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NEWS LETTER

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A MILLION DOLLARS FOR HEALTH

HEALTH WORK IN CAROLINA

Elsewhere in this issue will be found a table which ranks the states according to the per inhabitant expenditures for public health by each state government during the last fiscal year. The accompanying column shows the total expenditure by each state government. The table does not include appropriations for tuberculosis sanatoria, nor expenditures for the operation of county and city health departments, except where the state cooperates with such departments, as in North Carolina where 28 cooperating counties received \$72,427 from the State Board of Health in 1923. Nor does the table include receipts from the Federal Government and the International Health Board which, for North Carolina, totaled about \$63,000 last year.

Only three states rank ahead of North Carolina in State Government expenditures for public health on a per inhabitant basis. Our expenditure averaged 16.8 cents per inhabitant, while the average for Delaware was 38 cents, Florida 19.4 cents, and for Maryland 18.6 cents. The average for all the states is around 8 cents per inhabitant per year. The total state government expenditure on public health in North Carolina at the present time, as defined in the first paragraph is \$450,000 annually and the amount is larger in only five states, all vastly richer and more populous than North Carolina.

The average cost of 16.8 cents per inhabitant per year to operate the state health work is less than the cost of a moving picture ticket in most towns in the state. It is less than the cost of a gallon of gasoline. Yet North Carolina ranks fourth from the top in per inhabitant state expenditures on public health. No state in the union has a better record of achievement in the field of public health work. Our State Board of Health and our county health departments, their activities and their accomplishments are known not only throughout the United States but in many foreign lands. Many delegations from other states and from foreign countries have paid visits to North Carolina to inspect our state health organizations and to study its methods, and to view the results. And in every case they have gone away with a firm conviction that looking after health conditions is a proper function of a state government, and that no state is doing better public health work than North Carolina.

County Health Work

On June 1, 1911 the first county health department to be provided in the United States was established by Guilford county. To North Carolina goes the distinction of originating the county health department idea, and from the beginning North Carolina has maintained undisputed leadership in the field of county health work. According to the Public Health Bulletin from which most of the accompanying facts are taken, there are today thirty-one county health departments in as many counties in the state, serving around half of our entire population. The personnel consists of 35 medical officers, 5 non-medical officers, 17 sanitary inspectors, 38 public health nurses, and 38 clerical assistants. The budget of these 31 counties last year totaled \$317,898. North Carolina has more county health departments than any other state, and they are efficiently serving a greater percent of the population than are similar departments in any other state.

Of these 31 counties, 28 cooperate with the State Board of Health, and receive state-aid, while 3 counties, Durham, New Hanover, and Guilford, operate independently of the State Board. In addition five cities maintain health departments independently of the counties. These cities are Asheville, Charlotte, Greensboro, Rocky Mount, and Winston-Salem. Each of these cities has an efficient personnel, and the annual budget totals around \$140,000.

The counties which cooperate with the State Board of Health are: Bertie, Buncombe, Beaufort, Bladen, Cabarrus, Columbus, Craven, Cumberland, Davidson, Edgecombe, Forsyth, Granville, Halifax, Henderson, Lenoir, Mecklenburg, Northampton, Pamlico,

Pitt, Robeson, Rowan, Sampson, Surry, Wake, Wayne, Wilkes, Wilson, and Vance. State aid to these 28 counties amounted last year to \$172,427. The State Board of Health is this year putting \$2,500 into each of thirty counties.

Services Rendered

The county health departments serve the people in a great variety of ways. The officers are charged generally with looking after hygienic conditions in the respective counties. The main job of a county health department is to keep the people well. If the first person with a contagious disease can be isolated an epidemic may be averted, untold suffering prevented, and likely many lives saved. The officers in the 28 cooperating counties last year quarantined a total of 37,166 persons with contagious diseases.

While it is of prime importance to control contagious diseases, it is of far greater importance to prevent their occurrence, and this is the main job of the county health officials, to keep the county as free from sickness as is possible. Three contagious diseases, typhoid fever, diphtheria, and smallpox, can be prevented by vaccinations. The officers of the 28 cooperating counties last year vaccinated 51,509 persons against typhoid, 45,251 against smallpox, 16,837 children were given immunizing treatments of toxin-antitoxin to prevent diphtheria and 1,397 children were vaccinated against whooping cough. A total of more than 114 thousand people were vaccinated or treated to prevent the occurrence of diseases that are highly contagious once they develop.

Veneral diseases are far more prevalent than is generally recognized, and treating the 2,440 cases which were reported to these officers took a large part of their time. Looking after the tubercular is still one of the biggest duties of the public health officers, and although the death rate from tuberculosis has been cut half in two in North Carolina during the last 12 years, the deaths from this disease are exceeded only by deaths from heart disease and pneumonia.

Other activities of the county health authorities are instructing expectant mothers, instructing mothers about the care of babies, giving courses to midwives, and in other ways caring for the lives of mothers and infants. Ignorance is largely responsible for the more than 10,000 children who last year in this state were either born dead, or died during the first year after birth. A well informed and well cared for mother seldom loses her child. The bulk of infant mortality occurs in the homes of people who are ignorant and whose children do not have proper medical attention.

