

A HISTORY OF THE DEVELOPMENT OF PUBLIC HEALTH NURSING

VI.

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HISTORY OF THE FOUNDING OF THE PUBLIC HEALTH MOVEMENT

The first district nursing was started in 1859, by William Rathbone, in Liverpool, England, after Mr. Rathbone had seen what could be done by trained service. Owing to illness in his own family he saw for himself the comfort brought by this trained service. Therefore he asked the nurse who had been in his own home to undertake the experiment, the care of the poor in their own homes for a period of three months. The nurse consented but after one month in this service, she wished to be released from the task, saying she could not endure the misery with which she came in contact, but Mr. Rathbone persuaded her to continue with the work. After this period had ^spassed by, she asked to continue with the work, as she had made such progress, and it was then that Mr. Rathbone determined to establish a permanent system of district nursing work in Liverpool.

The work started by Mr. Rathbone was but the continuing of the work carried on by the deaconesses, but modernized and brought into keeping with the times. It was Charity, plus service, carried on with the new art of nursing. Since the time of St. Vincent de Paul, charity had meant, in the true sense of the word, the helping of the poor to help themselves to remove the cause of their degradation. The ~~new~~ new science had taught that disease was the result of our own carelessness, in not following the right principles of hygiene, sanitation, and healthful living.

Mr. Rathbone was a man of broad experience and philanthropic interests, as his mind had long been filled with the problems of the poor. When still a very young man, he became a visitor for the District Provident Society of Liverpool, and each week visited in the homes of some of the poorest and lowest in the city. This intimate association with the poor gave him from the first, a knowledge of their sufferings

and their needs. He believed thoroughly in personal service, and believed also that only through personal contact with the poor, could relief be successfully and helpfully distributed.

The result of the experiment carried on by Mr. Rathbone was very successful, but he encountered two great difficulties in trying to extend the work; First, the attitude of the public in regard to the undertaking, and second, the impossibility of obtaining enough trained nurses to carry on the work if established. It was then that he applied to the Nightingale School St. Thomas Hospital; and to St. John's House, but trained nurses were scarce, ^{and} the few existing ones already busy in the hospitals. After talking to Florence Nightingale and being advised by her to start his own training school, and in 1862, he presented a home for nurses to the Royal Infirmary, and a year later the new building was opened. With the able assistance of Miss Agnes Jones, the hospital was established on a new basis, and in less than three years, she had reduced one of the most disorderly hospital populations in the world to good discipline. The work proved too much for Miss Jones, and she contracted typhus fever and died about three years after starting this reform. The experiment proved successful, and in ten years time the system of employing pauper nurses in any workhouse or infirmary was a thing of the past; and in 1897 their employment was forbidden by law.

In the beginning the work in a new district, was usually started by calling a meeting of the clergy, the ministers, the medical men, and other people in the district whose interest or co-operation might be helpful, in order to explain to them the nature of the work and ask their assistance in the work. In four years the city was divided into eighteen districts, with a 'Lady Superintendent' in charge of each district. She was not a nurse, but the nurse of the district

was responsible to her for her work. This type of organization worked well in Liverpool as is shown by the length of time these Superintendents held there positions, as six of them held office for more than thirty years.

The nurses duties were to include at least five or six hours a day, visiting in the homes; to report a case when she thought additional nourishment was needed for the recovery of the patient; and was to render all the assistance needed by the medical man for his patient. Mr. Rathbone was very insistent that the nurses were not to give relief, and urged that they should not pauperize their patients by giving medical comforts, unless actually necessary. The nurse was also warned against interfering with the religious beliefs of her patients. One other principle which he insisted upon was the employing of only trained nurses for the staff, with their object^{ive} being, the training of the patient regarding the value of cleanliness, order and fresh air, and in matters of sanitation, and hygiene.

