

Maternal and child health
. . . challenges and goals, 1953

The Challenge of the First Week of Life

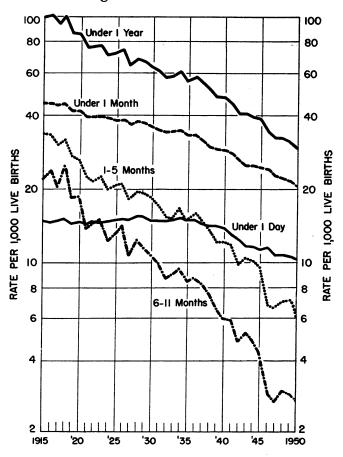
IN LESS than four decades America has witnessed a reduction of more than two-thirds in its infant death rate. This saving in lives of infants has been achieved chiefly through the control of diarrhea and enteritis, and of pneumonia and influenza. The greatest saving has been in babies 1 week to 1 year of age.

Today mortality in the first week of life presents a primary challenge. In 1950, the infant death rate for the first week was 17.8 per 1,000 live births. Immaturity was reported as contributing to the deaths of 42,988 infants in 1950. The death rate per 1,000 live births in that year totaled 29.2. The rate for deaths associated with immaturity was 12.1. Immaturity as the sole factor in death was recorded for 22,413 infants.

To reduce this toll requires more good obstetrical care, special hospital facilities, and pediatricians and nurses with training in the care of premature babies.

When an infant is born prematurely and has to be separated from its mother, it is difficult to achieve the intimate relationship which ordinarily develops between mother and baby as she cares for it during the early weeks of life. When the mother begins to take care of her baby she may need help not only on how to feed and clothe the infant, but also in attaining a sense of security for herself and her baby.

Premature birth, however, is but one of the challenges to maternal and child health in 1953. For a discussion of both challenges and goals, see page 397. Infant mortality rates by age, birth-registration States, 1915-50



frontispiece A nurse trained in the care of the premature infant is shown feeding an infant by means of a stomach tube in this Virginia State Department of Health photograph.

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Organized Health Services in A County of the United States

Several years ago a cooperative project was undertaken by the Monongalia County Health Department in West Virginia and the Public Health Service to survey the structure and function of all organized health services having an impact on the people of one rural county. It was the first such study made. The report was mimeographed and had limited distribution, but demand for it was great so it was printed in this present form.

The report covers in detail all agencies in the county which provide health services, types of service and administrative structure of each, source of support of their operations, and extent of service. The scope of activity includes preventive disease services, medical care, and research and training. The summary and discussion considers the historical backgrounds, local-Statenational relationships, and the role of the health department.

At the end of January 1949, there were in Monongalia County 155 different agencies with organized health services. These agencies fall into the general categories: official and voluntary health agencies, other official agencies with health functions, voluntary social agencies with health functions, health service enterprises, health functions of industry and labor, professional and auxiliary organizations, and civil and social groups with health functions. The largest number of these agencies was supported by tax funds and the next largest group by individual members.

An analysis of the quantitative data in the report indicates that far greater sums were spent on medical care than on prevention of disease. Individual categorical programs, such as services for veterans, workmen's compensation cases, or sanatorium care for tuberculosis, involved greater expenditures than the

entire appropriation for the county health department from all local sources.

Official health agencies were responsible for the greatest volume of services and expenditures relating to prevention of disease, and other official health agencies with health functions had a large share in school health services, safety, food and drug control, nutrition, and industrial and adult health. Voluntary agencies played a major role in tuberculosis and chronic disease control, and in health education. Of the medical care programs, the largest in the county were those for company employees covered by prepayment plans, especially miners and their dependents, and those for veterans. Organized efforts for hospitalization have been greatest for special classes of service under the medical care programs. The greatest financial weight of the special illnesses has been for tuberculosis.

Services of the programs for preventive disease and medical care under government agencies tended to exceed those provided by the voluntary agencies, particularly those for crippled children. On the other hand, in many spheres of health and community activity in which government has not participated, those of the voluntary agencies and economic enterprises were of the greatest significance.

Roemer, Milton I., and Wilson, Ethel A.: Organized Health Services in a County of the United States. (Public Health Service Publication No. 197) 1952. 91 pages. 45 cents.

Tuberculosis Beds in Hospitals and Sanatoria January 1, 1952

There are in the United States and Territories 1,122 institutions which provide 111,505 beds for the care of tuberculosis, according to the seventh annual edition of the Index of Hospitals and Sanatoria with Tuberculosis Beds in the United States and Territories. Of these, 1,006 hospitals are local (State, city, county, and district), and 116 are

operated by the Federal Government. In the continental United States alone there are 1,097 institutions, 982 of which are locally operated and 115, federally operated.

Comparison with the 1951 index reveals that 373 institutions previously unreported appear in the latest edition of this report. Only 7 of these are new facilities. Also, 26 institutions which were reported in the earlier index are deleted from the present edition and reasons for these deletions given.

The information in the 1952 index was gathered by means of a post-card questionnaire sent to all the locally operated hospitals. Data are analyzed as to type of hospital and ownership and control, and are compared with data in the 1951 report. The hospitals are indexed by State, with the number of beds given for each institution.

