A history of the board of health of the city of New Bedford, Massachusetts

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Thesis

A HISTORY OF THE BOARD OF HEALTH
OF THE
CITY OF NEW BEDFORD, MASSACHUSETTS

Submitted by

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(B.S. in Health Education, Boston University, 1957)

In Partial Fulfillment of Requirements for
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Special thanks are due my wife, Dorothy whose help and understanding were of tremendous value in accomplishing this task, and Doctor Leslie W. Irwin whose constant guidance and assistance are responsible for my motivation and interest in the field of health education.
CHAPTER I

INTRODUCTION TO THE PROBLEM
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INTRODUCTION TO THE PROBLEM

While doing my field work with the Board of Health in the City of New Bedford, I was amazed at the striking difference in the various departments. Some, such as the tuberculosis clinic, seemed very modern, with the most up-to-date equipment and procedures. However, this varied from department to department, as exemplified by the garbage disposal unit which was using an incinerator that was developed in the early 1900s. In observing this, I wondered if, in this city of over 100,000, and in this era of rapid development, whether the Board of Health had progressed with the times. I kept asking myself how the facilities now compared with those of years ago; whether the various departments were up-to-date and how could they be improved? I felt that as a health educator, a knowledge of this advancement would prove invaluable for future appraisals. This was the reason for this particular study.

Having arrived at a reason for doing this study, I then attempted to discover whether this had ever been previously undertaken. I contacted several officials of the Board of Health who were in a position to give me the information I was seeking. I also delved into library resources for further
proof. All available evidence indicated that no study of this kind had ever been conducted, leaving the way open for an attempt to set limits and determine the extent of my inquiry.

In this study all the departments of the Board of Health of the City of New Bedford will be covered, which include:

1. School nurses
2. Visiting nurses
3. Garbage disposal
4. T.B. Clinic
5. V.D. Clinic
6. Polio Clinic
7. Milk inspection
8. Laboratory
9. Restaurant inspection

A chapter will be included which will show the city's progress in other areas. This will provide a means of comparison between the Board of Health and other City institutions.

The limitations of this study are first, that it is covering only one city in only one state. To extend this study to include several cities in one or more states would be prohibitive in both time and money. However, due to the size of the city, which is fifth in the state of Massachusetts, it is felt that the results of this study will be quite indicative of the progress made by our society in general in the area of public health. It will also be especially revealing in presenting the changing attitudes of the people toward health programs with the gradual removal of many prejudices and superstitions.
Another limitation is that much of the material was obtained from records and newspaper clippings of past years; personal interviews with people living during the Board's infancy and through part of its growth are impossible due to the long period of time that the Board of Health has been in operation.

The Board of Health of the City of New Bedford originated in 1879. My thesis begins with its history from that time to the present day.

This study was made with anticipation that it would provide a broader view of the progress already accomplished. Also, I feel that such knowledge can be of assistance to health educators in setting future goals. In the making of our future, our past experience will play a fundamental role.
CHAPTER II

TECHNIQUES AND PROCEDURES EMPLOYED IN THIS STUDY
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TECHNIQUES AND PROCEDURES EMPLOYED IN THIS STUDY

No sooner had I begun to contemplate on my problem when I was informed of the great amount of material from which I could gather information. However, there was virtually a flood of subject matter from which only the most relevant and momentous material had to be selected.

Half the information in this report was obtained through personal interviews with the Agent of the Board of Health, members of his office staff and heads of various departments under his authority. Other references consist of newspaper clippings and yearly reports, minutes of previous meetings of the Board of Health, census and survey reports and personal inspection of each department.

In summary this study will make use of the following techniques in gathering information:

1. Personal interviews
2. Newspaper clippings
3. Yearly reports
4. Minutes of previous meetings
5. Census and survey reports
6. Personal inspection of each department
CHAPTER III

THE CITY'S PROGRESS
CHAPTER III
THE CITY'S PROGRESS

In 1602 English adventurers found this land on the western slope of the Acushnet River. From Plymouth, Salem, and Massachusetts Bay, the pioneers pushed their way to this place of clear water, dark soil and gentle weather. They named it New Plymouth, destined to become the township of Dartmouth, establishing the community on land bought from Massasoit and his son Wamsutta, for whom the first cotton textile mill was named, more than two centuries later.

However, peace did not prevail and after twenty-odd years of uneasiness and some injustices, 500 of King Philip's Pokanokets and 800 Narragansetts destroyed the village, killing those white men and women who did not flee to the garrisons. The town was rebuilt only to be destroyed again by Indians. But the township, rough-hewn and wooden-pinned rose again from the same ashes. This time there was a "clapboard" meeting house and a schoolmaster. Government emerged invoking penalties for non-attendance at town meetings. The founders were Quakers and the early community bore principally the impress of their frugality and industry.1/

1/Zephmiah W. Pease, History of New Bedford, The Lewis Historical Publishing Company, New York, 1918, pp. 5-6, 8-9
An enterprising man named Joseph Rotch of Nantucket purchased ten acres of land from Joseph Russell (this being the family name of the Duke of Bedford) and introduced into common usage the term "Bedford Village." Shortly after the first whaleboat was built, and on the river front, there was a single wharf and tryhouse, symbols of the great industry that was to come. The first big ship to be built was the Dartmouth in 1867.1/

It was in 1766 that the first schoolhouse was built in the village by the Quakers. Not long after the Congregational Society followed suit by providing a schoolhouse for their children. Less than ten years had gone by when political undertones were heard within the village and fifty-seven women pledged themselves to abandon tea drinking until Britain's unjust tax was repealed. Shortly after the Revolution began; two days after the stand at Lexington, three companies of Minute Men marched out of Dartmouth to join Colonel Danielson's Regiment of Foot of the Army of the Colonies of North America. In the first naval exploit and capture of the Revolution, Captain Nathaniel Pope and twenty-five volunteers, all of Dartmouth, took two sloops from the British in Dartmouth waters; John Paul Jones brought a vanquished British brig to Rotch's wharf; and here Yankee privateers found friendly waters.

The King's general, Sir Henry Clinton, invaded Dartmouth (population 7,000) with two frigates, an eighteen-gun brig, and thirty-six transports with 4,000 troops. They landed and went directly to the waterfront, where they burned seventy vessels and twenty-six warehouses full of tea, rum, sugar, tobacco, etc. Lieutenant James Metcalf with one miserable piece of artillery fought retreating action the length of the shore front, until he was mortally wounded. A large part of the village was destroyed but was built again and incorporated as the Town of New Bedford in 1787.1/

Just four years before vaccination was practiced, ill-administered inoculation spread smallpox throughout the community and left 100 new graves. Even with such adversities the town began to flourish.2/

In 1801 there were 185 dwelling houses, increased to 300 in 1805. In 1816 the population was 5,600. The Bedford Bank had been incorporated in 1803, and marine insurance companies were formed to protect the investments in the whaling enterprise and the town's maritime commerce.3/ The War of 1812 brought great financial hardship to New Bedford. In the first three months of war, New Bedford lost eight vessels and cargoes

1/Ibid., pp. 18-19.
valued at $218,000. The government closed this port, its ships lay idle and dismantled, and its citizenry rebelled by setting up illegal wagon traffic in contraband. On September 25, 1813 there arrived at this port the cartel Russian ship Hoffming, forty-seven days from Plymouth, England, with 402 Yankee prisoners who had been impressed by the British during the Napoleonic wars. Many of these men were New Bedford seamen. When the war ended there were more than 500 dwellings in town, and along the waterfront, society was brawling and careless. However, orderly process was finally restored by the outraged citizenry.  