Through the spread of this work in England we find that district nursing was not just confined to the larger town, but it soon had spread to the smaller towns and rural centers. In London, in 1868, we find the first nursing service organized, solely for the care of the poor. Early in the year, 1874, the Order of St. John of Jerusalem called a committee to consider the question of providing more fully trained nurses for the sick poor. As a sanitary and preventive measure an association was formed, for training the nurses with a view to securing better nursing for the sick poor, and the establishment of a home where the nurses could stay, and where a register of the trained nurses requiring employment might be kept.

As to the various systems of organization and administration, the Liverpool system was described as the most complete of its

kind in existence at that time; though even there, little sanitary reform was possible, due to the fact that the nurses were taken from the same class as the patients themselves. In 1887, after the fiftieth anniversary of Queen Victoria's accession to the throne, her Majesty decided to use the 70,000 pounds of the Woman's Jubilee Fund for the establishment of an Institute for the Training and Supervising of District Nurses, with which any properly qualified nursing association already in existence might affiliate. In 1889, the Queen Victoria Jubilee Institute for Nurses, was finally established by royal charter. Out of this we have the Queen's nurse developing, who was a graduate of a hospital giving a three years' course, and in addition a six months post-graduate work, in one of the homes of the Institute. Then we hear of the village nurse employed by county associations, they had to be certified midwives, with approved hospital training. Next we have the cottage nurse, who helped with the sick in addition to doing the housework. Upon the district nurse, therefore, entering as she did into the homes of the people, depended in a large way, the education of the people in matters of health and sanitation.

Early visiting nursing in the United States was lacking in the days of the Pilgrim Fathers, and due to all of this we read of hundreds of the people dying, some from the dreaded yellow fever, and others from smallpox, and other diseases were ^{high} invaded the colony. The first hospital we hear of in America is the one opened in New York, in 1658 by the West India Company for the use of the sick seamen. In 1816 this was known as Bellevue Hospital, and furnished quarters for the sick and insane as well as able bodied paupers.

In 1786, the Philadelphia Dispensary - the oldest dispensary in the United States - was opened for the 'Medical, Surgical, and Obstetrical service' for the poor in their homes. Then in Charleston after

the Yellow fever epidemic of 1813, we find the establishment of the Ladies Benevolent Society, and various efforts were undertaken for the "relief of the poor, and those suffering from under the anguish of disease". The society continued until the Civil War, when it was abandoned for the time being, and really not started again until 1881. The care of the sick still remained the special work of the Association, a supply closet for the supply of linen and comforts for the sick was organized, and a 'Mothers basket' established, containing clothing for the infant. The work of the Ladies Benevolent Society of Charleston stands alone in the annals of early American Charity.

Then in 1832, we hear of the organization of the Society, under the name of the "Lying-in-Charity for Attending Indigent Women in their Homes", founded by Dr. Joseph Warrington, of Philadelphia. The work of the society is interesting in as much as it united the work of the physicians, the dispensary, and the nurse in the home of the ^{sick} poor, and presents one of the first efforts to give practical training to women in the bed-side care of the sick.

In 1877, the Woman's Board of the New York City Mission felt the need of a nurse to go from home to home among the poor, and to minister to their bodily needs, as the missionary did to their spiritual. The new undertaking seemed to have received the hearty co-operation of physicians, as well as great material assistance from various groups of lay workers. The nursing care given by these women, was undoubtedly better than that given by the first district nurses of England, for they were trained women of the Bellevue Training School. Although there was no real instruction given in hygiene and health, an effort was made to teach cleanliness and better living habits. Then we have the nurses which were engaged by the Ethical Society to serve,

one with the New York Dispensary, one at the North Western, and one at the Good Samaritan. These nurses did all their visitibg in the district of the dispensary which they served, receiving their list of patients from the physcians attending, and then starting on their rounds. This method was an improvement over the former methods used by the missionary nurses.

