SCHOOL INSPECTION AND THE PUBLIC HEALTH SERVICE

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Coming amongst you, as I do this evening, a stranger and sojourner, it is not easy matter to find a subject which I can speak to upon you presumption. without presumption. As the subject of school hygiene is one of the latest developments of preventive medicine. I propose to deal with the relationship of school hygiene and medical inspection of school children to the general public health service and, attempt to show the close interrelationship and vital connection which must exist between them. I have heard it stated in England by persons ignorant of the conditions, the scope and the possibilities of the movement, that medical inspection of school children is the latest fad, founded upon the movement towards a benign state socialism, and that it is a death blow to parental responsibility for the physical welfare of their offspring. Those who make statements of this kind betray an ignorance of the trend of civic government to-day and a refusal to acknowledge the tremendous possibilities for social progress which medical inspection affords.

That "the child is father of the man" is as true of physical as of moral and intellectual development, and we shall all be in agreement when we state that at the foundation of all true national progress lies the problem of the child, its health and education.

No high ideal of citizenship can be attained unless we direct our most strenuous efforts to secure a healthy childhood. We may, perhaps, this evening, regard ourselves as standing upon some exoteric eminence whence we can survey the whole stream of child-life, flowing as a river from its tiny beginning in the cradle to the great sea of industrial life. It is of no avail to attempt to purify a stream if the source be a polluted one, except by purifying the source. The child must be the centre of interest and his well-being the end and aim of reform. If we look back upon the evolution and development of the public

health service, we cannot fail to recognize that there has been a remarkable shifting of the centre of gravity in the attitude of Boards of Health from the consideration of the environment to the consideration of the individual. Medical health officers are to-day less concerned with problems of water supply, sewage disposal, etc., than with the attempt to grapple with the infant mortality, the prevention of tuberculosis and zymotic disease. In this regard of the individual, medical inspection is destined to play an increasingly important part, its foundation must therefore rest upon the broad basis of public health, as an integral part of the great nexus of ameliorative agencies which are at work. The school lies midway between the state and the home, and it is through the school that it is most feasible to reach the home, to gauge its condition, and to remove to some extent at any rate, the evil results of those conditions. It is, moreover, the training ground of the parents of the future and the seeds of intelligent instruction sown here will fructify and yield a harvest of health for future generations. At present only too often "The hand that rocks the cradle wrecks the world." Speaking of conditions in England, the external environment has been improved beyond all knowledge within the last fifty years, and the diseases which were associated with environment have largely vanished. Typhus, relapsing fever, enteric fever, malaria, and even scarlet fever have vanished or have been largely reduced in frequency and severity; yet our infant mortality has remained the same year in and year out, thus proving that the causes which produce our high infant mortality rate are less environmental than personal, and are due to conditions in the homes and habits of our people. This is clearly seen by a comparison between the various mortality rates of rural and urban districts, or, still better, between the rates of different areas in the same city.

Year by year we in England and Wales