The town became a city in 1847, the railroad to Taunton was completed, and forty young men with torches escorted former President John Quincy Adams when he came to visit a friend of his. The Evening Standard was getting news from Europe in twenty-eight days. By the middle of the Nineteenth Century, there were thirty miles of streets, twenty of them graded, curbed and flaggled. Well-being was spreading through the town, symbolized by the opening of the luxurious Parker House, which was for generations the place where discriminating visitors lodged. On August 24, 1859, New Bedford witnessed a great fire. Her hand-engine crews pumped until they dropped, but it still destroyed twenty buildings, damaged four ships, and caused $254,575 worth of destruction of which less

1/Pease, pp. 161-163.
than $10,000 was covered by insurance. 1/

It was not long after, that Fort Sumter was fired on, bringing on the Civil War. Company D, 23rd Massachusetts Infantry, was raised in New Bedford in October, 1861. Today, on its regimental flag, you can read: "Roanoke, Newburn, Rawles Mills," and many other battles they fought in. Twenty-four of the forty-five vessels that the Government bought to sink in the ships channels of Charlestown and Savannah were New Bedford whalers. With the end of the war, the expansion of the city was again resumed, with the establishment of a stonecrusher and glassworks. 2/

However, whaling was the main industry; it had projected New Bedford to the farthest corners of the world. It was the wealth from this industry that built many fine mansions still to be seen on County Street. From 1856 to 1858, it was at its peak--319 vessels of 107,702 tons; in 1858, sixty-five ships were outfitted with supplies worth $1,950,000. A single Government contract called for 75,000 gallons of sperm oil for lighthouses at $1.18 a gallon. Whaling produced fortunes, small and large, that eventually were reinvested into the community's future, producing a brand-new economy. It also brought to this New England community a cosmopoli-

1/Allen, p. 13.
2/Pease, pp. 197-201.
tanism born of a citizenry that ranged the world, and a quick
vigorous immigration into what obviously was a bustling port
of promise. ¹/

Having accomplished all of these things, whaling was
destined to disappear. Confederate privateers, an overstocked
market, and the oil wells of Pennsylvania crippled the indus-
try. Thirty-four vessels of the shrinking fleet were wrecked
in arctic ice in 1871, with a $1,000,000 loss; ten more went
the same way five years later. Although there would be whale-
ships out of New Bedford for another half-century, whaling was
dwindling to its end. ²/ The last whaling voyage from this
port was made by the schooner, "John R. Manta" in 1925. ³/ But
from 1847, the shuttle, bobbin and loom, symbols of a textile
industry founded on whaling fortunes, were in the ascendancy.
Now came the people of other nations and origins, with skills
required; the population more than doubled from 48,000 during
the years from 1890 to World War I. ⁴/

The city's population in 1916 for a metropolitan total
was 118,158. The city ranked first in the United States in
the manufacture of fine cotton yarns, etc. The number of
cotton mill employees was 35,663. The total wages paid in

¹/Ibid., pp. 204-206.
²/Ibid., p. 58.
³/Emery, p. 8.
⁴/Pease, p. 60.
all industries in New Bedford aggregated about $40,000,000.\(^1\)

World War I produced many heroes among the 6,500 city men who entered the service. Of this number, 204 men lost their lives in the conflict. New Bedford played an active part in the war effort, with her industries turning out vital war materials, and such organizations as the Women's Relief Corps.\(^2\)

After the war (about 1920), prosperity was at a new height; there were twenty-eight cotton establishments, operating seventy mills and employing 41,380 workers. The population was then 121,217.\(^3\)

Progress in other areas were:

Trolley cars displaced horse cars in 1890, and buses were introduced in 1925. The trolley system was discontinued in May, 1947 giving way to buses. New Bedford has a Municipal Airport with two runways, each 5,000 feet long. It is about 400 acres in extent. Here daily passenger freight and mail service is maintained by Northeast Airlines and the New England Central Airways. Agitation for this airport began in 1935, resulting in appropriations for land for this purpose in 1939. By 1942, with Government Aid, the airport was constructed.\(^4\)

\(^1\)Ibid., p. 74.
\(^2\)Editorial, New Bedford Standard-Times, November 11, 1946.
\(^3\)Emery, p. 10.
\(^4\)Ibid., pp. 13-15.
The City water system was introduced in 1869. Since then many extensions have been made.\(^1\)

The city's Fire Department began its existence in 1772, when a Joseph Rotch bought a hand fire engine built in London, which was named "Independence, No. I." For a long time, the equipment consisted of hand engines but after the great fire of 1859, the first steam fire engine was purchased. In 1908 motorization in the department was begun, and was completed in 1917.\(^2\)

The Superior Courthouse was built in 1830-1831.\(^3\)

The New Bedford Gas Company began the distribution of illuminating gas in 1853. Introduction of electric light took place in 1886.\(^4\)

The Free Public Library was created by a city ordinance of 1852. It had a backlog of 5,000 volumes of the New Bedford Social Library, a private affair. There were 236,000 volumes including those in three branch libraries in 1947.\(^5\) As of this last December, 1956, the Library has 270,649 volumes.\(^6\)

\(^1\)Ibid.
\(^2\)Ibid.
\(^3\)Ibid.
\(^4\)Ibid.
\(^5\)Ibid.
\(^6\)Supplied by Chief Librarian, Mr. Laurence Hill, in an interview, April 15, 1957.
The first post office began to function in 1794. A telegraph line was established in 1847. The telephone was introduced in 1880.1

The New Bedford High School was established in 1827, with John F. Emerson principal, but was abolished in 1829. For eight years, Mr. Emerson then conducted a private high school. In 1837, the public High School was revivified under a mandatory state law, with Mr. Emerson at the head. Under the guidance of enlightened School Committees and progressive superintendents, the New Bedford public school system has maintained a high reputation. In 1947, the enrollment of pupils was 10,700, housed in thirty-eight buildings with 524 teachers and two athletic coaches. There were fifteen parochial schools, with about 4,100 pupils, taught by nuns of the various convents. There is at the present, Friends Academy, founded by wealthy Quakers in 1810. Also, the Swain Free School opened in 1882 for general higher education, but of late years, it has been transformed into an art school. The New Bedford Textile Institute was organized in 1898 to instruct pupils in the manufacture of cotton cloth. Also provided is a vocational High School, maintained jointly by the state and city.2

World War II found the city in the throes of a depression. Again the city responded to the attack on Pearl Harbor.

1/Emery, p. 15.
2/Pease, pp. 300-307.
sending 17,000 men into the service and hundreds of women performed duty in the Navy, Army, and Marine Corps women's auxiliary service. As in World War I, many New Bedford men performed their service beyond the call of duty, with 301 men making the supreme sacrifice. \(^1\) The second world conflict with its wartime demand for all sorts of goods gave New Bedford textiles another period of prosperity which continued through 1947. \(^2\)

New Bedford today covers 110.6 square miles with a city population of 109,000 and a metropolitan total of 137,400. The city has close to 30,000 manufacturing workers, slightly over 6,000 in textiles, almost 7,000 in apparel manufacturing, more than 2,000 in rubber, some 4,000 in electrical machinery and equipment including electronics, and the remainder in fishing and diverse industries. Latest figures as of November, 1955 list 248 manufacturing plants with a total payroll of $70,400,000 and a product value aggregating $258,800,000.

A new era of diversified industry has come to the city. There is Aerovox Corporation, as old as radio; as young as electronics. Today it has its headquarters and two plants in New Bedford. It is one of the nation's largest suppliers of capacitors and related items for use in radar, guided missiles and electronic devices. Continental Screw Company produces the nation's widest range of fasteners. Acushnet Process Company golf balls are standard equipment at the Country Clubs.

\(^1\)/Editorial, New Bedford Standard-Times, November 11, 1946.  
\(^2\)/Emery, p. 10.
of the country. Revere Copper and Brass is a direct descendent of the original copper mill founded at Canton in 1801 by Paul Revere. The list of famous manufacturing names, Cornell-Dubilier, Firestone, Goodyear, could run on and on. 1/

New Bedford's history is one which is indicative of the determination and resourcefulness of the people of this community. Much of the history of the city is yet to be written as within the last year the city's Industrial Development Commission has announced the completion of negotiations with George W. Warnecke Company, Inc. of New York, the nation's largest firm of mortgage bankers, for the development within New Bedford's city limits of what will be New England's largest and most fully developed Industrial Park.

CHAPTER IV
THE BOARD OF HEALTH FROM ITS INFANCY TO THE PRESENT DAY
CHAPTER IV
PRESENTATION OF THE MATERIAL

A. From 1879 - 1899

At its beginning the Board of Health consisted of four members, first, the agent of the Board; second, his assistant; third, a doctor called Physician to the Board of Health and Quarantine Physician; fourth, a health inspector who was also a police officer. A small room in the basement of city hall was allotted to them by the city for their office. Here they kept office hours from 9 o’clock A.M. to 2 o’clock P.M. every day except Sunday and legal holidays. They also held a meeting on these days at 12 o’clock for all members of the Board.