The first District Nursing Association in this country prefixed the word "Instructive" , and from that time on the teaching, not only of home care of the sick, and habits of cleanliness, but of the underlying principles of hygiene, ^{and} sanitation, became a fundamental part of the visiting nurse work. The first District Nursing Association was started in Boston, in 1886, and was directly due to the inspiration gained from the work done in Liverpool, and to the untiring efforts of Miss Howes, and Miss Phoebe Adams. In some points however the Boston Association did not come up to standards, but in 1900, however, fourteen years after its establishment, the realization that professional supervision should be supplied was unanimously reached. However this old and well established Association has an enviable reputation and is carrying on a piece of work which may well be imitated by others.

At about the same time that Miss Adams was busy with the work in Boston, we find Mrs. Jenks of Philadelphia trying to establish a similar work in that city. In two respect the Philadelphia Society seemed to have been in ~~###~~ advance of the Boston Association, as at the end of its first year it realized the need of a supervisor, and Miss Haydock was appointed as the first head nurse. Then too the Boston nurses ~~swore~~ wore no uniform until 1900, whereas the Philadelphia Society adopted a uniform in 1887. The services of these two organizations was free to anyone needing the services of a nurse.

At the present time many visiting nurse associations have

a regular service on a full pay basis, and most public health nurses - unless paid for by the taxes of the people, as in the municipal or county nursing; by a company for its employees; or by an insurance company for its policy holders, as in the Metropolitan Life insurance company, are expected to ask a small fee for all their services, unless the patient is obviously unable to pay. These two associations, were the first to be established in this country, almost simultaneously, and should share the honor of having introduced into America one of the most valuable social agencies of modern times.

Visiting nursing as it was soon more generally called, was now well established in the United States, as other cities began to slowly follow the example of the Boston or Philadelphia associations. By the end of the century a great many of the large cities had some form of visiting nursing work started. The Chicago association was the third in point of time to establish an association, and was the outgrowth of still earlier work of the kind that city, the first having been begun in 1883, by the Chicago Ethical Culture Society. Next we hear of the establishment of the Buffalo District Nursing Association in 1891. The one object the Board of Managers had in mind in the early days was charity to the sick poor, but no relief of this kind is handled by the association today; but every nurse is taught to refer the case to the proper agency when requiring material relief. This work in Buffalo is a good example of the steady growth of most of our large visiting nurse associations, and the development from pure charity, to a democratic service open, on a pay basis, to all self-respecting citizens.

Other associations which were formed were the Kansas City, Mo. Association in 1892; the Detroit Association in 1894; the Baltimore Association in 1896; the Providence Association in 1900; and the Cleveland Association in 1902. The Cleveland Visiting Nurse Association was unique

in its kind and gave the work in Cleveland a unity and high standard often difficult to attain in a large city with varied fields of endeavor and different groups of workers. Although the public health nurses no longer form one staff, they co-operate very closely, still preserving the same spirit of unity, and are animated by the same high ideals for the betterment of community health.

THE DEVELOPMENT OF PUBLIC HEALTH NURSING
IN CLEVELAND, OHIO, FROM
1895 to 1928

In Cleveland the first Public Health Nursing ventures were due to the outgrowth of church activities of the Old Stone Church's Parish Visitor, (Presbyterian) and the Methodist Episcopal Church Deaconesses. Miss Mary A. Higley was employed from 1895 to 1901, as an assistant to the Parish Visitor. She was not only a public health nurse, but she was also interested in improving the health and the social conditions of her people, and she saw the need for both social and sanitary reform in the city. Miss Higley's work was later carried on through the Goodrich Social Settlement House, which was an outgrowth of the Ladies Aid Society of the same church. In 1897, supplies were furnished her by the group known as the 'Bakers Dozen' who had been organized for 5 years, and had recently become interested in Miss Higley's work. The report of 1899, showed a change in the type of work which had included before only Social and sick calls, but in this year Tuberculosis cases, and Obstetrical cases were included in her duties. The 'Bakers Dozen' again helped in giving material relief and they also sent 12 children to Rainbow Cottage for care, on the suggestion of Miss Higley, who had decided that the causes of sickness and the need of prevention were more important than her work as a nurse. Miss Higley was characterized as the fore-runner of the Visiting Nurse Association.

