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which prevents the use of technique thus far developed by such agencies. It will be necessary, therefore, to study methods already employed, and, in addition, to survey in great detail a number of industrial occupations so that a departure may be made from established method to permit of a greater participation on the part of our clients.

An examination of the facts above cited leads to the conclusion that the movement for industrial rehabilitation, at least insofar as our people are concerned, has not been as progressive as it has been in other phases of Jewish social service. We return then to the ancient injunction wherein merit is given to him who assists the poor by aiding them "to some lucrative occupation," in order that they may be helped "to help themselves."

EXPERIMENTS OF COOPERATION IN HEALTH PROGRAMS

By Dr. Jacob A. Goldberg, Director, Committee for Health Service Among Jews, New York

The modern health campaign which is gradually reaching into all sections of the country depends for much of its effectiveness in reducing morbidity and mortality rates upon the growth of a health consciousness and the development of the spirit of coöperation among social and preventive health organizations functioning throughout the land. If we were to attempt to summarize the aim of present-day health movements it might perhaps be done by propounding the question: "How can we best achieve the conquest of disease by health?" The answer to the question is that this can largely be brought about through coöperative effort rather than through dependence upon individual initiative, for the latter method invariably results in a laissez-faire attitude and in a lack of positive achievement.

Recent efforts in cooperative health activities are well illustrated by the Framingham, Mass. Tuberculosis Demonstration. That modern measures for the conquest of disease are effective is shown by the success of this Demonstration, because of which the death-rate from tuberculosis has been conspicuously reduced, at least partially as a result of organized preventive health work. For the ten-year period prior to the beginning of the Demonstration the average yearly tuberculosis death-rate in Framingham was 121 per 100,000 population. After four years of organized effort, the average rate for 1921 and 1922 was 53.6 In addition, there was a considerable reduction in the sickness and death-rates from other causes. In the opinion of Dr. Lee K. Frankel, who was largely responsible for the initiation of the Demonstration through a grant made by the Metropolitan Life Insurance Co., this improvement was in considerable measure due to the fact that nearly two-thirds of the population had been physically examined.

The successful development through coöperative effort of this and similar, though smaller, health demonstrations was, in part at least, the reason for the organization in New York City of the Committee for Health Service among Jews. This Committee was organized in September, 1921, in order to carry on an educational health campaign among the foreignborn Jews and their families living in the congested sections of the city. The Committee was not merely another new organization in the community, but rather an agency for the centralization and development of educational health activities already being carried on or projected by existing agencies. For instance, the Committee for the Care of the Jewish Tuberculous desired to develop and expand the educational phases of an already important anti-tuberculosis service and campaign among Jews. To carry out such a program would have made serious inroads upon the time of the executives of the organization and would also have required a comparatively large sum of money. The Jewish Mental Hygiene Society likewise desired to carry on an educational program in mental hygiene, but could not by itself finance such a campaign. The Free Synagogue Social Service Department similarly planned to carry on a general health educational program, the plan growing out of a long experience with the Jewish sick at Bellevue and Lebanon Hospitals. Again it was found that it was not feasible to carry out such a project as the effort of one organization. Surveying the field, the representatives of those three organizations pooled their programs and finances available for preventive and educational health work, and joined in the organization of the Committee for Health Service among Jews. The trustees of the New York Foundation came to the assistance of the three agencies and likewise contributed to the support of the new Committee.

The activities of the Committee have centered about four main purposes:

(1) to carry on a general health educational campaign, stressing particularly the matter of tuberculosis, heart disease, mental hygiene and the periodic physical examination, and at the same time to interpret to those reached

the general health movement which is being carried on by local and national health organizations;

- (2) to organize a health demonstration and educational health campaign in some crowded section of the city;
- (3) to utilize the experiences and results of such a demonstration and educational program in stimulating other social agencies and community centers to develop similar health programs for their respective clienteles and neighborhoods;
- (4) to study the findings of the Committee in the several activities engaged in, and to have such studies printed in standard health or other journals for general dissemination of the findings.

