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PROGRESS and improvement are proven by the evidence of actual accomplishment. The truth of this statement, if applied to public-health nursing, is shown by the subject-matter of the papers that have been furnished by the Public Health Nurses of British Columbia which we are able to publish in this the third number of the BULLETIN.

As the work is carried on day by day the difficulties encountered seem to be without end and one begins to feel very much like the man who "could not see the forest for the trees."

In reading the papers submitted, the orderly arrangement of the trees becomes apparent and one realizes that it is through orderliness and steady growth that the forest becomes possible.

Sunshine is breaking through the foliage, the shadows are disappearing, the ground is drying, and progress along the road to health is being made.

The progress is very evident when comparison is made with previous issues of the BULLETIN. It is quite apparent that difficulties are being overcome, the scope of the work is being enlarged, and as the development proceeds the nurses are unconsciously learning that real success can only be obtained by utilizing every avenue of approach toward the formation of a curriculum, the object of which is the establishment of "health habits." In other words, they are learning that a better balance in health services can be maintained by generalization than by specialization.

Norman R. Carter, D.D.S., called the attention of the Provincial Board to the necessity of attending to the dental work in a number of small schools in his district on the Arrow Lakes. We were only too glad to co-operate and we wish to express our appreciation of the manner in which Dr. Carter handled the situation. At a small cost and with a great deal of personal inconvenience, he went through and we are very thankful that the children have been taken care of. We are also thankful that we have found a gentleman with a sense of public duty, through whose representations the Board was able to act. We are publishing two articles in this BULLETIN from the Doctor's pen.

The Provincial Board of Health is very conscious of the hearty co-operation that it is receiving from the nurses of the staff. We are building up a personnel of which any department may be proud.

In addition, our efforts are to be supplemented by the direction and advice of two outstanding figures in public-health work. We are fortunate indeed in the fact that the University of British Columbia has added to its staff Miss Mabel Gray as Assistant Professor of Nursing and Dr. W. H. Hill to be Professor of Bacteriology, Health and Nursing.

Miss Jeffares, of Duncan, is the responsible Editor for this issue.

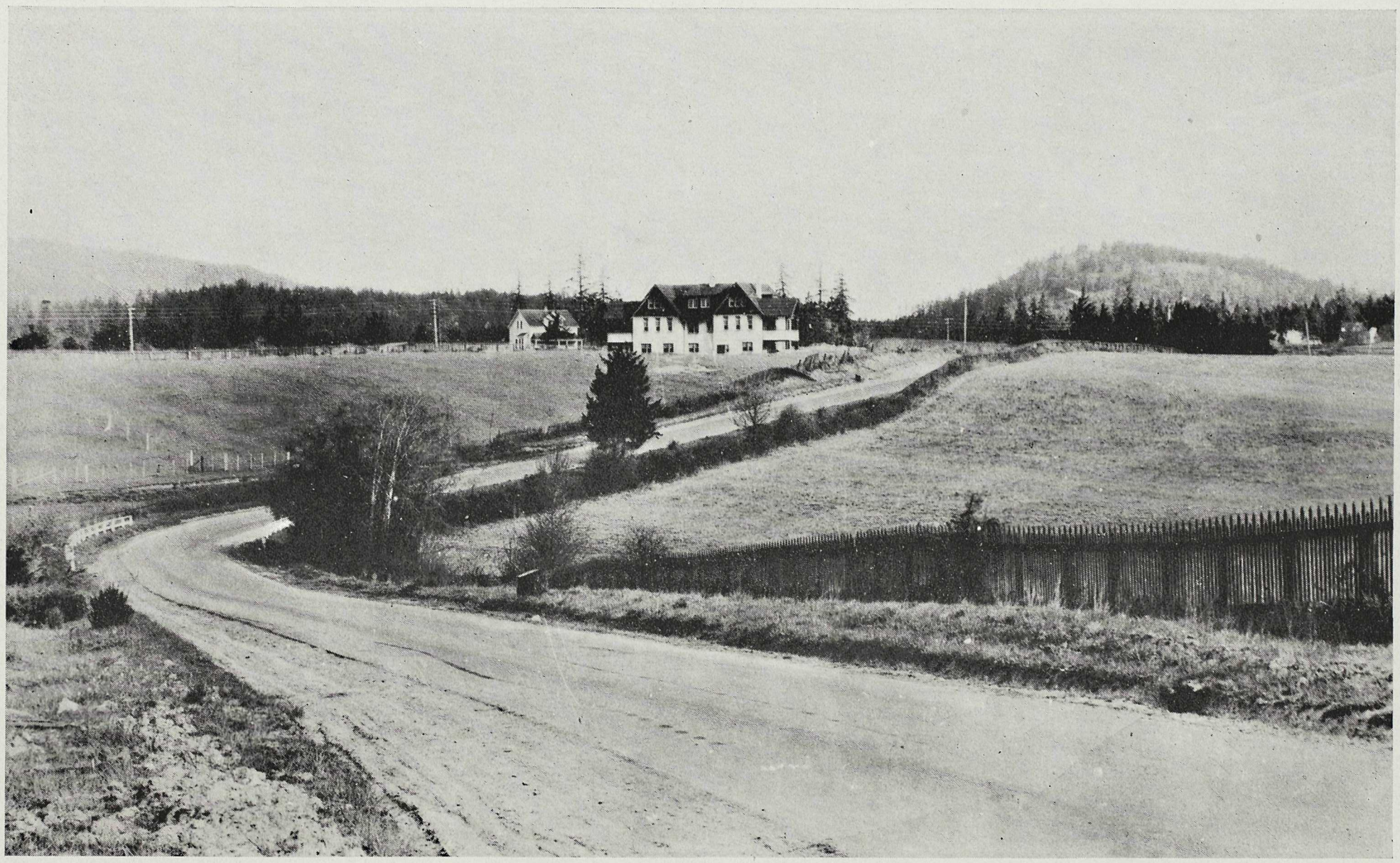

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TABLE OF CONTENTS.