The Cleveland Graduate Nurses' Association was organized on May the 28th, 1900, and Mrs. Isabel Hampton Robb, was a charter member of that Association. On December 18, 1900, a committee was appointed to investigate the practicability of District Nursing in Cleveland. On recommendations from other cities who maintained District Nursing, each member of the Association pledged herself to interview six people, to interest them in the new field. After the Cleveland Graduate Nurses'

had developed the interest among its own members, and then among the influential lay people, it withdrew from the active field, when the project was assured in a new organization. The proposed project of District Nursing was turned over to the 'Bakers Dozen' for development. The foundation was laid in Cleveland for Public Health Nursing by influential, devoted, and interested lay people, willing to work for the development of a great social benefit to the city and by the help of the nurses Association.

Up to this time we also find the three deaconesses extending their work over the city, using bicycles as a means of transportation.

The actual work of the Visiting Nurse Association began in May 1902, with a superintendent Miss Alice Page, and with a staff of three nurses, working out of the three social settlement houses. The uniform of the Chicago Visiting Nurse Association was adopted by the Cleveland Association. This consisted of a blue seersucker gown with white collar, cuffs, and belt, and a white Maltese cross on the left sleeve. A blue felt hat and a long blue coat completed the uniform for street wear.

The calls received by the nurses during the first year came from many sources, including doctors, former patients, friends of the Association, municipal departments, church societies, city missionaries, and various charitable organizations. During the first eight months of the Associations activities, of the 1,122 patients visited, 298, or about 25% of the total, were typhoid fever patients. The nurses also received cases through the public schools, as some of the teachers made lists of their absentees, then the nurse would visit in the homes of these children. The nurses were of assistance in some of the districts, as they taught the mothers how to carry out the doctors orders, and in some instances kept the children from attending school and carrying contagion.

In addition to the increased interest in the work as shown by the teachers in the public schools, the second year of the Association showed an extension of the work into new neighborhoods, as in 1903 two new districts were added to the three original ones. In May, the Pilgrim Church congregation proposed that they co-operate with the Visiting Nurse Association in opening a new district on the South side, the church to pay two-thirds of the nurse's salary, the Visiting Nurse Association to provide the remaining one-third and to supervise the nurse. That the plan was satisfactory to both organizations is shown in the fact that the church continued to share the nurse's salary until 1925, when the co-operation was discontinued only because the church was a contributor to the Community Fund. A sub-station of the Visiting Nurse Association is still maintained in Pilgrim church. The other new station was opened in the Haymarket district at Central Friendly Inn. As a result of the great interest in the Visiting Nurse Association, the Association received two permanent trust funds - the first a bequest by Mary Corning Audenreid, and the other an endowment fund of \$5,000, from Mr. Jay C. Morse. The Association was Incorporated in November, 1904, and assumed its own assets and liabilities in January 1905.

To trace the development of the Visiting Nurse Association is to trace the origin of practically all of the various branches of Public Health Nursing^{which exist} in Cleveland to-day, as all the projects were either fostered or assisted by this mother organization, until they were able to assume independence. As various organizations developed they turned to the Visiting Nurse Association for trained district nurses. It so happened that the first four developments ~~####~~ namely Tuberculosis, child hygiene, communicable disease, and school nursing, are at the present time municipal activities. These were followed by maternity, and pre-natal programs, and industrial nursing. These various types

of Public Health Nursing were followed by the Course in Public Health Nursing, at Western Reserve University, and the development of the Central Committee on Nursing.

The development of public health nursing for the care and the prevention of tuberculosis in Cleveland was very closely allied with the development of the Tuberculosis Dispensary under the School of Medicine of Western Reserve University. This Dispensary, which was the fore-runner of the tuberculosis clinics maintained by the city at the present time, was largely the result of the interest and the work of Dr. John Henry Lowman, who served on the faculty of the school for more than forty years.