In the report for the year ending December 31, 1879, the Board first related the duty of the Board to give the reports of their proceedings for the previous year to the City Council in the month of January. The authority and proceeding of the Board were founded by the General Court of Massachusetts, approved April 17, 1877. "By existing laws, it is obligatory upon every town and city of the Commonwealth to have a board of health without any action on the part of its inhabitants."

\[1\] New Bedford Yearly Report for Board of Health for the Year 1879, p. 4.
In the state election of 1877 the inhabitants of New Bedford decided in favor of the establishment of a board of health by accepting the act of the General Court. However, nothing was done by the city authorities to give effect to the provisions of the law on the declared wish of the people. Mayor William T. Soule in his inaugural address of January, 1879 expressed the opinion that a Board of Health should be established and asked, "Why hasn't it been established?"

Although the mayor made this statement he was the only person who could get things started; finally realizing this, the mayor and aldermen promptly discharged their duties under the statute, setting up the Board of Health. The Board's first meeting was held in February, 1879.  

On February 5, 1879 a notice was published in the Daily Mercury and the Evening Standard, stating the functions and objectives of the newly-established board. Also included were the names of the appointees and the location of the Board, with the hours they were open.

Also mentioned in the notice was, "These laws and ordinances are fully adequate to the protection of the city from the evils which now form the impurity of the air of our dwellings." The word "evils" and "disease" were synonymous to the people during this era.

The statute of 1877 gave the board of health the

1/Ibid., p. 9.
responsibility of performing "all the duties prescribed to city councils or mayors and aldermen, as boards of health, under the statutes and ordinances now in force in their respective cities," and in addition, "are authorized to prepare and enforce in their respective cities such regulations as they may deem necessary for the safety and health of the people, with reference to house drainage and its connection with public sewers, when such connection is made."  

It further went on to say that "they have authority to make all such regulations as they may consider conducive to the health of the city, and the State Law from which this authority is derived provides a severe penalty for a violation of such regulations."  

During the month of January preceding the Board of Health, there were between fifty and sixty cases of diphtheria and twenty-one deaths. Due to this the Board passed the following order February 19, 1879 mentioning that "scarlet fever and diphtheria, as well as the small-pox, are diseases contagious and dangerous to the public health." Therefore, as part of the permanent regulation, Section 47 was included, 

"When a household knows that a person within his family is taken sick of small-pox, or any other disease dangerous to the public health (Scarlet Fever or Diphtheria) he shall immediately give notice thereof to the selectmen or board of health of the town in which he dwells. If he refuses or neglects

1/Ibid., p. 8.
2/Ibid., p. 10.
to give such notice he shall forfeit a sum not exceeding one hundred dollars."

To insure greater adherence to this regulation, the Board included Section 43:

"When a physician knows that any person whom he is called to visit is infected with small-pox, or any other disease dangerous to the public health (Scarlet Fever or Diphtheria) he shall immediately give notice thereof to the selectmen or board of health of the town; and if he refuses or neglects to give such notice, he shall forfeit for each offence a sum not less than fifty nor more than one hundred dollars. 1/

"Public notice is also hereby given that the following regulations have been adopted by the Board of Health in relation to the admission of children into the schools, who have been sick of a contagious disease or exposed to the same. 2/

Regulations

1. "No pupil shall be admitted into any school without a certificate from a physician that he or she has been vaccinated.

2. No teacher or scholar shall be allowed to attend school from any house in which small-pox, varioloid, scarlet fever or diphtheria exists.

3. No teacher or scholar shall be permitted to return to school from any house in which small-pox, varioloid, scarlet fever or diphtheria has existed, until the expiration of four weeks from the commencement of the last case in such family; such length of time being certified in writing to the teacher by a physician or some responsible member of the family."

The No. 3 regulation was modified to allow the city physician to give a permit of admission at a shorter time.


than four weeks whenever he felt no danger to the public health was possible. Also, a lot of publicity was given to the laws of the State upon the subject of vaccination.

"Information was sent to all the school teachers, that it is the opinion of the board of health, that neither teachers nor scholars should attend the funerals of persons who have died of diphtheria or other contagious disease."\[1\]

This one statement shows clearly the misconceptions and fears of the people toward these diseases.

In the area of privy vaults and cesspools (in common use at that time), the Board found great dissatisfaction with the provisions and changed them.

First stated was the limits of the city to which these new rules applied and then the time and methods of removal were covered.

1. "The contents of the privies and cesspools may be removed at any time of the day, within the limits fixed by the board of health by their order of April 24, 1879."

2. "No one shall be allowed to remove the contents of any privy vault or cesspool, unless he shall be licensed to perform such work by the Board of Health in writing; and no owner, tenant or agent of any building shall allow such removal, unless by a person so licensed."

3. "No apparatus shall be used in the work of removal as aforesaid unless the same shall have been examined and approved by the board of health."

4. This concerned the opening and removal of contents of privy vaults and cesspools, so that no odors etc. may escape. Failure could result in loss.

\[1\]Ibid., p. 12.

5. Depositing of contents of privy vaults and cesspools shall be made only in places approved by the board.

6. Fine of $20 for offence of the above regulations.

Permits might be granted to owners or agents of tenements in the city district to remove the contents, subject, however, to strict regulations.

A violation called for a fine of up to $100. At this time $100 was a small fortune to many people and definitely was a large fine.

Upon the recommendation of the National Board of Health, an order was passed July 14, making some addition to their quarantine regulations. Being located on the coast and with ships coming in from many foreign ports, the chance of disease being brought in was great, necessitating new and stricter regulations. This was to be adopted and observed at all ports in the United States which are or may be designated as quarantine stations.

"Every vessel arriving from a foreign port shall immediately proceed to the quarantine grounds, and shall be visited by the quarantine officer between sunrise and sunset as soon as possible after such arrival. Such officer shall examine the bill of health and shall inspect the vessel, and shall require of the captain or master answers in duplicate,

2/Ibid.
3/Ibid., p. 15.
under oath, to the following questions:

"City and port of _______. Quarantine questions put to the master of _______. Name of vessel, _______. Date, _______.

1. From whence is the vessel you command?
2. How many days have you been on the passage?
3. Have you touched anywhere?
4. If so, where?
5. At what date?
6. For how long?
7. Did you take in cargo or passengers there?
8. Have you any bills of health? If so, produce them.
9. Have you communicated with any vessels in the course of your cruise or passage?
10. If so, at what date?
11. Name of vessel?
12. From what ports were they?
13. Was any sickness existing on such vessels?
14. If so, what?
15. During the course of your cruise or passage, what cases of disease have occurred on board?
16. At what dates?
17. Has any death occurred on board your vessel since you left the last port?
18. If so, what date, and from what cause to the best of your knowledge?
19. Has yellow fever ever existed on the ship? If so, when?
20. What is the number of officers, crew and passengers? 1/
21. Are the officers and crew the same as when you started?
22. How many passengers in first cabin? second cabin? steerage?
23. Have you any reason to think that yellow fever, cholera or plague existed in the vicinity of the port from whence you sailed, or near any others at which you have touched, or any vessel with which you have communicated during the present cruise or voyage?
24. What is your cargo?
25. To whom consigned? 2/

1/Ibid.
2/Ibid., p. 16.
26. (omitted)
27. What is the present sanitary condition of the vessel, cargo, crew, and passengers, to the best of your knowledge and belief?
28. Have you a medical officer? Give his name and produce his report. 1/

__________________________
Signature of Master or Captain

Sworn and subscribed to before me, an officer empowered to administer oaths, &c.

________________________
(Official Title)

Quarantine Station

This vessel has permission to proceed (or is detained for observation.)

______________________, Health Officer

Next the Board directed its attention to the condition of the drainage of the city and were convinced, "that the public health can be alone preserved by such a system of sewerage and sub-sewerage as will remove from our dwellings and the area occupied by the inhabitants the accumulations which contain in them the seeds of suffering, sickness and death; and secure our homes, our work-shops and places of business from those invisible but fatal gases which all sewers generate but are impotent to remove." 2/

All the sewers were visited and examined in the city, and the results of this examination were unfavorable.