	PAGE
Editorial.	1
Conservation of Children. By Katherine Glover	4
The Public Health Nurse at Keremeos. By Olive K. Gawley, R.N.	6
School-work in Armstrong. By P. A. Charlton	8
Greetings from Pioneer Sayward. By Edith M. Walls	9
Esquimalt Rural Nursing Service. By H. Kelly, R.N.	9
Qualicum and District. By H. Murray, R.N.	11
Public Health as a Career. From the "New York State Bulletin"	12
Problem of Mouth Health among Children in Rural Districts of British Columbia in Relation to Public Health Nurses. By Norman R. Carter, D.D.S.	12
Public Health Nursing in Ladysmith. By S. A. Hewertson, R.N.	14
Kamloops. By J. Campbell, R.N.	14
Dental Clinic for Rural Schools in Arrow Lakes District. By Norman R. Carter, D.D.S.	16
School Nursing in a Mining Town. By Jean A. Dunbar	17
The Public Health Nurse at the Fall Fair. By M. R. McClung, R.N.	18
Fall Fair Exhibits. By I. M. Jeffares	18

(American Child Health Association, 370 Seventh Ave., New York, N.Y.)

CONSERVATION OF CHILDREN.

Governor Pinchot, of Pennsylvania, the great advocate of conservation, said in a May Day proclamation last year: "Children can be consumed as well as trees. No one with any sort of common sense or patriotism questions the essential wisdom of the conservation policies initiated by Theodore Roosevelt, which first were restricted to the natural resources of our country, its forests, its coal, its oil, its minerals, but which gradually have broadened. It is inconceivable, therefore, that any one will question a still higher form of conservation, the conservation of the health of our children. The babies of to-day will, in a generation, be the manhood and womanhood of America, guarding its ideals, controlling its destinies. It is a duty than which nothing can be plainer, to give at least as much thought and care to these children as we do to our natural wealth. No substitute will ever be found for healthy children."

We have come at last to that highest and most fundamental economy, the conservation of our children. Ellen Key, the great Swedish writer and philosopher, at the opening of the twentieth century christened it "the century of the child." The first quarter of this century has rounded to a close, and, pausing to reckon its achievements, nothing stands forth more conspicuously than the changes it has brought in the lives and prospects of children, the efforts which have been inaugurated looking toward the conserving of child life and happiness, the changed attitude towards the child.

In these twenty-five years we have cut the hazards of life for the newly-born child in half. Where two babies died at the beginning of the century, only one dies now.

Largely due to the increased protection of children in the early years of life, the average span of life has been lengthened by nearly ten years within the past twenty-five years.

A new protective government machinery for promoting the health of children has been set up in the Children's Bureau.

An appropriation, jointly Government and State, for the protection of maternity and infancy, created through the Sheppard-Towner Act, is a concrete acknowledgment that our children need care, study, and protection, as well as our agricultural resources.

Public Health Boards, newly roused to the need to conserve human health, are turning their attention to the group where the greatest danger and the greatest hope lie—the children.

In our schools education has expanded to include the physical needs of children as well as the mental.

It is in keeping that, at the close of this first quarter of a century, which has accomplished more to ensure the rights of children than innumerable centuries preceding it, there should be launched a festival day to celebrate all that has happened and to look forward to greater achievements. That is the significance of May Day for Child Health, a national festival of childhood.

May Day, 1926, is the third of these celebrations. Each year has marked a decided increase of momentum and each year leaves a permanent deposit of encouragement and constructive effort. This year attention is focused upon the perfect child. Every community through the country is urged to examine into the well-being of its children, to see them in comparison with perfect childhood, and to set in motion some endeavour which looks towards that goal.

These are a few facts which should arouse us to national and local efforts to conserve child-life.

Of the 1,500,000 of our population who die each year, it has been estimated that 42 per cent. die from preventable causes. This waste occasioned by this preventable loss is estimated at a billion dollars.

Forty thousand school-children die each year from causes which are preventable.

There are 400,000 cases of typhoid fever each year, 10 per cent. of which are fatal, and 75 per cent. of these cases are unnecessary.

Diphtheria, which is considered preventable and for which there has been a curative for thirty years, takes the largest toll of death among children of any of the five common communicable diseases.

Of all crippled adults, one-third receive their injuries during the first six years of life and a very large percentage are needlessly handicapped.

One hundred per cent. of all mental defectives are recognizable during the first six years of life.

Besides the clarion message, "May Day is every child's day," which was carried in parades and pageants, the May-pole programmes, through the radio, the press, proclamations of the President, and of governors and public-health officials, these are some of the unusual things which communities did last year as a result of May Day:—

Forty thousand citizens of one city waked up on May 1st to the greeting on the caps of their milk-bottles: "Good-morning; this is child-health day."

All mail from the Board of Health in one State for a month carried the slogan: "The first of May is every child's day."

Throughout one State the committees appointed for May Day resulted in small committees to form a permanent nucleus for the protection and promotion of the health of children.

Several communities in the same State set themselves upon baby hunts for the year 1925–26 to check up on its fundamental human book-keeping and to discover the needs of their babies.

Department stores in various parts of the country held baby weeks. In some stores a thousand or more babies were examined by doctors and nurses and many thousand mothers received guidance on the care of their children.

In one State a beginning was made to get local committees to present to the people of their communities an exhibit of the services which are available for the health of children in their communities, with the idea of following up through the year with a study by a careful group in each district of the health needs of the children within their district.