From the beginning, Dr. Lowman recognized the social aspects of tuberculosis and termed his dispensary a "Social Dispensary" - the first in Cleveland and one of the first in the country. The underlying principles which guided his activities as a physician in the Community were as follows:

- " 1. The family instead of the individual.
2. Prevention instead of cure.
3. Co-operation throughout the whole field of remedial agencies."

Through the great efforts of Dr. Lowman, and the work of his wife through the Visiting Nurse Association, there was organized in 1905, an Anti-Tuberculosis League of Cleveland. For several years the League, the Associated Charities, and the Visiting Nurse Association co-operated with the School of Medicine to carry on the fight against tuberculosis. In 1910, there were five physicians, with Dr. Lowman, as head, and six nurses, in the clinics and also following the clinic cases into the home. In September, of the same year the League presented a report to the mayor of the city, and as a result a Bureau of Tuberculosis was established under the Department of Health, as the City

Council voted \$7,000 for its establishment. The Cleveland Department of Health had been established by an ordinance in 1871, and the Bureau of Vital Statistics was created in 1872, but it was not until 1906 that tuberculosis became a reportable disease. At the International Congress on Tuberculosis held in Washington in September of 1907, the silver medal for the second most effective Anti-Tuberculosis work carried on in America was awarded to the Anti-Tuberculosis League of Cleveland; and the Babies' Dispensary and Hospital of Cleveland received honorable mention for its prophylactic work against Tuberculosis.

A Tent Colony for Children was opened in 1907, by the League, and an open air school was maintained in connection with the colony, the expense first being carried by the League then later by the Board of Education. In 1915, the city took over the cost of the nursing service of the colony; then in 1917, the Division of Health adopted for the entire city, the generalized plan of nursing service, exclusive of bedside care. This plan has been maintained to the present time, the tuberculosis work being a part of the generalized program carried by the Public Health Nurses on the staff of the Division of Health. The work radiates from eight health stations, which serve as the centers for the eight districts of the city. Tuberculosis clinics are maintained in these Health Stations at stated periods, the nurses serving in the clinics as well as visiting the patients and contacts in their homes.

CHILD HYGIENE

The first steps taken to combat the high mortality rate was the organization in 1899, under the leadership of Miss Dickman, of the Milk Fund Association which supplied pure milk on prescription. In July 1906, the First Infant Clinic to provide medical supervision for sick babies in Cleveland was opened in the Central Friendly Inn in the Haymarket district through the co-operation of the Milk Fund Association

and the Visiting Nurse Association. The purpose of the Infant Clinic was to combat preventable infantile illness and mortality among the poor by means of medical supervision, and instruction in the homes, and to provide clean milk for sick babies in the tenement neighborhood of the Haymarket District.

In the Infant Clinics, the services of the ^{visiting} nurses, a new feature in such work, proved invaluable. They followed the infant patient into their homes, making frequent visits to see that necessary treatment was carried out, and to teach the mothers the essential care and feeding needed to keep their babies well. Before the summer was over it was obvious that a permanent and enlarged dispensary organization on the same lines was necessary, and that an infant's hospital to care for the very sick babies was urgently needed as well. Through the help of Dr. E. F. Cushing, in December 1906, the small work of the Infant's Clinic was put upon a firm basis and incorporated as the Babies' Dispensary and Hospital of Cleveland. He gave freely and quietly, and chose such gifts as were necessary yet not apparent to any but medical men. He fostered the library, the clinical work, and the laboratory, and his goal was not only care for the sick babies, but to teach and develop nurses and physicians, to study the cause of, and to study and discover the remedies for the large loss of infant life.

On June 15th, 1909, four branch dispensaries were opened and proved a great aid in relieving the crowding of the Central Dispensary. In 1911, the City Council appropriated \$10,000, to be used by the Department of Health, in aiding the Babies' Dispensary and Hospital in establishing five additional Infant Welfare Stations, and in the organization of a nursing staff of seventeen nurses. In October of the same year the Dispensary turned over to the Department of Health, the five stations it had already established, thus placing them under

municipal control.