The Board felt that the sewers were too inadequate to meet the necessities of the population, and were imperfect,

1/Ibid.
2/Ibid., p. 22.
faulty in design, etc.

For over one year no change was made in this condition and it was stated, "the course then pursued was to enlighten the minds of the people upon the subject."

From this point the yearly report contained letters to the Mayor and from the Mayor to the Board, also letters from various people in the town and quotations from various city officials on the case.

One big question was whether the Mayor or the Board of Health had the authority to abate nuisances. However, in a letter to the Mayor from James B. Congdon, Chairman of the Board of Health, he said,

"Allow me to say that the board has a clear conviction that in the matter of the nuisances named there is a heavy responsibility resting upon them."

This was in answer to the question of whether the Board had the same authority in enforcing the state and city laws against the city itself (who was the violator in this case) as it has against individuals. 1/

Further questions from aldermen and other city officials on the subject were inclosed in the report. Always the answers from the Board were included. Throughout this report the Board seemed frustrated in their attempts to get something done. In several places, the Board restates the authority that has been vested in them. Although these various

1/ Ibid., pp. 22-23.
nuisances are made known by the Board and the proper course
to be taken, most of them still remain at this point.

Private nuisances and complaints were listed in another
section; also a section included the Record of deaths in the
city. 1/

In regard to records on deaths occurring in the city,
existing laws required undertakers to present to the Board
a certificate of attending physician, setting forth the name
of the deceased, date of death, and the disease. After exami-
nation and approval, an endorsement to that effect is placed
thereon, and City Clerk is warranted to grant a burial permit.
From these medical certificates, a record is kept by the
Board of date received, date of death, date of certificate,
name, age, disease, physician.

For the year 1879, 683 deaths were recorded. In a com-
parison with other towns throughout Massachusetts, in general,
the results showed from the 44 weeks of that first year (1879)
that these other towns had a mortality rate of approximately
20 per 1000 population. By the same process, New Bedford's
rate of mortality was approximately 25 per 1000 population.

With regard to what the report calls the "principal
zymotic diseases," the results are the average proportion of
that class to whole number of deaths in all places named,
23.84 and in New Bedford, 25.92. 2/

1/Ibid., pp. 50-52.
2/Ibid., p. 53.
This placed New Bedford next to highest in its rate of mortality. The report helped enlighten many people of New Bedford's position in the area of health as exemplified by various editorials and remarks, such as "the report of this unenviable position, which has from time to time been made both here and elsewhere, and which has been alluded to more than once in our official papers, is confirmed."\(^1\)

At this point, the sanitary conditions of the city were questioned as being the chief cause of the conditions.

The Board felt that the reports showing the prevalence of disease in certain areas of the city, made it imperative for the city government to "enter, without delay, upon those improvements in the city drainage, which are so clearly demanded, and abatement of the nuisances which have so long existed."\(^2\)

The Board then went on to express the opinion that the removal of "wretched cellars, and crystal palaces, and rookeries, and dens, in which the extremely poor and improvident live," with the occupants removed to "well drained and lighted and ventilated buildings, of however cheap and simple construction," would remove a lot of disease from the city.\(^3\)

They further went on to say that "It is gratifying to us

\(^{1}\)Ibid.  
\(^{2}\)Ibid., p. 63.  
\(^{3}\)Ibid.
to state, that during the whole course of our labors we have received from the medical faculty of our city a generous and encouraging support."1/

The Board wanted enlargement of Clark's Point Hospital, and asked for this along with alterations the previous year. However, the City Council failed to do anything about it. A petition from the Board asking for these changes had been on file for over a year. 2/

"This petition was acted upon by the Committee on Public Property of the year 1880, who unanimously decided that all that was asked for by this Board was imperatively needed, and there the matter stood, and there it stands now." 3/

In regard to drainage of the city, no action was taken by the City Government on the reports sent to it by the Board, with the result that complaints continued to come to the Board. The reports from the Board on these matters attempted to impress the Mayor and City Council of these conditions, and the dangers resulting; "The Board respectfully urge upon you, immediate attention to these matters before the approaching Summer shall heighten and intensify their already most dangerous condition." 4/

Finally, an order was sent to the Chief of Police, asking him to use disinfectants, such as

1/Ibid., p. 65.
3/Ibid.
carbolate of lime, on the gutters of various streets. This was done through most of May and all of June.

In this same month of June the Board sent a letter to the Mayor and his Council stating that unless something was done to correct conditions in a certain part of the city, "This Board......shall deem it their duty to make a presentation of the facts in the case to the Grand Jury of Bristol County at their next session." 1/

Through the press, the above material was actively discussed, and was common knowledge to most people of the city.

Another message was sent to the City Solicitor on the same subject over a month after the previous message was sent to the Mayor and his Council. In this message, the Chairman of the Board stated that "unless steps are at once taken to abate the nuisance......this Board, to escape prosecution themselves for neglect of duty, will be compelled to present the City of New Bedford to the Grand Jury of Bristol County." 2/

In the following report of 1881, it was stated at the beginning that "the City Council by unanimous vote adopted the plans, and under the vigorous personal supervision of the Mayor, seconded by the Board of Aldermen, a very great amount of work has been accomplished." 3/

1/Ibid., p. 9.
2/Ibid., p. 10.
3/New Bedford Yearly Report for Board of Health for the Year 1881, p. 3.
The pressure brought to bear by the Board finally resulted in progress being made.

In the statistics of deaths for 1880 and 1879, the Board's yearly report of 1880 used this chart:

<table>
<thead>
<tr>
<th></th>
<th>1880 Cases</th>
<th>1880 Deaths</th>
<th>1879 Cases</th>
<th>1879 Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria</td>
<td>231</td>
<td>47</td>
<td>248</td>
<td>69</td>
</tr>
<tr>
<td>Scarlet Fever</td>
<td>375</td>
<td>47</td>
<td>137</td>
<td>20</td>
</tr>
</tbody>
</table>

The average proportion of deaths from scarlet fever and diphtheria to whole number of deaths was 15.13, while in 1879, the proportion was 25.92.\(^1\)

These were two of the most dreaded diseases at this time.

The Board further goes on to make this statement, "We have no doubt but that the decrease in the mortality of the zymotic diseases, as well as in the general death rate is partly owing to the increased sanitary precautions that have been taken not only by the Board of Health, but by the citizens themselves, who are fast being educated up to the point that 'cleanliness is next to godliness.' "\(^2\)

Ignorance of the cause of various diseases led to many vain attempts by the Board in controlling these diseases, as an example,

"They have tried to do away with public funerals in cases of scarlet fever and diphtheria, to prevent as far as possible one very common way of spreading..."

\(^1\)1880 Report, p. 13.
\(^2\)Ibid.
such diseases. 1/

In the report of 1881, various school buildings were mentioned as being unsanitary, etc. Two of these buildings because of their condition were closed temporarily, until proper improvements were made. 2/ Apparently, no opposition was felt toward this action, as no mention of it was inclosed in the yearly report or newspaper clippings of this period.

I kept coming across the word "pest-house" in the reports on Clark's Point Hospital for cases of smallpox. As an example, "In view of the growth of the city, and objections of citizens......, to the continuance of the pest-house in its present location." 3/ For such a term to be used by people in public health work and printed in their yearly reports, gives some indication of the attitudes people had at that time toward this disease.

Right at the start of the report of 1882 there was mentioned a Supreme Court decision, deciding that a doctor, (City and Quarantine Physician) was not legally a member of the Board. It was further stated in the report that "since that time the City Solicitor has given an opinion that the Revised Statutes, Chapter 80, Section 106, are inconsistent with the City Charter, and that the City Council constitute

1/Ibid.
2/1881 Report, p. 4.
3/Ibid., p. 5.
During February of 1883, there was an epidemic of smallpox in Baltimore, so the Board voted to quarantine all vessels arriving from that city. This was one of the most widely used practices in operation at this time.

The extension in area of that part of the city in which swine were prohibited and in which loose dogs were allowed to roam was continued in 1884; these laws were instituted in 1882.

It was noted that in December of this same year a child and the mother died of diphtheria. The Board ordered the bodies buried at once and the house thoroughly fumigated, and the premises vacated.