Another great service is rendered through the examination of thousands of school children and the treatment where found of defective tonsils, adenoids, teeth, eyes, and other ills. The health officers look after sanitary conditions in county homes, jails and convict camps. They give examinations to prisoners in jail, physical examination for certificate to obtain marriage license, physical examinations to teachers, cooperate with the public welfare officers, prosecuting the violators of state and local health laws and in many other ways they are constantly rendering public service.

In the performance of their many duties these 28 county health officers and other members of their departments last year traveled a total of 424,310 miles, or 17 times around the world!

A Million for Health

Public health work in North Carolina has undergone remarkable expansion during the last twelve years. In 1911 the total expenditure for health purposes by the state and local units with health departments amounted to about \$65,000. Twelve years later the single county health department had grown to 31, the city departments to five, and the total expenditure had increased to more than a million dollars a year, more than \$600,000 of which comes from state government appropriations, while about \$385,000 is contributed by the 31 counties and the five cities with health

KNOW NORTH CAROLINA

North Carolina has the enviable record of having provided the first county health department in the United States in the Guilford department, established on June 1, 1911, Yakima County, Washington, was the second, that department being established on July 1, 1911, following a most severe epidemic of typhoid fever in that county. The lead thus taken has been continued, for today North Carolina has more county health departments than any other State in the Union, and is efficiently serving a greater percentage of its population. Remarkable as has been the growth and development of the State in agriculture and industry, no less remarkable has been its growth and development in the safeguarding and promotion of its public health.—Ronald B. Wilson, in The Health Bulletin.

departments. An additional \$65,000 comes from the Federal Government and from the International Health Board.

The progress has been remarkable, so remarkable that today North Carolina's leadership in public health work is recognized throughout the world. The million dollars spent on promoting public health in North Carolina returns larger dividends than any million dollars the people of the state could possibly spend in any other way. It is an investment to prevent sickness, to check disease, to promote intelligence, to prevent unnecessary deaths, to make North Carolina the healthiest state in the Union. Every county in North Carolina should have its county health department. No state and no county can afford not to protect the health and life of its people.

Some Results

For many years North Carolina has led the states of the union in birth rates. However, until recently our death rate, especially of infants and children, was very high. Due largely to the work of the State Board of Health and the county health departments the death rate is now below the average for all the states. Most remarkable reductions have been made in infant mortality. During the last 12 years the general death rate has been reduced from 18.2 to 11.5 per 1,000 population, while the reduction for all the states has been only 2 per thousand of population. Instead of about 49 thousand people dying in North Carolina in 1923, as would have been the case had the death rate of 1911 prevailed, only about 31 thousand people died.

The death rate from tuberculosis has been reduced from 255.2 per hundred thousand of population in 1911 to 97.5, and our rate is now below the average for the United States, even though many stricken people from other states seek renewed health in our mountains and elsewhere in the state.

The death rate from typhoid fever has dropped from 69.3 per hundred thousand of population in 1911 to 11.2 in 1922.

These are merely a few of the results that have been accomplished. Ignorance is the one great cause of preventable sickness and death. The state and local health departments have made North Carolina a healthy state because they have been educating the people about the causes of diseases and sickness, and how to prevent them. The results accomplished in this state bear witness to the value of public health work. And the total cost of all public health work, state, county, and city, averaged only 39 cents per inhabitant last year, while to operate the State Board of Health, which has made North Carolina famous around the world, we spend annually just 16.8 cents per inhabitant per year.

North Carolina is naturally a healthy state, one of the healthiest in the union. When, through the efforts of state, county and city health departments, the intelligence of our people comes to be on a par with our natural conditions North Carolina will be the healthiest state in the union.—S.H.H., Jr.

CLASSES IN PEDIATRICS

The University Extension Division will conduct twelve extension classes for practicing physicians on the subject of Pediatrics beginning the week of June 9 and closing the last week in August. It is believed that these courses in children's diseases will do much toward improving the general health and cutting down infant mortality throughout the state. When the same course was given in 1916 one of the doctors in High Point stated that this one class was worth a million dollars in health to that community.

George B. Zehmer and Chester D. Snell, directors of the University Extension Division are now busy organizing the classes which will be held in the following cities: Western circuit—Rutherfordton, Shelby, Gastonia, Charlotte, Concord, and Lincolnton; Sand Hill circuit—Durham, Sanford, Carthage, Hamlet, Lumberton, and Fayetteville.

The instructors for these two circuits this year are from Dr. McKim Marriott's Pediatrics clinic at Washington University, St. Louis. Dr. Jean V. Cooke, Associate Professor of Pediatrics will be in charge of the Western circuit and Dr. Phillip C. Jeans, Senior Associate Professor of Pediatrics, assisted by Dr. Alexis Hartmann, will have charge of the Sand Hill circuit.

