general hospital bed per 1,000 people, which is considered the minimum of acceptability.

Department of Rural Social-Economics, University of North Carolina

Rank	County	General hospital beds		Population	Rank	County	General hospital beds		Population
		White	Colored				White	Colored	
1	Cumberland	161	34	197	29	Craven	43	13	561
2	Durham	185	93	206	30	Robeson	27	16	580
3	New Hanover	142	63	226	31	Beaufort	45	5	622
4	Mecklenburg	342	52	229	32	Wayne	60	15	653
5	Buncombe	273	38	237	33	McDowell	25	3	675
6	Nash	133	46	257	34	Polk	13	1	686
7	Forsyth	291	80	262	35	Swain	20	0	755
8	Lee	48	8	264	36	Anson	22	18	758
9	Macon	44	6	268	37	Rowan	50	10	807
10	Guilford	275	43	289	38	Cleveland	38	8	815
11	Wake	165	114	298	39	Granville	20	10	933
12	Transylvania	30	5	306	40	Halifax	41	9	958
13	Iredell	104	21	323	41	Cherokee	16	0	1,000
14	Pasquotank	43	12	333	42	Madison	20	0	1,004
15	Vance	47	22	364	43	Edgecombe	30	10	1,050
16	Lincoln	47	3	368	44	Davidson	37	0	1,057
17	Richmond	50	20	369	45	Catawba	35	0	1,080
18	Wilson	80	20	425	46	Watauga	12	0	1,174
19	Lenoir	57	22	432	47	Alamance	26	4	1,180
20	Surry	65	5	49	48	Pitt	42	0	1,231
21	Henderson	34	6	490	49	Harnett	26	0	1,246
22	Burke	39	11	492	50	Cabarrus	30	0	1,290
23	Rutherford	54	10	523	51	Ashe	17	0	1,312
24	Stanly	47	15	524	52	Randolph	21	2	1,353
25	Gaston	100	15	528	53	Caldwell	13	2	1,392
26	Carteret	25	6	532	54	Wilkes	20	3	1,457
27	Avery	19	1	540	55	Johnston	25	10	1,546
28	Union	45	23	557	56	Rockingham	24	6	1,643