The fear of this disease spreading was obvious by the haste and methods of handling these two cases. However, no more cases were reported for many months.

The following order was passed in April, 1885, "That all vessels arriving from foreign ports between the first day of May and the first day of November, 1885, are directed to go into quarantine until visited by the quarantine physician. All pilots are required to observe and follow this order."
This was just one of many laws of this kind enacted by the people more out of fear than anything else. However, the danger of disease being brought into the city from one of these ships was always great.

A little over a month after this law was in operation, a ship's master did come directly into the upper harbor, without going into quarantine first; for this act the Board brought suit against him, along with prosecution by the United States Government for bringing more passengers than allowed by law; he was convicted and sent to state prison. 1/

During September of the same year, the Board requested owners of tenement houses who previously let to families coming from Canada, to notify the Board so they may investigate such cases, the reason being the prevalence of smallpox in Canada. 2/

To facilitate this, the Board of Health in Concord, New Hampshire offered to telegraph to the New Bedford Board of Health, any passengers coming on the railroad bound for New Bedford from Canada, if the New Bedford Board would pay the expense of the telegraph. This they cheerfully accepted. 3/

From my observation, this was the first cooperation noted between this Board and one of another state.

During this same time, the Board was giving free

1/Ibid.
2/Ibid., p. 6.
3/Ibid.
vaccinations to anyone coming to the Board's office during regular office hours. Children were not allowed to enter school in September unless they were vaccinated.

Another law passed during the previous year by the Massachusetts legislature was called to the people's attention. This law made it illegal to fail to report to the Board cases of "smallpox, diphtheria, scarlet fever or any other disease dangerous to the public health." Also, "upon the death, recovery or removal of such person, the rooms occupied, and the articles used by him shall be disinfected...in a manner approved by the board of health."\[1\]

During August of 1886, an epidemic of diphtheria broke out, causing the Board to stop the opening of several schools in those areas of the city where the disease was most prevalent. Several weeks later, these six schools were opened, due to the slackening off of new cases.\[2\]

In 1888, a new law was passed, forbidding people to "construct, add to, or alter any portion of the drainage system of said buildings (except to repair leaks) until they have filed at the office of the Board of Health, upon blanks in such form as the Board of Health shall order."\[3\]

Much was accomplished in this area of plumbing during this year. To aid the Board in enforcing this law, the city

\[1\]Ibid., p. 7.
\[2\]1886 Report of Board of Health, p. 6.
\[3\]1888 Report of Board of Health, p. 5.
appointed an inspector of plumbing.

Not long after the new rules were in operation, a suit was brought against a violator on plumbing and judgment was rendered in favor of the Board, the defendant being fined. This was stated by the judge to be a test case as to whether the plumbing regulations were legal and could be enforced. The results of this case were very satisfactory to the Board.

In the middle of April, a large number of cases of diphtheria occurred among children attending one specific school. The Board, therefore, sent a letter to the School Committee (after examination of the school) expressing the opinion that "the cellar is improperly drained, and its condition, if not a direct cause of disease, must aggravate any existing cause." 2/

They then went on to say that they "condemned the practice of holding evening schools in rooms intended for the daily use of children, for it seems impossible to thoroughly ventilate and properly care for their cleanliness." 3/

Further mention of the incidence of spinal meningitis among horses in the town was covered. Quick action was taken to destroy these horses as many people were afraid the disease might spread to the human elements. 4/

1/Ibid., p. 11.
2/Ibid., p. 12.
During May of 1889, the fear of disease brought about some new rules:

"The diseases designated as small-pox, scarlet fever, diphtheria, yellow fever, Asiatic cholera, and typhus fever are contagious and dangerous to the public health and have been, and may easily be contracted at funerals, from dead bodies, or apartments which have been infected by such diseases, it is therefore Ordered, that no public funeral shall be held over the remains of any person having died of these diseases.

"Ordered further that the remains of persons dying of either of said diseases shall at once be placed in a tight or sealed coffin, and shall not thereafter be exposed to view or disturbed except for burial." 1/

The fear of these diseases was so great that in this year more laws were passed as to possible control. Anyone having died of these diseases was to be buried on the same or next day after their death. It was unlawful to "invite or permit at the funeral, or any services connected therewith, any person whose attendance is not necessary, or to whom there is danger of contagion thereby." 2/

Laws for undertakers to abide by were given in length on this subject:

"Ordered, that the body of a person who shall have died of small-pox, scarlet fever, diphtheria, yellow fever, Asiatic cholera, or typhus fever shall not be disinterred for one year after the date of burial." 3/

During this year, the Board added a new member to its

1/1889 Report of Board of Health, p. 5.
2/Ibid., p. 5.
3/Ibid., p. 6.
staff with the appointment of its first clerk under Civil Service Rules. Already the paper work and "red tape" were requiring added personnel.

In the report of 1890 the fact that only one inspector was used by the city was mentioned and the fact that New Haven, Connecticut with a population of only 85,000 had two was brought up. 1/

It was during this year that the Board suggested that garbage, etc. be removed in carts, under the charge of the Board of Health and that it should be taken to some place where it could be burned. It was further proposed that a furnace suitable for this purpose be provided, "and thus a constant source of annoyance and cause of sickness be prevented." 2/

This report further went on to mention imperfect and defective plumbing as a cause of disease saying "that although it's uncertain, it is so to a much greater extent than is generally supposed and this is beyond a doubt." 3/

Also noticed was further mention of the word "evil" to indicate the poor plumbing in the city. "With the growth of the city this evil has grown and has come to be a very formidable menace to the public health." 4/

2/Tbid., p. 7.
3/Tbid.
4/Tbid.
The Board felt they couldn't conclude their report without mentioning to the City Council the inadequate and insufficient accommodations they had. They asked for larger, better ventilated and better arranged apartments. At that time the Board only had one room with no convenience for private consultations. Mention of the embarrassment of young girls and children who had to partially undress to receive vaccinations, was covered. 1/

The sum of $2,200 was appropriated to defray the expenses of the Board for the year 1890. This was the first yearly report in which such expenses were mentioned. 2/

During 1891, new methods were accepted such as the hydraulic test of plumbing before approval, and the use of the Odorless Evacuating System in emptying privy vaults and cesspools. 3/

In 1892, specifications for the collection and disposal of garbage were stated, with the material to be collected, the time and means of transportation, the limits in distance which collections must be made and the disposal of this material, all covered.

Bids for the collection and disposal of garbage were advertised in the daily papers for four days. They received

1/ Ibid., p. 8.
2/ Ibid., p. 10.
two bids; accepting one for $6,000 for one year. 1/

During this year, scarlet fever was prevalent and mention of already existing laws on the subject was covered. 2/

The fear of smallpox was observed in one sentence in heavy print, June 10, 1892. "The first death from small-pox occurred to-day." 3/ From this point through the rest of the yearly report the smallpox threat was mentioned.

"June 17, 1892. At a special meeting of the Board of Health, the second death from small-pox was reported." 4/

Vain attempts were made to stem the coming epidemic. The Board voted to have fifty circulars printed, listing the existing laws on smallpox control. Such things as parents having children vaccinated before the age of two and then again in five years were mentioned.

In 1893, the expense of the Board increased with the town appropriating $8,497.50 to defray the expense of the Board for that year. This was later increased to $14,595.56. 5/

During the month of December 1892 a man came down with a light case of smallpox. He was married and had one sixteen-month-old child. The wife preferred to go to the hospital with her husband, taking the child. It was determined that

2/Ibid.
3/Ibid., pp. 7-8.
4/Ibid.
5/1893 Report of Board of Health, p. 3.
there was no connection with this case and the previous epidemic in 1892.

This family lived in an upper tenement of a three-tenement house. The family living in the middle tenement of the house had moved out the previous week, so they were simply kept under observation. The woman living downstairs refused to go to the quarantine house, and was therefore quarantined at home. A policeman was put on guard day and night, and no one was allowed to come from or go to the house. 1/

Following this case the work of disinfecting began. This included filling the tenement with steam and sulphur fumes, destroying the bed, clothing, and furniture that had been in the room where the patient was ill, washing all the woodwork and furniture left with a solution of corrosive sublimate, and removing all wallpaper, resulting in repapering and repainting the whole tenement. 2/

In every report the quarantine of ships, with rules applying to this quarantine, was emphasized. Also, the fines and imprisonment for a ship's captain to fail in abiding by these rules, were printed every second or third year.