Another State started on a campaign to make every day a child-health day by issuing a Child Health Club card. Any child whose parents promise to have him examined periodically and to use every effort to correct defects and bring about better health along constructive lines may become a member of the club.

In another place a Health and Happiness League was inaugurated.

In others drives were started to round up the pre-school children and see that they are a hundred per cent. fit before entering school.

May Day was, in fact, a great national rally day in this new human conservation. It will be a greater rally day this year.

Mr. Hoover has said: "Each year the results will double until it has become a national habit, an almost subconscious impulse, to remember the child wisely, constructively, from the day that parents are born until the day their children become parents; that is, always. Then no words of any one man or woman will be necessary in defence of the nation's will that its children shall be well."

KATHERINE GLOVER.

THE PUBLIC HEALTH NURSE AT KEREMEOS.

My long experience in public-health work in cities, towns, and rural sections of Ireland and British Columbia comes to my assistance in answering the following questions asked me by nurses and others in British Columbia.

In cities and large towns there are many organizations of infinite value to a Public Health Nurse in her work, and no matter how strenuous it may be, it is a sinecure compared with the duties of a rural nurse, who so often must take the initiative in many activities in her district.

All Public Health Nurses should be blessed with the three virtues, Faith, Hope, and Charity, and remember the greatest of these is Charity; but she must have Hope and she must have Faith, and she need not expect Charity. She is an outsider (I write now of the rural) whose presence may be resented, whether young or old, staid or gay, pretty or plain (we have no ugly nurses).

She is a public servant sent to that district by request of the majority of the people, but the minority (until they require her service in trouble or illness) may consider her upkeep a waste of good money.

She must remember that every move is noted and criticized either favourably or otherwise, according to the spirit of the critic.

The private-duty nurse also considers the Public Health Nurse usurps her place, forgetting that 99 per cent. of the cases would be undertaken by untrained help. The medical profession are conservative and, as at the beginning of district and other forms of nursing, were prejudiced. However, they are gradually getting to know the help a Public Health Nurse may be to the Medical Health Officer as well as to the man in general practice.

There are cases that must be transferred to hospital; still, I believe, two-thirds of the patients treated in institutions at the present time could

with the supervision of a Public Health Nurse be cared for in their own homes at a minimum of cost to patient and community.

When we realize the anguish caused by separation of families, it surely must be a detriment to the perfect peace of mind necessary to our invalid's welfare.

Our people must know and understand much more than they do of illness and its causes and prevention of complications, but are we doing our share in this? Do we consider ordinary men and women capable of nursing a serious case, such as typhoid, pneumonia, or even a minor operation? I fear we do not; but to my personal knowledge serious cases have been nursed successfully at home, with the supervision of a Public Health Nurse and the co-operation of a physician or surgeon, at about one-sixth the expense, which alone is quite a consideration to many householders at the present time. One such case will do more to gain friends for our work than "yards of speeches" and the nurse's advice and help will be sought by old and young; even the black sheep of the district will learn to respect her and to come to her for sympathy and advice.

OLIVE K. GAWLEY.

QUERIES AND ANSWERS OF A PUBLIC HEALTH NURSE.

1. What is a Public Health Nurse?—A graduate nurse, who afterwards has a special training in prevention of disease and the care of the mentally, physically, and morally ill.

2. What are her duties?—To do all in her power, by precept and example, for the good of the community in which she works, the prevention of disease, and the alleviation of suffering.

3. Is it necessary for a highly trained, competent nurse to take special training before attempting public-health work?—Yes. The hospital and private-duty nurse is trained to personally care for the patient or constantly supervise the work of probationers. The Public Health Nurse must teach untrained assistants, who may never find it necessary again to care for the sick, in order that they may for the one particular case.

4. Should a nurse on the staff understand the financing of the service? —Yes.

5. Should the nurse of higher capabilities be sent to the rural or urban districts?—The nurse with the very best training should be sent to the rural district, as in many cases medical and surgical assistance is scarce and the nurse must take responsibility, owing to lack of adequate transportation and oftentimes poor roads.

6. Why do many capable Public Health Nurses object to rural or small-town work?—Want of congenial companionship, very poor housing accommodation, with few modern conveniences to be found in the homes. Also inefficient transportation and a general prejudice among the people to any innovation that is hard to combat.

7. What is the best means of financing the service?—Provincial health tax and school tax.

8. Can a Public Health Nurse in a district prevent higher taxation, and in what way?—Yes. By prevention of epidemics; by prevention of

semi-invalids, who are so through preventable diseases; by prevention of waste in educational benefits caused by defects that may be remedied or prevented; by child-welfare or prenatal service, including the prevention of abortions, which often are the upshot of the dreaded expense of child-birth.

9. Why should a Public Health Nurse expect the highest salary in the profession? She has a wider education, more responsibilities, and more strenuous work and nerve strain than any other nursing section.

10. Why should the Christian churches take an interest in Public Health Nursing?—The greater part of the ministering of Christ was shown in helping those in trouble and distress, in healing of the sick, and the care of the children.

11. If mothers are indifferent to nurse's advice, should visits be continued in that home?—Yes, in a social way, always remembering that, no matter how hard the ground, some seeds will germinate.

OLIVE K. GAWLEY.

SCHOOL-WORK IN ARMSTRONG.

One of our greatest problems is the large number of malnourished children. Why this condition should exist in a district so far famed for its dairy and vegetable products is hard to say. Probably the long truck-drive, necessitating the children to start out at an early hour and arrive home in the early evening, has something to do with the condition.

Quite a number have had defects remedied and already show great improvement. We hope to hold a tonsil clinic in the summer and we are already planning a two-weeks' outing for those who would not otherwise get a change.