There will be one meeting each week in the twelve towns mentioned above. Each meeting will consist of an hour lecture followed by an hour of clinical work.

Application blanks have been sent to all the physicians on both of the circuits and officials of the Extension Division request that these applications be filled out and mailed immediately.

While only twelve cities are to have classes this year, last year the Extension Division gave postgraduate medical courses in twenty-four cities and nearly every doctor in the state had an opportunity to attend. Over 380 physicians took advantage of the three courses in Internal Medicine and the one course in Pathology.

BUILDING AND LOAN

North Carolina is one of the few southern states in which building and loan associations have made gratifying progress. This is the more remarkable in view of the fact that we have no large cities, and very few cities of even moderate size. According to tables carried in the Manufacturer's Record North Carolina had 235 building and loan associations in 1923 with a total membership of 65,000 and assets of \$44,398,334. While the assets of all associations in the United States have doubled since 1918, the assets of North Carolina associations have nearly trebled.

North Carolina has more building and loan associations than any other southern state, and only seven states in the Union outrank us in the number of associations. However, due to the smallness of our towns seventeen states rank ahead of us in total membership and in total assets. Yet considering the fact that only four states have a larger rural population ratio, and the additional fact that our towns are small, our rank of eighth in number of associations and seventeenth in membership and assets speaks well for the thrift of the small towns and cities in this state.

As we have said before the building and loan plan of saving for a home is an American idea. It is a most excellent and economical means of laying aside for a home, and also it is an excellent way to save money because the associations pay high dividends on installments in the form of accumulated interest and savings are tax exempt.

And as we have said before the same plan which is now used so extensively and successfully by city people can be used by the farmers of North Carolina as the laws of the state provide for the organization and operation of rural building and loan associations. Local groups of farmers should look into the possibilities of such associations for the plan will work for them just as well as it works for urban dwellers. The farmers of Ohio have been operating building and loan associations for several years.

STATE HEALTH EXPENDITURES

Total and Per Inhabitant by States, 1923

The following table, based on Federal Public Health Reports and private correspondence, shows the total and per inhabitant expenditures by states for state public health work for the last fiscal year. The table includes only expenditures on the part of state governments, and does not include county and city expenditures, appropriations for tuberculosis sanatoria or other institutions, except hygienic laboratories. Nor does it include receipts from the Federal Government or other agencies.

Total state government expenditure for public health work in North Carolina in 1923 was \$450,000 or a per inhabitant expenditure of 16.8 cents.

The state spent in addition \$200,000 for the operation of its tuberculosis sanatoria. The budget, exclusive of state-aid, of the twenty-eight counties cooperating with the State Board of Health, and the three counties operating independently totaled \$245,271, while the budget of the five cities with separate health departments totaled \$140,000.

Net total expenditure in North Carolina in 1923 for public health work \$1,034,000, or 39 cents per inhabitant.

S. H. Hobbs, Jr.

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Rank	State	Expend. Per Inhab. cents	State Total Expenditure	Rank	State	Expend. Per Inhab. cents	State Total Expenditure
1	Delaware	38.0	\$ 87,500	25	New Mexico	7.6	\$ 28,500
2	Florida	19.4	203,000	26	California	7.3	277,318+
3	Maryland	18.6	280,497	26	Illinois	7.3	497,366
4	North Carolina	16.8	450,000	28	South Carolina	7.1	123,497
5	Maine	13.5	105,000	28	Virginia	7.1	169,174
6	Connecticut	12.0	177,500	30	Arizona	6.5	24,655
7	Massachusetts	11.7	471,860	31	Idaho	6.4	30,010
8	Rhode Island	11.6	71,562	32	Minnesota	6.3	157,500
9	Nevada	11.4	8,800	33	Wyoming	5.8	12,250
9	Vermont	11.4	40,000	34	Indiana	5.6	170,000
11	New Hampshire	11.0	52,250	35	West Virginia	5.5	85,800+
11	Pennsylvania	11.0	1,000,000	36	Utah	5.2	24,995
13	New York	10.9	1,178,000	37	Nebraska	5.1	68,000
14	Michigan	9.5	377,800	38	Kansas	4.9	88,200
14	Montana	9.5	57,915*	39	Oregon	4.8	40,000
16	New Jersey	8.9	298,800	40	Louisiana	4.7	87,500
17	Kentucky	8.8	217,352	41	Arkansas	4.5	82,000
18	Ohio	8.6	531,471	42	Missouri	4.2	145,900
19	Alabama	8.5	205,000	43	Iowa	3.8	93,900+
19	Oklahoma	8.5	183,070	44	Tennessee	3.6	85,105
21	Wisconsin	8.1	220,820	45	Georgia	3.5	91,431
22	Colorado	8.0	79,540	46	Washington	3.2	45,416
23	Mississippi	7.8	140,000	47	Texas	3.1	154,217
23	South Dakota	7.8	50,800	48	North Carolina	2.4	16,274

* Plus unspecified fees

+ Plus unspecified appropriation for clerical help.