It was during this year that the Board began a new process of plowing garbage under the ground on a farm three miles from town. 3/

1/Ibid., p. 7.
2/Ibid.
3/Ibid., p. 18.
During the summer and fall, an epidemic of typhoid fever broke out with over two hundred cases being listed. The Board began an investigation of each case. They also decided to investigate the milk supply of the city as a possible source. In one case it was found that the family was supplied with milk by a milkman whose wife and child were ill with typhoid fever. This man only supplied a few families. However, no other case of typhoid occurred in these families. This man was ordered to discontinue selling milk. From this point the Board sent notices to all milk dealers, asking if they had typhoid fever in their families or if they delivered to anyone with typhoid fever. I think one very forward step was their asking if the milk dealer had ever had typhoid fever.\footnote{Ibid., p. 20.}

The Board set up a map of the city with dots representing the various typhoid cases. They had already ruled out the milk supply as the source of infection so they now concentrated on the water supply. Here they found by referring to their map that there were few cases on the line of the main supply pipes near the distributing reservoir. However, the supply was investigated and inspected without (according to the yearly report) showing any source of infection. To this report the Board stated, "In the vicinity of New Bedford there exist many wells infected with typhoid fever. The \footnote{Ibid., p. 21.}
people using water from such wells may become...accustomed to
the poison..., but a person drinking the infected water for
the first time may contract the disease.\(^1\)

It was further stated by the Board that "Physicians are
required by statute law to report a case of any disease
dangerous to the public health as soon as the diagnosis of
such a case is clear." From here the report mentions that
physicians have failed to be prompt in these reports and the
danger from such delays should be understood by such physicians.
The Board went on to say they couldn't function properly
unless physicians cooperated in this respect.\(^2\)

The animosity people felt toward the Board is often
brought out in these various yearly reports. One example
listed in this report was that "people are often indignant
that the Board will not give their children permission to
return to school until six weeks after the beginning of a case
of scarlet fever." The report further goes on to explain why
they (Board) enforce such rules.\(^3\)

Further mention of the regulations previously stated in
regard to the burial of persons having died of certain very
contagious diseases, and how these regulations seemed very
severe to the friends and relatives of persons dying of these
diseases was mentioned. Again, the Board attempts to justify

\(^1\)Ibid., pp. 21-22.
\(^2\)Ibid., p. 23.
\(^3\)Ibid.
its position on this matter.  

The report for the following year again mentioned the laws making it a crime for doctors to fail to report a case of contagious disease. There is no question that this was one of the Board's biggest problems at this time. A big step forward by the Board was the employment of a Harvard professor of bacteriological laboratory in making examinations to diagnosticate cases of diphtheria. The cost of these examinations was to be paid by the patient if possible, but if unable to, by the Board.

Many new plumbing regulations went into effect in 1895. The laws were made more rigid, and enforcement the rule instead of the exception.

The Board continuously tried to educate the public in this area of health. As an example, "For the past year every case of typhoid fever, diphtheria, and scarlet fever has been investigated, with the idea of keeping a record of each case, and trying to impress upon the public the necessity of greater care in isolation and sanitation."

During 1896, the Board proposed the establishment of its own laboratory for bacteriological testing, because of the delay of from twenty-four to thirty-six hours in receiving

reports from the Harvard Medical Laboratory on diphtheria tests. It was stated that "the element of time,...being of utmost importance to the patient, as well as to the community, represented by the Board, necessitates this action."\footnote{1896 Report of Board of Health, p. 4.}

In May of this year, the Board printed in the paper, "The public are warned against the use of Preservaline as a preservative of milk or other food, as according to the report of the chemist of the State Board of Health, it consists of boracic acid."\footnote{Ibid., p. 8.} Here was an attempt to enlighten the public on one of the greatest crimes of those times.

In the report of 1897, the Board mentions although it did not propose the establishment of a contagious disease hospital with the words, "The day is not far distant when such an institution will be a necessity."\footnote{Ibid., p. 6.}

Another step forward was in the use of antitoxine for treatment of diphtheria. During this year, this treatment became more general by physicians, although some still didn't make use of it. Antitoxine was furnished by the Board free.\footnote{1897 Report of Board of Health, p. 5.}

Mention of the need for a contagious disease hospital was mentioned in 1898. It was stated that it needn't be an elaborate structure costing thousands, but a suitable place where can be isolated such cases of scarlet fever and diph-
Many people complained this year about the methods used in disinfecting their homes. However, the Board restated its previous position on this matter.

The Board submitted its twenty-first annual report, covering the work of the department for the year 1899; however, before going into the details of their work, they referred to several matters which they felt were of vital importance to the community. They said these matters "call for serious reflection on your part as well as ours." The problem in question was the death rate of children in the city under one year of age, which was excessive for 1899.

From the Board's investigation as to the cause, they were led to believe, inasmuch as the greater percentage of such deaths were in families where both the mother and father were employed in mills, that the children were not properly nurtured. However, they further go on to say that "cow's milk has been the principal food and while the Board has succeeded in a measure in bettering the condition of cow stables maintained in the city, yet we are unable to reach many deliveries of the product which comes from out of town." From here they go on to propose that legislative action be taken to bring

1/1898 Report of Board of Health, p. 4.
2/Ibid., p. 6.
about better control of this food supply. 1/ 

There appears to be an inconsistency in the above statement. First they say that the cause of this high infant mortality is poor nutrition. Then they further state that cow's milk is the principal food, and that conditions under which it is obtained are poor. This implies that disease from the milk rather than poor nutrition is the cause of this high death rate for children under one year.

Again the Board urged upon the public the necessity of a contagious disease hospital, citing several cases of very communicable disease that would help to illustrate the need for this hospital. 2/

During this year, the incidence of disease was high. The worst contagious disease was scarlet fever. The Board again stated in its report that "if parents of children afflicted with contagious and infectious diseases would only exercise a little judgment in preventing their off-spring from mingling with other children in their respective neighborhoods, the spread would be less." Messages of this kind were constantly published in the local newspaper as well as the yearly reports. However, the public seemed slow to acknowledge this advice. 2/

There were twenty-five deaths from diphtheria this year.

1/ Ibid.
2/ Ibid.
3/ Ibid., p. 5.
with the medical inspector stating that this was "remarkably high." From his observations, he was convinced that this number had been reached from three causes:

"a. Failure of the parent to summon medical aid early."

"b. Failure of the physician to recognize the disease."

"c. Want of antitoxin treatment."

1/ Ibid., p. 10.
B. From 1900 - 1919

The Board was beginning to feel frustrated in its attempts to have a contagious disease hospital erected. For several years they had been proposing this addition, but all attempts were in vain. Such sentences as: "Again and again during the year cases of scarlet fever and diphtheria have been reported..." and "We believe that a suitable contagious disease hospital should be immediately erected and placed under the control of this board," clearly emphasized this matter.

During this same year an epidemic of scarlet fever occurred in which the Board felt that most of the cases were "contracted through the medium of the public schools." Due to this it was voted to ask the City Council for an appropriation of $1,000 for the appointment of two school inspectors. Another epidemic occurred in the summer, and was first diagnosed as severe chicken pox. However, the Board was not thoroughly satisfied with this diagnosis and decided to treat the disease as if it were smallpox. This action probably prevented many from contracting the disease as it was later said by the Board, "After careful consideration of the nature of this epidemic, which existed both in this city and in other sections of the State, the Board concludes that it had

1/1900 Report of Board of Health, p. 4.
2/Ibid., p. 5.
to deal with a mild form of genuine small-pox.\footnote{Ibid., pp. 7-8.}

During 1901 the incidence of scarlet fever was two-thirds less than the previous year. The Board expressed the opinion that this was due to the fumigation of school buildings during the summer, saying, "and if during each vacation of the long period our school buildings should be treated as thoroughly as was done in 1900, the number of cases of contagion and infection would be very materially reduced."\footnote{1901 Report of Board of Health, pp. 3-4.}

In the early summer months a ship arrived from the Cape Verde Islands, with thirty-four cases of smallpox aboard. They were transferred from the ship to the smallpox hospital where they were treated. In this case it was stated that "it was the opinion of the board that in cases of this kind the National Government should treat and maintain such patients, but not until several days after the subject had been called to the attention of the National authorities did they see fit to act."\footnote{Ibid., p. 4.}

Following the report on the incidence of various diseases was the mention again of a contagious disease hospital, "That there is need for a contagious disease hospital for this fast growing mill city is apparent to anyone who has given the subject the least thought." Various instances were cited, which made this need apparent. One such case was the placing
of a person afflicted with scarlet fever in the smallpox hospital. 1/

As previously stated, the need for a contagious disease hospital was emphasized. The Board went on to mention the scarlet fever and diphtheria epidemics which occurred during this year, causing many deaths and which might have been greatly curbed if a contagious disease hospital were available.