Since the New Year a hot drink, cocoa or soup, has been served to the pupils staying for lunch.

Nutrition classes have been started. In the junior rooms they are having rest, milk-drinking, and vegetable-eating competitions. Some of the teachers have devised various devices for adding zest. In one room the underweight pupils have pasteboard houses which they are shingling. Each shingle is shaped like a milk-bottle and represents a quart of milk taken. In another room a mountain-climbing expedition was started, the pupils making the climb from Danger Valley to Safety Peak. Some of the pupils have gained as much as 6 lb. in one month.

It has been harder to interest the senior pupils, but quite a marked improvement has been made since they have made graphs, on which they keep their weekly record. A prize has been offered, to be given the last of June, for the graph showing the best record and result.

In September 72 per cent. of the pupils were underweight. At the New Year this rate had decreased to 43 per cent. Although this is but a step in the right direction, there is a long road to go yet and the goal can only be reached by untiring effort and interest.

P. CHARLTON.

GREETINGS FROM PIONEER SAYWARD.

Time changes all things. It is now four years since I was appointed Health and District Nurse for Sayward, and in place of past opposition and ignorance of my work I now feel that the majority of the residents realize I can be of assistance to them and apply to me for help from time to time.

In the two schools in Sayward we have Health Chore Crusades, the children receiving marks for the "chores" attended to daily; a prize being given at the end of the term to the one receiving the largest number of marks.

Wishing my fellow-workers the best of luck in their various undertakings.

EDITH M. WALLS.

ESQUIMALT RURAL NURSING SERVICE.

Previous reports have dealt chiefly with the inauguration and aims and objects of this association, the area covered, and the difficulties met with in establishing the service, etc.

In this report I propose to deal with the growth and development particularly, though it will be necessary to go back at times and refer to early difficulties in order to show clearly the comparison between now and then.

We are still faced with the difficulty of "rendering account," although there is quite a different spirit existing now among the more intelligent people—those who are observant and who carry an open mind and are prepared to listen and learn.

To render account in public health is a difficult matter, and seeing that our capital comes from the public it is only reasonable to expect that we should be prepared to render an account of our stewardship. As far as the expenditure of the money entrusted to the officers of an association is concerned, an accurate account can be given, but the real and actual returns for the investment cannot be put down in black and white; they are only materialized in the improved health of the district in which the service operates.

Such things as the development of right habits of living, the breaking of wrong habits, and the eventual evidence of the benefits of a public-health service are of naturally slow growth. Therefore for the first two or three years after the inauguration of such a service the committee in charge have a hard road to travel, and are often faced with the question, "What are we getting for our money?"

It takes a considerable time to educate the people to the fact that a Public Health Nurse is not merely there to attend the sick—she is there to teach the people not to be sick, but to obtain health and keep it; but they do become educated in time, though much patience and perseverance is necessary for a time. Of course there will always be the few who refuse to see, but luckily they are in a comparatively small majority and merely serve as an incentive to better work as a general rule.

One notices with gratification the different outlook of the parents towards the work of the nurse. At first the natural question in reply to the information of the child that "nurse came to school to-day" was, "Why, who is sick?" But now it is, "What has the nurse been teaching you to-day?" Then take the prenatal work. How many young mothers-to-be have said to me after I have visited them and talked with them, "Why! I didn't know; I had no idea that I could do—or fail to do—so much for my baby." What a different aspect is put on the case when, instead of ignorant, if well-meaning, commiseration and "you poor thing" from sympathetic neighbours, the expectant mother receives a visit from a cheerful nurse and hears: "You glorious creature, what a wonderful thing is going to happen to you. I wonder if you realize how very important you are and what you are responsible for." And then, by carrying out the nurse's instructions, in reply to inquiries over the phone the answer is given: "A fine baby; yes, mother and child doing well." And this part of the work is fully realized by the people in the districts covered by the above service.

Then the careful watching of the care of the infants; the children of pre-school age; the school-age children and the budding youth. All this comes under the heading of "Public Health Nursing." All this?—and how much more?

In January of this year we held our sixth annual meeting and the growth and development of the service has been remarkable. The people's money has been handled economically, good service has been given, and their confidence won. In the five schools in my district the trustees and teachers give excellent co-operation. The children enjoy and take a keen interest in their health drills and exercises and my Girls' Health Clubs continue to be a great success.

This year—in May—I am co-operating with the teachers in staging a children's pageant; this will be on quite big lines and my part of it will be the health side. As many of the children of my districts as possible will take part in this pageant and the people will be given an opportunity to see the value of health-teaching.

Two dental clinics a year are held, which means an examination of the teeth of all the children in the five districts comprising the E.R. Health Centre. During the midsummer and Easter vacations all the children whose teeth need attention, if the parents are willing for the work to be done under the auspices of the service, receive expert attention. And we find that the two clinics per year are sufficient and keep the cost of administration down to a minimum. Of course, each month the nurse examines the teeth of the children at her monthly inspection, and any work necessary is done by the regular dentist at his office in town, the nurse transporting the children to and fro. Thereby the teeth are kept in condition and the foundation of good health laid.

Slowly but surely the public are being weaned from their conception of the mission of a Public Health Nurse. The mental vision (so ofttimes even pictured) of an "Angel of Ministry cooling the fevered brow of the sick" sort of person cannot continue to exist in the face of the busy, healthy-looking, health-teaching nurses out in the field in public-health

work. Instead we have the vision of a teacher teaching health exercises, toothbrush drills; teaching the value of supervised play, exercises to develop the lungs and muscles and bone of the growing child; teaching the mothers how to teach the children, and getting her reward in the demonstrated confidence of the children and parents and the evident improvement in the general health of the districts in which she works. The upkeep of a Public Health Service is really an insurance against sickness, as by the visit and a word of advice in time from a competent and qualified nurse often a serious sickness is averted, because the nurse knows and will advise the calling-in of the family doctor immediately when necessary; therefore the answer to the question, "What are we getting for our money?" is, "In so far as possible, an insurance against sickness."

