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# The Public Health Nurse

How She Helps to Keep the Babies Well

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## THE PUBLIC-HEALTH NURSE HOW SHE HELPS TO KEEP THE BABIES WELL

### After the Weighing, What Next?

The Children's Bureau has asked us to make the year of April, 1918, to April, 1919, Children's Year, and, as a first step, to undertake the weighing and measuring of all of Uncle Sam's babies who are under 6 years of age. If your community is like most American cities and towns, it has gone into this movement with all its might, realizing how much the health of the babies means to their fathers and brothers who are fighting in France now, and how much it will count for the strength of our country in the future.

A great many babies have probably been weighed and measured in your town this summer. Some of them, a good many, have been found to be healthy and vigorous; some have been found to be underdeveloped and ailing. These statistics are interesting and valuable, but are they all the weighing and measuring campaign was for?

Its main end, I take it, was not to gather statistics, but to save the lives of some of these babies who would otherwise die of preventable disease. The Children's Bureau believes that 100,000 of these lives can be saved during this year, if we set ourselves resolutely to the task. We want to know where the sick babies are in order that we may make them well; and we want to know where the well babies are, too, in order that we may keep them well.

### Why the Babies Die.

If the lives of 100,000 babies can be saved by something that we can do or leave undone this year, it must be that what some of us have done or left undone has caused the death of 100,000 babies each year in the past. Those babies did not die of their own accord. They were killed—killed by feeding them with dirty, uncooked cow's milk or some other improper food, killed by weakening them with heavy clothing and then exposing them to a sudden draft, killed by letting some one who was coming down with "a cold" fondle them

and pass on to them the deadly germs of some disease. They were most of them, these 100,000 killed by their mothers or their grandmothers or their sisters, who loved them very much but did not know how babies ought to be cared for.

The proportion of young babies that will die depends almost wholly on the amount their mothers know about infant care. In Russia 1 baby in every 4 dies before completing the first year of life. The Russian mothers love their babies, but the "mother instinct" does not teach them to feed them only on mother's milk or clean, pasteurized cow's milk, and so they give those babies other foods and the babies are killed by summer diarrhea. In the United States about 1 baby in 8 dies before reaching its first birthday. That is better than the Russian record; but in New Zealand only 1 baby out of 20 dies in the first year of life. The New Zealand mothers are no more devoted than ours. They are no more highly educated nor any wiser in most matters, but they have learned more about infant care.

The great object of this whole campaign of Children's Year is to teach American mothers how they, too, may keep their babies well.

#### **The Infant Welfare Station.**

The local institution about which this campaign centers, the Little Red Schoolhouse of the Baby-Saving Movement, is the infant welfare station. This is a place where the mothers may bring their babies—and where every one of them should be urged to bring her baby, at least once a week—for examination and advice.

Here the physician in charge will examine the child each week, see if he is growing normally, and detect any sign of the beginning of an unhealthy condition in the very first stage, when cure is easy. Here the mother is told how to feed and clothe and care for the baby; is given, in short, all the advice she needs to keep the baby well.

It is the establishment of stations of this kind, and the education of the mothers who have come to them, which have proved everywhere the most powerful weapons in defending the infant against preventable disease. The establishment of such stations in New York City led to a reduction of two-thirds in the infant death rate, with a saving of 4,125 infant lives. Everywhere the story has been the same, hence we may say with complete confidence that any community can reduce its infant mortality rate and save a definite proportion of the infant lives now sacrificed to ignorance by the establishment of an infant welfare station.

**The Public-Health Nurse and the Child-Welfare Campaign.**

At the right hand of the physician in the infant welfare station stands the public-health nurse. It is she who first interviews the mother, who does the weighing, and prepares the baby for examination. It is she who keeps the records, and it is she who shows the mother just how the physician's directions should be carried out, how the baby should be dressed and bathed, and how cow's milk should be so prepared and pasteurized as to make it safe if breast feeding is impossible.

Above all, it is the public-health nurse who follows the case into the home and there on the spot, with the utensils and the conditions which the mother has at her disposal, she teaches the principles of the care of the baby in the most effective way. She is the final link in the chain that connects the scientific investigator in his laboratory with the children he is working to save. She is the messenger who brings the last word of science to the place where it must really be applied if our knowledge is to be effective.