Other work of the Dispensaries developed into the care of the eyes of the babies, and in June of 1911, there were two nurses assigned to the work of the blind. The responsibility of supervising boarding homes in Cleveland was assigned to the Babies Dispensary and Hospital in 1911, and this called for the work of an additional nurse, but in October 1913, the Bureau of Child Hygiene took over the work.

At the present time , a joint child health program is maintained in Cleveland by the Municipality and the Dispensary of Babies' and Childrens Hospital. The Dispensary, a private organization, provides treatment for pre-adolescent children ill and unable to employ a private physician. The Bureau of Child Hygiene of the Division of Health supports 15 Infant Welfare Stations in the city, providing them with the necessary medical and nursing supervision. In 1928, there were 116 public health nurses doing infant welfare work, under the Division of Health.

COMMUNICABLE DISEASE NURSING

As early as 1897, Miss Higley saw the need of closer supervision of persons having communicable disease, and daily she visited the office of the Health Officer, for reports of communicable diseases which consisted largely of Diphtheria and Typhoid Fever. In 1908, the City asked the Visiting Nurse Association for two nurses to serve under the Department of Health, to help in the control of contagious diseases in the City. These nurses were the first public health nurses employed in that department, and though they were on the staff of the Visiting Nurse Association, they were paid from the budget of the Department of Health. Special nurses were employed for communicable diseases until 1917, when the generalized plan of nursing was adopted by the Division

of Health, and this plan has continued to the present time.

SCHOOL NURSING

During the first year of the Visiting Nurse Association, they secured some patients through the schools, and in their second year of existence the work was continued and extended. In 1903, the nurse in each district had established the custom of attending to the 'petty ailments' found in the various schools, and had this along with her other work. In May of 1905, the Visiting Nurse Association conducted a one-month demonstration of nursing in connection with the medical inspection in the public schools; But "the project of establishing school nurses was still in abeyance". It was not until April, 1910, that the actual work was started, the staff consisting of the supervisor, fifteen inspectors, and ten nurses, and this number of nurses was increased to fifteen in December of the same year. One of the first projects of the staff was the establishment of a School Eye Clinic for pupils suffering from visual defects, whose parents could not afford to send the child to an oculist, were referred to this clinic, from all parts of the city. To-day two clinics of this nature are maintained by the Board of Education.

The aim of the Health Service Program to-day in the Cleveland Public Schools is prevention rather than cure, and it is a branch of the Department of Physical Welfare. In 1928, there were 52 nurses employed in this work, with a nurse as supervisor over them. The work of the school nurse assigned to the general Health program consists of various types of work:

- (1) Assisting the medical examiners in the physical examination of the children.
- (2) Inspection of all pupils in the class room.

(3) Securing the correction of all physical defects found in the physical examinations by means of

Notices and messages to parents;

Consultations with the parents at the school;

Home visits.

(4) The maintenance of dispensary hours in the schools for treatments, dressings, emergencies, and inspecting children returning to school, after exclusion.

(5) Health talks to individual pupils and to classes.

(6) Tooth-brush and handkerchief drills.

The per pupil cost of this health service in the schools for 1928, was \$1.60, including the dental hygiene program.