My conception of an ideal health centre is somewhere where the children gather to play under proper supervision, where the mothers will come for advice, where health club meetings can be held; in fact, a training centre for health where anything even suggestive of sickness is strictly taboo. I do not think that the day is far distant when this conception of a health centre will be more or less general. For my own part, with regard to my own work, that is my aim, and I am pleased to say that I am backed by my committee.

H. Kelly.

QUALICUM AND DISTRICT.

Here we have a newly organized "public-health district." Less than a year ago several hundred people around here did not know or have any idea what a Public Health Nursing Service represented, but now everywhere one hears of our Health Nurse and daily new questions arise concerning the work.

I am very fortunate in having a strong committee who are interested in all welfare and health work, perhaps more particularly in that branch which deals with disease prevention.

Just recently there were a few cases of scarlet fever in a district not far from mine, and the watchful eye kept on the school-children of my district, as well as the visits paid to absentees, appealed to many members of the community who had up to then been indifferent.

The day's work is considerably varied in a rural district; for instance, we start out in the morning to see a delicate and sickly baby who is cared for by a young and inexperienced mother. The little mite seems to recognize the uniform and manages a sickly smile. You may be sure any instruction and advice given is very welcome here. While in that corner of the district there is a wound to be dressed. An unfortunate man has badly mangled his hand in some machinery at the mill, and as the doctor lives in a town some 30 miles distant the District Nurse has been instructed to do the dressing.

Probably we have planned to do a school examination after the last two calls, but on phoning Central find that a prospective mother requires our services at once, and so off we go in the opposite direction, thinking of the old saying, "The best-laid plans of mice and men, etc."

The quickest and best results are perhaps to be found in the schools, the gradual decrease of physical defects going far to prove the value of pre-school and school supervision.

H. MURRAY, R.N.

PUBLIC HEALTH AS A CAREER.

Choose a public-health career for two reasons only—because it attracts you and because you believe yourself fitted for it.

You have broad technical knowledge. Give others the benefit of it, but only as occasion requires.

Official representatives of the people and the people themselves may not understand public-health work, but frequently possess other knowledge which may be of service to you.

Maintain your dignity at all times, but do not stand aloof from human contact.

Make many friends, but few intimates.

Be a good listener, but not too ready a talker.

Practice public speaking. Eloquence is a rare gift, but is not essential to the command of respectful attention.

Be loyal to your associates and true to yourself.

Never permit political sympathy to influence an official act.

Be not oversuspicious of evil intent. Give every one the benefit of a doubt.

Be willing to grant favours to all those that seek them worthily, provided that it is not incompatible with the performance of your sworn duty.

Have vision, but not be visionary.

Lead the procession always, but look behind once in a while to see if you are being followed.

If you cannot obtain all your objectives, take what you can get, and try again.

Know when you are beaten, and take your defeat gracefully.

Be willing to compromise in order to reach an objective, but never with your conscience.

Frankly acknowledge a mistake, but do not make it a second time.—From the "New York State Bulletin."

PROBLEM OF MOUTH HEALTH AMONG CHILDREN IN RURAL DISTRICTS OF BRITISH COLUMBIA IN RELATION TO THE PUBLIC HEALTH NURSES.

The pain and trouble, the lost time in the school-room, the impaired digestion and general irritability of the child with toothache is obvious to you all. The after-effects evidenced in crooked and ineffective teeth, in rheumatism, in heart-troubles, in dental bills for restorative operations, and general susceptibility to infectious diseases are being generally recognized.

The answer is *prevention.*

Get these children to the dentist as soon as possible. As a rule, if the child has toothache the mischief is already done, there. Prevent the trouble. Stop it before it starts. Carry this message, personally wherever possible—congratulating the child that evidences a well-kept mouth and kindly admonishing the many who require it. Your words and your occasional visits are much more momentous things to the little child than you dream.

Instruct and encourage the parents; giving information about the sixth-year molars, the loss of which is so general and such an appalling matter. Show them the importance of continually keeping after their little ones to brush their teeth with some intelligent thought; appeal to that universal desire in parents that their children have opportunities superior to their own, and urge that existing faults be remedied by the dentist at the earliest opportunity.

The teacher's influence in the school is probably greater than any other outside the home, and fortunate indeed are those children who have an æsthetic example given them there. Stand back of the teachers with health talks, distribution of health cards, samples of dentifrices, etc., at the psychological moment, and through them act and talk always as though the dental clinic and the dentist's services are happy and most desirable privileges.

Prevent mouth-troubles by urging cleanliness and having the mouth-tissues in such shape that vigorous use can restore tone and comfort and health.

At the present time we believe that the entrance to our bodies is best cleansed by the use of a toothbrush; what is used upon the brush is of less importance, although a dentifrice makes the toilet a more pleasant task. One can brush the teeth a great deal without cleansing them. Watch this and see that the brush is intelligently used. Use lots of water, rinsing and regurgitating this back and forth till all signs of dentifrice or food debris disappears. The important time to do this is previous to retiring at night, but urge that it be done after meals or whenever the children realize that the mouth feels unclean. Appeal to them to have the inside of their face as clean as the outside, or that their teeth be cleansed as often as the dishes and other utensils connected with meals. Children get this idea, I find. The point is, *Repeat it;* stick to the repetition; don't be discouraged; by so doing you prevent these troubles before they start.