**What the Public-Health Nurse Does for the Older Children and for Adults.**

The educational work of the infant-welfare station is but one aspect of the work of the public-health nurse. When the infant grows up and enters school, his physical health is still a matter of grave concern. Defects of eyesight and hearing, decay of the teeth, tonsil and adenoid growths may develop and cause diseases, easily checked in time, but serious if permitted to run their course. It is the school physician who finds these defects; but once more it is the public-health nurse who follows the child into the home and sees that the needed hygienic care or medical treatment are actually secured.

When cases of communicable disease develop in the community, it is the public-health nurse who goes into the home and sees that the necessary precautions are taken to prevent the spread of infection from one to another. In tuberculosis, above all, she not only teaches the patient how to protect others from his infected discharges but how so to conduct his own life that his vital resources may be built up for a successful struggle against the internal enemy.

The nurse is the central figure in the modern public-health campaign. The major object of that campaign is the training of the individual in the laws of personal hygiene and public sanitation, and it is the nurse who brings those laws in effective form to the factory and to the tenement dwelling where they must be applied.

**Does Your Community Need More Public-Health Nurses?**

Is your city or town or country village doing its part in the protection of its citizens by placing at their disposal the beneficent services of the public-health nurse?

Experience in other communities will make it easy to answer this question. It has been found that for every 5,000 to 10,000 persons in a city or county there should be one general visiting nurse who can do most of the general public-health work as well, while for every 1,000 to 3,000 children in the schools in congested districts there should be a school nurse as well. Whether the infant welfare and tuberculosis nursing and school nursing shall be carried out by the visiting nurses or by separate staffs under the board of health or the board of education depends largely upon local conditions; but somewhere there should be provided nursing service equivalent to that specified above, the full time of one nurse for every 5,000 to 10,000 people and the full time of one additional nurse for every 1,000 to 3,000 children in the schools.

If your community is not provided with such public-health nursing service you may be sure that its citizens are suffering from illness that could and should be avoided and that its babies and grown persons are dying from preventable disease.

**How to Secure Public-Health Nurses.**

The first step in the organization of adequate public-health nursing service is to form a strong local committee representing the local health department, the medical profession, the women's clubs, the clergy, the press, and the organizations devoted to commercial and civic betterment. The local situation should be studied to see what facilities are already provided and where new public-health nurses can best be employed, by the health department, by the visiting nurse association, or by some other private organization. Next, funds must be obtained sufficient to pay a salary of at least \$1,200 for each nurse, with adequate allowance for expenses. Theoretically, these funds should be provided from the public purse, for health work of this kind is clearly a community responsibility. In many instances, however, it may more easily be begun on private initiative, for the education of budget-making bodies is often a slow process; and the babies can not wait.

After all preparations are made, the task of obtaining a properly qualified public-health nurse will be by no means an easy one. Work of this character requires special training and experience, in addition to the ordinary education of the graduate registered nurse, and

the demands of the war have made serious inroads upon the group of qualified women, already far too small to meet essential public-health needs.

The National Organization for Public-Health Nursing, 156 Fifth Avenue, New York City, will do all that is possible to aid local communities in securing public-health nurses and in planning for the development of the service. A committee of this organization, in a recent letter to the Woman's Committee of the Council of National Defense, has recently made the admirable suggestion that where a qualified public-health nurse can not be found a graduate nurse should be selected and sent for training to one of the schools which offer four or eight months' courses in public-health nursing. Such courses are given in New York, Boston, Philadelphia, Chicago, Cleveland, New Haven, and many other places, and the National Organization for Public-Health Nursing will furnish detailed information in regard to them. Miss Jane A. Delano, director of the department of nursing of the American Red Cross, has suggested that the services of those women who have taken Red Cross courses of instruction may often be profitably utilized as home health volunteers in the public-health campaign but only and always under the direction of a qualified public-health nurse.

#### **Public-Health Nursing a War Service.**

The present world struggle is a conflict not only between armies but between nations. Russia collapsed, not primarily from military weakness, but because her social and economic structure, founded on poverty and privilege, gave way, under the strain. The allies will win, not merely through the courage of their soldiers, but even more through the solidarity of their peoples, based on democracy and justice for the average man. The health and efficiency, and the enthusiasm that springs from health and efficiency on the part of the munition worker, the food producer, the shipbuilder, and the railroad employee—these are the sinews of this war; and, therefore, every step taken to maintain such vital assets is a vital factor in the winning of it.