PRE-NATAL AND MATERNITY PROGRAM

Before the existence of public health nursing organizations in Cleveland, Miss Higley gave district maternity service, and Miss Johnston gave delivery assistance to private physicians, in addition to post-partum care. In the first year of the Visiting Nurses Association, there were 9.5 % of the total number of patients cared for who were maternity patients. Then in 1928, they had a total of 30,538 maternity cases under the direction of a private physician, while the Maternity Hospital who cares only for non-pay patients had a total of 37,549 visits to maternity patients, thus showing that the private doctor of Cleveland uses the Visiting Nurses to a large degree in his maternity practice. In 1906, at the request of Dr. Cushing, then the Professor of Diseases in the School of Medicine of Western Reserve University, Dr. Arthur H. Bill organized a private maternity clinic in his own home. This clinic was conducted for a year as a private enterprise and demonstration to the

School of Medicine, and to give medical men the clinical experience in obstetrics, also the medical students accompanied Dr. Bill into the district. Dr. Bill not only gave delivery service but also post-partum care, his mother answering the phone, and packing his bags for him. Through the efforts of Dr. Bill this service was taken over by the School of Medicine in about a years time, and was known as the Dispensary of Maternity Hospital, Western Reserve University.

Lakeside Hospital became interested in this service in 1908, and offered room for the Maternity Dispensary to use its headquarters, but in 1913, this division was transfered to Maternity Hospital. This hospital had been founded in 1891, by the Homeopathic Medical School, and had been taken over by a board of women physcians, but in 1912, Dr. Bill became the Chief of the Staff. Branch clinics were established through out the city and to-day there are eight pre-natal clinics, where any expectant mother who cannot ~~###~~ afford to employ a private physcian may enroll in any of the eight clinics for care, paying as much as she is able for this service.

In 1911, a course in 'Social Training for Nurses' was offered in Cleveland by the Visiting Nurse Association in co-operation with the Department of Sociology of Western Reserve University, the Associated Charities, the Anti-Tuberculosis League, and Babies' Dispensary and Hospital. Miss Hanna Buchanan was the director of the new course, as she had been given a scholarship the year before, by the Trustees of the Visiting Nurse Association in order that she might enter the newly organized course in Nursing and Public Health at Teachers College, Columbia University. The course was organized to provide a combination of

field work with lectures, and there were five nurses in the first class. In 1913, Miss Cecila Evans, a member of the second class at Columbia University, was made Director of the Cleveland Course in Social Training for Nurses. When the School of Applied Social Sciences of Western Reserve University was organized in the fall of 1916, the Course in Public Health Nursing became a constituent part of the School. The sources of the budget for the University P. H. N. Course and District are: pay service, corporation pay (Metropolitan Life Insurance Company and the John Hancock Life Insurance Company), Western Reserve University, the City of Cleveland, and the Cleveland Community Fund.

The co-operation of the various agencies in maintaining the University P. H. N. District is merely a continuation of the spirit which has made possible the present program of public health nursing in Cleveland. This co-operation has been made possible because of the active lay interest in the work, assisted by able and efficient professional direction.

THE DEVELOPMENT OF INDUSTRIAL NURSING IN THE UNITED STATES.

The employer seemed to sense the need for the welfare of his workers in about the middle of the last century, and in 1852, an English employer issued a report of " the Educatioal, Religious, and Moral Charge to be taken by the Company over the Persons (and especially the young persons) in its Employment". Many of the early efforts for industrial welfare were of such a paternal nature, as would be scorned by the average employee of this generation.

Since 1842, we have progressed very rapidly, and still there is a trend to go at a more rapid pace for some time to come. All through the history of industry , we see the employer (or more often his wife or sister) visiting the sick workers and giving them advice or ~~material~~ ~~erisal~~ relief. By the means of a kindly despotism these visits sometimes accomplished much in family crises, and the aid often welcomed as something received for nothing.

In 1895, the first trained nurse probably entered industry, when the Vermont Marble Company engaged a nurse to visit the homes and care for the sick workers, and their families. Then in 1897, the Cadbury Company in England, established a health department which has been developed quite extensively. To-day it includes physcians, trained nurses, masseuse, and convalescent homes in the department. Many dangers of paternalism were avoided, and the necessity of good medical and health supervision was emphasized.