But, if they have started, perhaps these hints will be of benefit as a matter of emergency relief: Tincture of iodine used as a counter-irritant on the gum adjacent to the aching tooth will help. Dry the gum a little and wrap a wisp of cotton around a toothpick to make the application.

On a tooth which cold affects, and possibly aching after eating, where the trouble seems to be from a living nerve-pulp—clean the cavity of debris, if possible; apply a little ball of cotton about the size of a pin-head, dipped in oil of cloves, and cover with a larger piece of cotton.

Where the face is swollen, aching perhaps at night and upon lying down, with hot drinks, etc., hurting, use beechwood creosote, as before, on cotton.

When in doubt use creosote.

Don't apply heat to the face; no hot-salt bags or hot-water bottles. If you must use heat, give a hot foot-bath—that will help. Do this and give aspirin in small doses if the person is in agony. And don't forget a good cathartic, one that will make a watery stool; not a lubricant like oils, but Glauber salts, Epsom salts, fruit salts, etc., given in medium doses, but over a longer period than you think necessary. Have the patient drink much water.

But the best way to cure toothache is to prevent it before it starts—get that point over and the problem of mouth health among all mankind is well faced indeed.

NORMAN R. CARTER, D.D.S.

PUBLIC HEALTH NURSING IN LADYSMITH.

Ladysmith being a mining town, practically all the men are employed in the mines and a deduction is made from their salary to take care of the hospital and medical treatment.

Apparently this is the reason a great many are opposed to the idea of a Public Health Nurse for the town. The nurse, however, is gradually being appreciated, especially in the control of infectious diseases. The children being inspected monthly, any case of suspect infection is reported at once to the doctor and the child excluded.

Much pleasure is derived from home-visiting, as this gives the parents an opportunity of asking for advice and discussing the minor defects of any other members of the family.

The majority of the children are showing an increased interest in their personal appearance by keeping their teeth clean and by living up to the Health Rules. This is perhaps more noticeable in the rural schools, where children of all ages are in the same class-room.

S. A. HEWERTSON, R.N.

KAMLOOPS.

The pleasant first impression one receives of this little town is a lasting one, and especially is this so in fall, when the homes are covered with crimson Virginia creeper and lawns and boulevards are still fresh and green owing to an excellent irrigation system, whilst the background of brown foot-hills covered with sage-brush helps to enhance the vivid colourings of flowers and lawns.

The Medical Officer of Health is also school doctor and I had already met him, but to become still better acquainted with the work in the city I visited all the doctors, six in number.

They were exceedingly friendly and offered their services whenever necessary, but also informed me there would be no bedside nursing re-

quired, adding I would find plenty of other work to do, especially in the schools.

Why no bedside nursing? The reason was not far to seek. This is a railway town and has an excellent hospital with a training-school. The doctors look after the employees and their families under a special agreement with the railway companies, and under the same agreement the employees have a certain amount of hospital facilities free.

With a population of about 5,000 one naturally would not expect a large school enrolment, but in the public schools there are 1,000 children, whilst a number of children attend the Convent and private school.

I soon found there was much to be done along health lines in the schools, and as the classes are somewhat divided up owing to lack of accommodation, one school having classes in three buildings in different parts of the town, it meant much walking and dividing-up of time when making out a time-table.

Teachers and children take a great interest in their health-work, with the usual few to make the exception, but a more congenial and co-operative group would be difficult to find.

The same may be said of the parents, perhaps the enthusiasm of the children helping to some extent, for the home-visiting is one of my pleasantest duties.

The girls in one class have for two months in succession gained 100 per cent. for having all physical defects attended to, their record for cleanliness also being 100 per cent., whilst the boys gained 98 to 99 per cent.; those who had brought down the record were turned over to the others to see what could be done with them during the ensuing month. Of course life would be too easy if all classes were equal to this one.

A little girl who is especially neat and clean one day informed her mother that she was going to take a holiday from the cleaning business. Her mother was rather astonished and asked the reason. Well, the nurse would not be in their room for a day or two as she had counted the rooms so she was going to have a rest. Her mother cautioned her and explained that it wasn't specially for the nurse that she formed health habits; but no, off she went. On her return that afternoon she was rather crestfallen. Having forgotten the morning incident, her mother was much surprised, on inquiring what was wrong, when the little one answered: "Mother, you are disgraced for life and I'm disgraced for life, for the nurse did come to our room and brought the doctor with her and he just pointed at my finger-nails."

A very pleasing feature of the work is the well-baby clinic, which is held under the auspices of the Red Cross Association. The mothers appear to enjoy coming and meeting each other and comparing notes about their babies, and I believe more than one good friendship has resulted.

I also find this a good opportunity for having little chats with the mothers about some of their children who are not of school age.

The Kamloops Junior Brotherhood does much to develop the sports side of the children's lives, emphasizing that sport must at all times be clean throughout and their record as basket-ball players shows the effect it has had upon them.

Almost every one in the town belongs to a society or lodge and much good work is done by the members of these various associations, but I feel sure that if a Parent-Teachers' Association or Women's Institute were formed much could be done in getting school and playground equipment that would be of great value to the children.

Meanwhile Kamloops, with its clear air and bright sunshine, remains a very delightful place to live in.

J. CAMPBELL, R.N.

DENTAL CLINIC FOR RURAL SCHOOLS OF ARROW LAKES DISTRICT.

During the past summer (1925), thanks to the Provincial Board of Health, a dental clinic was made available to the children in this area.

There are sixteen schools, with from eight to twenty pupils in each, distributed along a lake of about 120 miles.

In June a preliminary survey was undertaken, estimates made, and examination cards sent to parents, who were asked to pay one-third of the expense involved in doing the required dentistry for their children.