Tuberculosis Beds in Hospitals and Sanatoria, January 1, 1952. (Public Health Service Publication No. 253) 1952. 32 pages; tables. Available upon request to Division of Chronic Disease and Tuberculosis, Public Health Service, Washington 25, D. C.

The Head Nurse Looks at Her Job

The continuing shortage of nurses is one of the most acute problems in medical care today. Even the most successful recruitment programs cannot supply graduate nurses fast enough to keep pace with the demands for their services. These factors indicate a need for hospitals to evaluate the utilization of professional nursing personnel and to determine whether or not administrative changes might save personnel time and hospital dollars.

This manual, developed by the Division of Nursing Resources of the Public Health Service, offers a method by which hospitals of all sizes may determine how head nurse time is distributed between patient care management duties and duties which could be performed by less skilled nursing personnel. It was developed for use in units providing

bedside care to patients in general and allied special hospitals.

The method described consists of observations of head nurse activities in one or more units for a period of two or more full days during which detailed time records are kept. An observer "shadows" the head nurse and assistant head nurse at all times while they are on duty and records the time, the area of activity and the level of skill required for each task performed. The recorded data are coded according to area and level and later tabulated and analyzed for use in determining what corrective action may be needed and how to initiate it.

The manual outlines the procedures for such a study and is in loose-leaf format to facilitate its use during the training period before a study as well as during the study itself. Detailed instructions are given for observers, including the classification of activity areas and levels. Suggestions are given for constructing the record forms and the manner in which data are to be recorded and analyzed. The appendix also includes two training narratives to assist in the teaching of observers.

Gillan, Ruth I., Tibbitts, Helen G., and Sutherland, Dorothy. The Head Nurse Looks at Her Job. A Manual for Studying Head Nurse Activities in Hospitals. (Public Health Service Publication No. 227) 1952. 77 pages; illustrated. 40 cents.

for the general public

Arthritis and Rheumatism

Arthritis is man's oldest known chronic affliction and is the world's leading crippler. About 7½ million Americans suffer from arthritis and rheumatism, and 1 million of those are permanently disabled. The prevalent forms of these diseases—rheumatoid arthritis, osteoarthritis, rheumatic fever, gout, and fibrositis—are discussed in this health information leaflet. The information given includes suspected causes,

symptoms, effect on various parts of the body, and treatment.

Readers are warned against self-treatment. They are urged to seek a physician's advice if suffering pain, stiffness, or swelling in the joints, for early treatment by a physician benefits the majority of rheumatic patients and often prevents disability.

Attention is called to the work of three organizations on arthritis and rheumatism. The American Rheumatism Association, the Arthritis and Rheumatism Foundation, and the National Institute of Arthritis and Metabolic Diseases of the Public Health Service are working cooperatively to increase the understanding and improve the treatment of arthritis and rheumatism.

Arthritis and Rheumatism. Health Information Series, No. 9 (Public Health Service Publication No. 29) revised 1952. 2-fold leaflet. 5 cents; \$2 per 100 copies.

Importance of Nutrition To Good Healh

This leaflet was prepared in response to frequent requests for nutrition information which could not be satisfactorily referred to other Federal agencies. The introduction stresses the importance of good nutrition for good health and the need for proper diet to prevent fatigue at work and play and to avoid lowered resistance to infection. A physician's advice is suggested if a special diet is needed.

The leaflet describes the important food elements, and how they are used in the body. Foods containing the various elements are listed in the margins of the pages. The vitamins are discussed in the same manner, with a description of each, what it does for the body, and the foods in which it is found. A brief section on calories is included. Reference is made to a chart showing food values and calories, obtainable from the U. S. Department of Agriculture, and to other source material.

Importance of Nutrition to Good Health, Health Information Series No. 31 (Public Health Service Publication No. 162) 1952. 12 pages; illustrated. 5 cents. \$3.75 per 100.

Diabetes

About 2 persons out of every 100 have diabetes mellitus, according to recent surveys, and about half of them do not know they have it. The disease can develop in persons from all age groups, but those over 40, those with diabetes in their families, and those who are overweight are most likely to have it.

These facts are brought out in this health information leaflet which discusses diabetes, its cause, and the manner in which it is controlled. The functions of the pancreas, the results of its malfunctioning, and the symptoms of diabetes are described. The information given also includes the tests by which the disease can be detected and the methods of controlling it through the use of bottled insulin, dietary restrictions, and proper exercise. It is pointed out that because of the increasing numbers of persons over 45, diabetes is more common than formerly. However, since it can be discovered and treated successfully. no one need be handicapped by diabetes.

Diabetes. Health Information Series
No. 70 (Public Health Service
Publication No. 137) November
1952. 2-fold leaflet. 5 cents; \$4.00
per 100.

Publications for which prices are quoted are for sale by the Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C. Orders should be accompanied by cash, check, or money order and should fully identify the publication (including its Public Health Service publication number). Single copies of most Public Health Service publications can be obtained without charge from the Public Inquiries Branch, Public Health Service, Washington 25, D. C.