Although free diphtheria antitoxin was available, an epidemic of diphtheria occurred in 1903, with thirty-two deaths resulting. To this dilemma the Board stated that, "many of these deaths were due to delayed diagnosis and the neglect to use antitoxin promptly and in sufficiently large doses." They further went on to say, "we feel that physicians not availing themselves promptly of these facilities incur a grave moral responsibility." 3/

During this year there was an epidemic of scarlet fever (574 cases with 146 deaths). It was the opinion of the Board that until cases of this disease can be promptly isolated, epidemics with high death rates will occur. It was stated that "such isolation is impossible without the establishment of a contagious disease hospital for both scarlet fever and diphtheria, an institution which happily is now under construction." At last the Board was beginning to reap some of

1/ Ibid., p. 5.
2/ 1902 Report of Board of Health, p. 3.
3/ 1903 Report of Board of Health, p. 3.
the fruits of their labor.\footnote{Ibid., p. 4.}

In 1904 the city's records showed the smallest number of contagious diseases for thirteen years. However, the Board suffered a setback in the city's refusal of an appropriation for the continuance of medical inspection of school children. It is apparent that the low incidence of disease for this year was instrumental in this action. Little value seemed to be placed on prevention of disease but more on its treatment.\footnote{1904 Report of Board of Health, pp. 4-5.}

The Board of Health felt that the city was to be congratulated for the unusually low death rate for the year 1905. The death rate being 17 per 1,000 was the lowest for many years.\footnote{1905 Report of Board of Health, p. 3.}

From 1906 through 1914, the Board had relatively few changes. The battle with the City Council over the insufficient funds allotted to the Board continued. In the 1906 report it was stated that "The city council has never furnished the funds necessary to equip the contagious disease hospital erected some years ago on Clark's Point, and all cases of scarlet fever and diphtheria have perforce been treated in the homes."\footnote{1906 Report of Board of Health, p. 3.} Again in 1907 the Board emphasized the need for equipping the scarlet fever wing at the hospital. A near epidemic of scarlet fever in 1907 prompted more vigorous action.\footnote{1906 Report of Board of Health, p. 3.}
Milk inspection during these years was increased and perfected, with stricter laws governing the production and transportation of milk. In 1907 the Board inaugurated the examination of milk for bacteria.\textsuperscript{2} It was mentioned in the 1908 report that the greatest obstacle the Board had to contend with was the care and maintenance of needy persons afflicted with diseases designated as dangerous. It seems that the interpretation of the laws by the attorney general of the state made this necessary. The Board felt this was an unfair burden on the city.\textsuperscript{3}

In 1913 the Board employed a nurse for the parochial schools. Her work was mentioned as being the same as that of the school nurses employed by the School Department.\textsuperscript{4} During this same year there were 333 cases of tuberculosis reported, the largest number in the history of the city.\textsuperscript{5}

An outbreak of scarlet fever occurred in a school in New Bedford in 1914. One medical school inspector advised closing one classroom. However, it was explained to the inspector that, "better control is had by keeping schools open and teaching children at such times to keep apart from each other,

\textsuperscript{1}/1907 Report of Board of Health, p. 4.
\textsuperscript{2}/Ibid., p. 6.
\textsuperscript{3}/1908 Report of Board of Health, p. 6.
\textsuperscript{4}/1913 Report of Board of Health, p. 6.
\textsuperscript{5}/Ibid., p. 7.
to keep their hands scrupulously clean, and to keep their fingers out of their mouths and noses.\textsuperscript{1} No more cases occurred in that room. However, two members of the School Board criticized the Board because of its refusal to close the schoolroom on the advice of the Medical School Inspector. In retaliation to this the report said, "A son of a member of the Board of Health was a pupil in the affected room and his parents were, undoubtedly, as solicitous for his welfare as intelligent parents would be.\textsuperscript{2}

The report of 1914 brought out more clearly a point I had been pondering upon; and that was the detrimental rather than constructive action of the local newspapers toward attempted progress by the Board of Health. As an example this report stated that, "Some of the local newspapers have seemed disposed to treat very lightly any suggestion for improvement made by the Board of Health."\textsuperscript{3} The report then went on to say that in one case their proposal was treated as a joke by at least one paper, but since that time editorial commendation has been extended to other cities, for the same project. The report then went on to say that, "best results in any work can only be accomplished by the hearty, intelligent cooperation of all...and with particular force does this comment apply to our newspapers, for with them rests an almost

\textsuperscript{1}1914 Report of Board of Health, p. 4.
\textsuperscript{2}Ibid., p. 5.
\textsuperscript{3}Ibid., p. 9.
unlimited power to be useful and helpful. The best efforts of officials, who have given careful consideration to a problem, may be partly or wholly nullified by thoughtless or ill-founded newspaper comment. 1/

In 1915 the idea of health education was brought up at length. The Board's health officers felt that the promotion of the public health and the prevention of disease must depend in large measure on the people themselves. Therefore, to educate the public on good health practices, etc., should be of utmost importance. To help achieve this, the Board was printing and distributing circulars on various diseases to all teachers and parents of children. 2/

In this same yearly report, the Board mentioned the high infant mortality rate and took the position that only through educational work can this condition be overcome. 3/ It was noticed that in this report all the various departments of the Board made a report such as the nurse's report, bacteriologist report, the milk inspector report, etc. The yearly reports had been getting more involved with more graphs and material every year. The first yearly report (1879) had only nine pages; the one in 1915 had forty pages.

In 1916 the Board decided to do away with terminal fumigation in cases of scarlet fever and diphtheria, and to insist

1/1915 Report of Board of Health, p. 4.
on scrubbing, airing-out and disinfection by the householder as a prerequisite for the removal of the quarantine card. In this same year the Board assisted for the first time in the anti-alcohol work by publishing anti-alcohol bulletins, and by furnishing quarters for the alcohol clinic that is being maintained by the Norfolk State Hospital.\(^1\)

1917 through 1919 were busy years for the New Bedford Board of Health. Tuberculosis was steadily on the increase and the Board was experiencing difficulty in getting cases accepted by the state for treatment in state institutions.

Poliomyelitis was becoming more and more a threat, especially after the epidemic of 1916 which struck New York City.\(^2\)

The year 1918 was the most disastrous as regards morbidity and mortality, for New Bedford; the death rate for this year was 24.28 per 1,000. This condition was due to the influenza epidemic which caused more than half the deaths for that year. All places where people gather such as theatres, schools, saloons, churches, etc. were closed by New Bedford, in common with all the cities of New England.\(^3\) Of this action the Board said, "Looking back over the past and comparing records in various cities, the value of the closing

\(^{1/}\)1916 Report of Board of Health, p. 5.
\(^{3/}\)1918 Report of Board of Health, p. 3.
policy is not proved. Educational work and relief measures were at the highest point of operation yet, and measures were quickly being taken to provide hospital space for the great influx of patients. After the end of November, 1918, the epidemic temporarily ceased and a great service had been rendered to the people of New Bedford by the Board of Health and a great many doctors and nurses.

In 1919 the city was rewarded with the lowest general death rate in its history, (13.25 per 1,000). This year also witnessed the establishment of a new position, that of director of field work and lecturer. Also a Venereal Disease Clinic was set up, holding three sessions a week and attended by a doctor who was approved by the State department of health.