In September and October the dentist visited each point by launch, staying the period required to complete the work for those desiring it; setting up his equipment in the nearest available point to the school—sometimes in the living-room of a ranch-house or a summer-home verandah, the meeting-hall of the Women's Institute at one place, and once in what had been the bar-room of a country hotel.

The children were excused by the teacher in couples as a rule; the pupil with work completed sending back another on his return to the school-room. In this manner we disturbed the classes as little as possible.

When the work of each school was completed the dentist distributed literature and addressed the school on mouth health and care of the teeth. On account of his personal contact with each individual present, this was an ideal occasion and the message was put over in a very intimate and effective manner. Hardly any of these children had ever been attended by a dentist previously. As a rule they came to us absolutely unafraid, and despite the fact that often their work was of a most exacting nature we had no undue trouble with any of them. We found it best to take first the youngest pupils in a group, doing deciduous extractions and prophylaxis for them, calling the older pupils later, rather than the reverse order. When the babies seemed to not mind it all, the older ones were less apprehensive.

At some points the dentist was received by a committee and treated like a hero; at others he would waste hours getting some one with a "go-devil" to transfer his baggage. At some points the whole populace seemed enthused; at others perhaps only the teacher or a single member of the School Board were "leaven to the whole lump."

In two schools not a single card was signed by the parents; in nine schools all cards were signed; in eleven schools all scholars availed themselves of the privilege and all work was completed.

Not 10 per cent. of these children had ever seen a dentist before, yet we found a half dozen perfect mouths among them. To offset this, however, there were about a dozen children from 12 to 15 years of age whose mouths were absolutely ruined, these requiring often more attention than all the rest of the school together. We regret to say that it was this class of scholar (those who needed it most) who too often avoided the clinic.

However, outside of the direct benefit to the children, the dental clinic has awakened a real interest in mouth hygiene. Often where only a small per cent. of the parents signed cards, when the clinic actually presented itself every one in the school came in as the work progressed. Inquiries concerning another such opportunity are constantly coming in. May good fortune attend this pioneer work.

NORMAN R. CARTER, D.D.S.

SCHOOL NURSING IN A MINING TOWN

Fernie is a mining town with a population of about 5,000, situated in a valley along the south-eastern borders of British Columbia. My first impression on arrival was one of absolute isolation, which feeling, however, gradually disappeared as I found the people, though about one-half foreign-born, were both hospitable and interesting.

In Fernie we have 1,000 school-children, attending one large grade and high school and two primary schools at separate ends of the town. At the first meeting of the School Board I attended it was suggested, among several other matters, that perhaps it would not be wise for me to approach the parents on the subject of malnutrition. As there were a large number of underweights among the children, I felt something should be done until such time as it would be advisable for me to do so, and the following plan was decided upon:—

After each monthly inspection I now divide the class into three groups (when necessary); all of average weight and over receive *white* tags, those from 1 to 7 per cent. underweight receive *blue* tags, and those over 7 per cent. underweight receive *red* tags. I explain to the children in the class-room what the different colours mean and have them repeat the following:—

Cards of *white all right,*
Cards of *blue won't do,*
Cards of *red, danger ahead.*

I then urge them to see how quickly they can all receive white cards and so compete with the other rooms in the school.

A Health Fairy's House.—In the junior rooms I have found that the making of the Health Fairy's House is of assistance. It is made from a sketch of a house built of bricks, with shingled roof and fancy windows. The children are told the story of how the Fairy becomes beautiful by keeping all the health rules, until the wicked witch "Ignorance" visits Fairyland and burns the Fairy's house down. The Fairy's friend Happy, the Health Clown, comes to the Fairy's assistance and together they plan how the Fairy's house can be rebuilt, stronger and prettier than ever,

with the assistance of all the boys and girls in the schools keeping their health rules. For keeping one rule a shingle is coloured on the roof of the house, and for another a brick is coloured, and for still another a coloured glass is put in the window.

We began in Fernie with one Fairy's Health House in a primary room and now have seven. The teachers have been very much interested and demonstrate this by inquiring each day how many have kept the Health Rules the day before.

JEAN A. DUNBAR.

THE PUBLIC HEALTH NURSE AT THE FALL FAIR, KELOWNA.

My "corner" at the Exhibtion was as much a success this year as formerly. The comments were different, but still complimentary. I had three different illustrated "Health Talks," "A Trip to Healthland," "The Story of the Fly," and a "Comparison of Two Homes." To illustrate the latter, the boys of the Manual Training School made two houses, one neat and clean and the other in a state of dirt and disorder. A large placard was attached to these, asking "Which is your Home?"

The material used to illustrate the "Fly Story" cost me little in actual money, but a lot of thought and work. I had six large flies made of wax and dyed some excelsior brown to look like manure. I placed a fly in front of a manure-pile with a notice, "She has laid 100 eggs here." Next I displayed maggots (made of white birthday candles) beside a small manure-pile, together with some cocoons (brown jelly-bean candies). Then some large flies, and a plate of food with a fly on it, a garbage-tin (a baking-powder can) with garbage slopping over the top and the lid half on with a fly on the edge. The last illustration of all and one that attracted much attention was that of a doll in bed, representing a sick person with a fly in the room.

The "Trip to Healthland" was much harder to handle, but the cost was small and it made a pretty and interesting display. For grass I dyed excelsior green.

M. R. MCCLUNG.

FALL FAIR EXHIBITS

The Cowichan *Leader's* report of the Cowichan Fall Fair held at Duncan, September 19th and 20th, 1925, included the following:—

"*Health Centre Work.*—In the hall was placed a neat exhibit arranged by the Health Centre nurses, Miss I. M. Jeffares and Miss E. S. Naden.