In 1897, the benefit association of the employees of a large department store, employed a trained nurse to visit its sick and to see that its funds were distributed fairly. The nurse Miss Anna B. Duncan, R. N., former secretary of the Benefit Association of the Employees of the John Wanamaker store, New York, found that her nursing

skill and ability to give health instruction, gained the confidence of those she visited, and that in only a few cases was there any question of malingering. Experience proved to her that her services could best be used by giving first aid where needed, by providing prompt and suitable medical attention and nursing care for the sick and injured, by following up the cases to see that medical orders were carried out, that the patients return to their doctors when necessary, and that financial anxieties and family cares did not retard the recovery of the patient.

The field of the industrial nurse to-day is fundamentally the same as discovered by the pioneer. About the time the trained nurse entered the field, farsighted employers began to realize that certain forms of industrial welfare and especially industrial nursing were 'good business'. The cost is now charged to overhead expense, where formerly it was charged to charity.

Various efforts have been made to solve the problem of the sick worker, as in many cases it has ^{been} solely a question of educating the worker in the wise expenditure of a good income, while in others it has often been a financial problem due to illness of one or more members of the family. With workers from many lands as well as from all parts of our country, all gathered together in industrial centers, the industrial nurse, as well as other public health nurses, may assist in solving two problems: the making of good American citizens, as well as the care of the sick workers. Efforts for the care of the sick worker are gradually developing into the care of the well worker himself, in an effort to keep him well, and into the care of his work rooms, house and community conditions in order to keep him, and also his family in good health.

The entry of the nurse into the plant has usually been by

way of the first aid room, but she has seldom stopped there, as her value in industry, both to the employer and to the employee, has steadily increased as she entered into the field of prevention. In the plant she is often able to discover cases of illness while in the early stages and still curable, as is frequently true of tuberculosis. Daily the nurse can teach the workers in matters of health and safety and in the necessity for early medical care and prompt first aid treatment. In the home she is able to do all these things and many more, such as using her knowledge of housekeeping, dietetics, baby care and ~~##~~ cooking.

As the industrial nurse has been found to be indispensable in caring for accidents and in their prevention, so will the demand for her services increase as health insurance for the worker, becomes general. She will continue to serve employer, worker and the community as long as workers suffer from accident or illness and while the laws of health are unknown or disregarded in plant, home or neighborhood.

INDUSTRIAL NURSING IN CLEVELAND

The first industrial nurse was employed in Cleveland in 1907, through the Visiting Nurse Association, by the Cleveland Hardware Co., to care for its injured workmen. The nurse remained on the Staff of the Association, under their supervision in order that a uniform program of public health nursing might be established in the city. Then in 1911 the Cleveland Foundry and the National Carbon Company each employed a nurse on the staff of the V. N. Association, and in 1913, there were six nurses in five factories, employed through the Association. The salaries of the industrial nurses were paid by the factory owners through the Association. The direction of the V. N. Association in that work

has demonstrated the importance of a graduate nurse rather than an untrained woman in a factory dispensary. In 1920, there were in Cleveland, seven full-time industrial physicians, and one hundred and four industrial and mercantile nurses employed; and in thirty-six plants sixty-six nurses were working part time with part time physicians. At the present time there are no available statistics as to the number of industrial nurses employed, and it is very difficult to secure any data relative to the industrial nursing situation in Cleveland, as many employers do not realize the value of registration. No doubt there are some untrained women employed as industrial nurses in the factories, and perhaps the standards are lower in this field than in any other branch of the public health field, since every employer makes his own standards for the nurses he employs. These standards will depend almost entirely upon his information regarding the nursing profession in general.

BOOKS WHICH I HAVE READ, AND OTHERS I HAVE LOOKED OVER:

Conquest of Disease	Rice
Discovering Ourselves	Strecker & Appel
New Public Health	Hill
Child Health and the Community	Dinwiddie
Psychology and Mental Hygiene for Nurses	Eyre
Evolution of Public Health Nursing	Brainard
Public Health Nursing in Cleveland 1895-1928	Bower
Oregon Laws- Public Health and the Rules and Regulations of the Oregon State Board of Health.	