As an outgrowth of the first item in the program, lectures on health topics have been given in public schools, in settlements, synagogues, factories, lodges, community centers, union headquarters and in other meeting places; English and Yiddish literature has been prepared and widely distributed; conferences on mental hygiene of children have been arranged for public school teachers; articles have been written for the Yiddish press; health placards have been posted in about three hundred factories employing Jewish workers, and health slides exhibited in local motion picture theaters.

The neighborhood health campaign, the purpose of which has been to do intensive health work among a limited number of families, was initiated in New York City in January, 1923. with the University Settlement as a center. This Settlement is located in the most congested section of the city, and the need for health advice and service in the district is particularly apparent. Nurses have been sent into the homes in the immediate neighborhood of the Settlement for the purpose of advising the families regarding personal and community health matters, free diagnostic clinics have been opened at the Settlement, appropriate literature distributed, and periodic re-visits made to the 2,500 families to whom this service has been limited. It is perhaps too early to speak of definite results achieved in this neighborhood health campaign, though the figures of the Department of Health indicate that there has been an appreciable drop in the infant and crude deathrates in this district during the year 1923, the first during which the Committee functioned in the district. In addition, ninety per cent of the patients examined and referred for treatment to dispensaries, hospitals, and to family and lodge physicians have reported that they followed the advice given them by the physicians of the Committee regarding medical service needed, and sixty-five per cent of these reported improvement within a year following the initial examination in the diagnostic clinics of the Committee.

As a result of the district work and the newly developed technique, it became possible to interest a number of settlements, Jewish parochial schools, and other communal agencies in the matter of preventive health programs. Within recent months three settlements which are members of the Jewish Federation have been led to appropriate funds with which to pay for the services of physicians; others have assigned salaried and volunteer workers to carry on health work in coöperation with volunteer physicians whose services the Committee has enlisted. In some organizations diagnostic and advisory health work is proceeding with volunteer physicians and other services placed at their disposal by the Committee.

Many efforts have been made to interest officers of national Jewish fraternal organizations in the development of educational and preventive health programs among the lodges in the city. Primary interest was shown because of the possibility of reducing the payment of sickness and death benefits through the development of such health programs. The members of individual lodges have been reached through lectures and the distribution of literature, and a definite interest in preventive health work has been indicated, though dependence has usually been placed upon the initiative being taken by the national officers of the lodges concerned.

Efforts along similar lines among unions have borne some fruit. The interested and intelligent leadership of the Furriers' Union, among the members of which there is a high incidence of bronchial and chest diseases, has made it possible to carry on a health educational campaign among the members of the Union. In this effort the hearty coöperation of the Fur Manufacturers' Association has been of considerable

help, as it has made possible the posting of health placards in all the fur factories in the city, the holding of noon-time health meetings in the factories and the distribution of literature. The Union has been led to appropriate funds sufficient to equip a medical examination clinic at the main headquarters, and a considerable number of members and their families have been examined. Plans are now being made to carry out a more comprehensive health program among the members of this Union.

The Committee also stimulated the Board of Directors of the Bronx Hospital to appropriate funds with which to maintain a social service department and then organized this department and continued serving in an advisory capacity. Similarly the Committee initiated the plan of arranging for social service for the private patients of physicians, such service usually including the help given to hospital patients by the hospital social service departments. Since private and non-institutional patients cannot obtain such help, the Committee serves in a "liaison" capacity between physicians and patients on the one hand, and social agencies and institutions on the other. Thus far over six hundred patients have been referred by physicians to the Committee for various services unobtainable through any other channel known to the physicians.

The request has recently been made that the Committee supervise and develop the diagnostic and advisory health activities of a large communal and non-medical agency in the city. This request came because the executive of the particular agency realized that an organization specializing in health activities was better prepared to carry on health work than one whose main efforts were directed towards serving in another field of community endeavor and yet found it necessary to support health activities for its clients.

The details of the activities of the Committee for Health Service among Jews are illustrative of what coöperation in community health work can accomplish. By helping to organize health programs and activities for other agencies in the city, the Committee has supplied the initiative, the necessary experience and the stimulation essential for the carrying on of such programs.