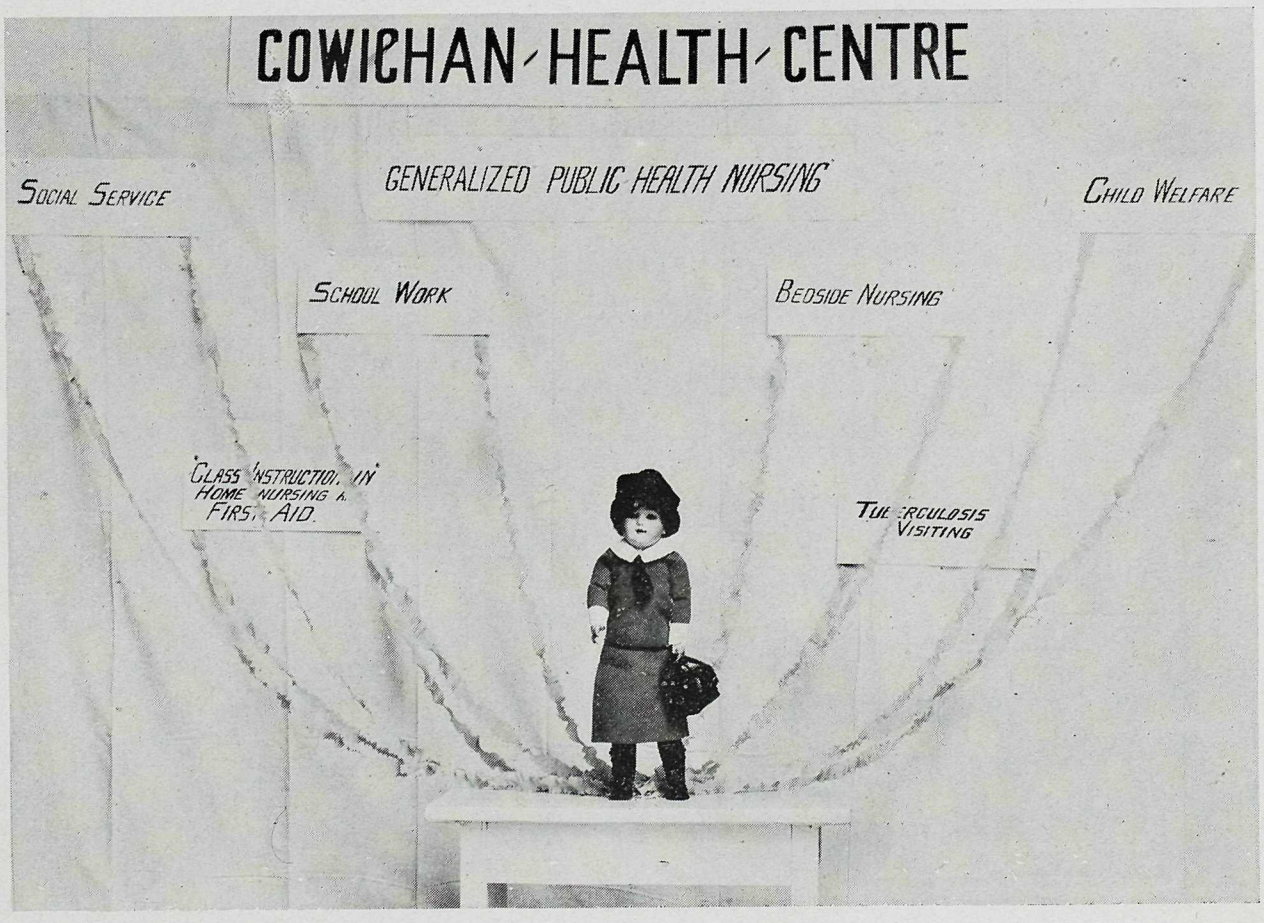
"While simple in design, it presented a clear conception of the wide scope of Health Centre work and was intended to correct the idea in the minds of not a few people that the work of the centre is confined to school nursing or some other limited branch of effort.

"A placard, 'Generalized Public Health Nursing,' defined in one caption the mission of the organization. In amplification the figure of a

diminutive nurse was placed upon a table and from this ran tiny blue streamers to various points on the background, where other placards set forth the various phases of Health Centre activities: School-work, class instruction in first aid and home nursing, social service visiting, tuberculosis visiting, bedside nursing, and child-welfare.

"Posters and health-books entered by contestants in the competition for rural school children in the district conducted some time ago by the Health Centre were also displayed, while literature on various topics was on hand for distribution."

The above excerpt from the *Leader* and the accompanying picture will give any one interested an idea of the exhibit displayed by the Cowichan



A SECTION OF THE HEALTH CENTRE EXHIBIT AT THE COWICHAN FALL FAIR, DUNCAN, V.I.

Health Centre at both Cobble Hill and Cowichan Fall Fairs. When we were first asked to prepare an exhibit for these fairs it seemed impossible, as our funds for such a purpose are almost *nil*. However, after some consideration, we decided to exhibit the posters and books sent in by the boys and girls of the rural schools in the "Good Health Competition" held last term. We accordingly prepared a sign, "Good Health Competition," and under this grouped the posters and health-books. As the majority of the poster prizes had been won by Cobble Hill boys and girls, we arranged one complete section of the exhibit at that particular fair with their work only, placing in the centre a sign reading, "The work in this section was done by the boys and girls of Cobble Hill." This special

attention and display greatly pleased the children as well as the parents of the district.

At both fairs we were congratulated on our exhibit and have the satisfaction of knowing that very few attended without paying a visit to the Health Centre exhibit, many being sufficiently interested to return bringing their friends.

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