1/ Ibid., p. 4.
2/ 1919 Report of Board of Health, p. 3.
3/ Ibid., p. 4.
C. From 1920 - 1940

In 1920, the Board added one new activity to its preventive work by taking over the dental clinics, established by the City Council several years ago and carried on since by the New Bedford Dental Society. The Board proposed opening additional clinics, and employing a number of dental hygienists for the instruction of school children in the care of teeth and for cleaning. During this same year, the active battle against tuberculosis was paying off with the Board reporting a marked falling off in both the number of cases reported and the number of deaths due to this disease. However, influenza broke out again in epidemic proportion, resulting in 787 cases with fifty-five succumbing to the disease; and diphtheria hit the city with unusual force.

For the first time in 1921 the infant mortality rate was under one hundred. Along with this was the lowest general death rate in the city's history. Of considerable interest was the Board's report on typhoid fever for this year. Although it had the second lowest record in twenty-five years, the ignorance of people on this subject was mentioned. As an example, it was stated that, "four cases developed in one

1/1920 Report of Board of Health, p. 3.
2/Ibid., pp. 10-11.
4/1921 Report of Board of Health, p. 3.
family where the first patient absolutely refused to take institutional treatment, thereby giving the disease to three others in the same family. 1/

A step forward in garbage disposal in 1921 was the acquisition of a plant for this purpose. 2/

In 1922 the Board's most important undertaking was the administering of the Schick test to children in the schools. The results of this test were very gratifying as the great majority of parents gave permission for the test showing their confidence in the measures advised by the Board preventing diphtheria. However, not all children shown by the Schick test to be susceptible to diphtheria submitted to the three toxin anti-toxin treatments required to give them immunity. 3/

It was very interesting to see that the Board's tuberculosis report for 1922 had included along with other general material the nationality, occupations, and marital status of people afflicted with this disease. 4/

With the exception of an epidemic of measles at the beginning of 1923, accompanied by an unusual number of cases of and deaths from broncho-pneumonia, the year was one of very satisfactory health conditions. 5/ In this same year

1/Ibid., p. 3.
2/Ibid., p. 3.
5/1923 Report of Board of Health, p. 3.
a Dr. Winslow of Yale University made a health survey in New Bedford; the greater part of his report being devoted to the activities of the municipal health department. It was stated in the yearly report that, "The most important single recommendation, in the opinion of the Board, was that at as early a date as possible all milk offered for sale in the local market, except milk of certified grade, should be pasteurized." 1

Another noteworthy event of 1923, was the visit to New Bedford of seven foreign health officers, members of the Health Section of the League of Nations. These men were members of the larger party which came at the invitation of the United States Public Health Service to study methods of American health administration. It was stated in the report that, "Their visit was not only a source of great gratification to the board, but had the effect of centering the attention of the community on health work and stimulating an interest in health effort." 2

From 1924 to 1925 there was little change in the Board's operation or organization. All milk distributed in the city except certain grades of certified milk, must be pasteurized, and it had been proposed that the city build a new garbage disposal plant of the incinerator kind as the other one had been destroyed by fire a few years previously.

In 1926, the Board began an educational campaign among

1/ Ibid., p. 4.
2/ Ibid., pp. 4-5.
the householders urging them to wrap their garbage in paper. At the end of this year, good results were shown with about fifty per cent of the garbage collected from households being wrapped ready for removal to the new incinerator, which was completed in November.

During this year, there was inaugurated a physical examination of pupils attending the parochial schools.1/

In the area of contagious and infectious diseases, the Board had one epidemic of a mild form of scarlet fever with only four deaths occurring. However, there were fifteen deaths from diphtheria in this year which caused the Board to state that, "Of the 15 deaths from diphtheria, ten at least can be laid at the door of the parents, who through neglect or ignorance, did not summon a physician until the children were beyond all hope of recovery. It is surprising how such a condition can exist in a civilized community, but there are such instances every year."2/

The year 1927 was a record breaker for general health throughout the United States, and New Bedford shared in this good fortune with the lowest infant mortality in its history, it being 66 per one thousand births.3/ Indifference and ignorance were again mentioned in this report as being responsible for the number of cases of diphtheria. It was

1/1926 Report of Board of Health, p. 4.
2/Ibid., p. 13.
stated that "parents of some children put more faith in the will of God, than in the advice which is given them to protect their little ones, oftentimes visiting with their offspring homes where they know diphtheria exists, believing that God will protect the children." The report then goes on to say that, "this class of people stand in fear of hospitalization."  

Another step forward by the Board was the establishment of a monthly clinic for pre-school children during this year. 

1928 through 1930 witnessed the same general promotion of good health by the Board. No large scale epidemics were encountered during these years and the reports were quite consistent with the one of 1927. However, the use of x-ray in diagnosing tuberculosis was mentioned for the first time in the report of 1929.  

In 1930, the lack of funds as an obstacle in the upkeep and operation of the Isolation Hospital was again brought up. It was stated in this report that, "The Board is doing the best it can under the circumstances."

During 1931, the Board made an effort to rid the city of its growth of ragweed. It was stated that, "In a few instances there was response to our appeal, but the great

1/ Ibid., p. 17.
2/ Ibid., p. 41.
4/ 1930 Report of Board of Health, p. 3.
majority did not seem to heed it. Only sufferers from asthma and hay fever hailed with pleasure the movement to rid the city of this growth.  

An intensive drive was made this same year toward the enforcement of the food exposure law. The Board was more and more beginning to feel that this was a very important feature of health work.  

Over 130 cases of pulmonary tuberculosis were reported during this year, which represented the smallest number in many years. However, the Board made the statement that, "Notwithstanding this fact, a great many of this number were so far advanced that it seems incredible that persons will allow this disease to gain such headway when so much publicity has been given to the ill effects of neglect. It is a record which is discouraging, especially in view of the persistent effort which the department of health has made to promote the early recognition of this disease, and the free diagnostic service it has provided."  

With the exception of the discharge of four sanitary inspectors and the closing of one child welfare clinic due to lack of funds, no change was recorded in the Board for 1932-1933.  

2/Ibid.
3/Ibid., p. 10.
In 1934 the outstanding feature of the year was the fact that for the first time in the history of New Bedford, there were no deaths from diphtheria. Also in this year of the great depression, it was stated in the report that "Despite the trying period of unemployment and of economic unrest, the death rate from tuberculosis has continued to decline."

Again in 1935 the record was repeated for no deaths from diphtheria. A step forward in the area of safety was accomplished by the Board this year when the plumbing regulations were revised, with particular stress being placed on the installation of safety valves to hot water boilers. For the first time, it was suggested that more work be done with children and adolescents in detecting tuberculosis before it gets too advanced.

In the yearly report of 1937, it was stated that, "Economic conditions of the last few years have brought in their wake a higher incidence of tuberculosis and have, therefore, slowed the downward trend of its mortality rate." It was further stated that, "It is strange, but true, that after all these years of publicity and drives to inform the public, we

2/Ibid., p. 12.
5/1937 Report of Board of Health, p. 3.
still have advanced and far advanced cases reported to us.\footnote{1/}

The death rate was next to the lowest ever recorded in New Bedford in 1938. To this record the Board stated that, "It is heartening to observe that considering the economic distress in this never-ending depression and, therefore, lowered resistance to disease, the general health has been what it is."\footnote{2/}

It was noticed that through the years of 1933 - 1939 the Board of Health's yearly reports were considerably shorter. The possible explanations for this are the depression and the absence of serious epidemics during this time.

On July 1, 1939 by order of the City Council the collection of garbage was placed under the direct jurisdiction of the Board of Health.\footnote{3/}

\footnote{1/Ibid., p. 4.}
\footnote{2/1938 Report of Board of Health, p. 4.}
\footnote{3/1939 Report of Board of Health, p. 39.}
D. From 1940 - 1957

The Board registered seventy-six deaths under one year during 1940 compared with fifty-four in 1939. It was stated in this report that, "This noticeable increase is difficult to explain but shows why our efforts in this work must be unceasing." 1/ However, from a public health standpoint, the year 1940 was satisfactory in that no serious outbreak of any contagious disease occurred.

In 1939 and again in 1940 it had been proposed by the Board that one wing of the contagious disease hospital be used for tuberculosis patients as the incidence of diphtheria which was treated at this hospital was very low and tuberculosis was still a great menace. 2/

Again in 1941 the city experienced a very good year from a public health point of view, except for a small flare-up of poliomyelitis (twenty-three cases, five of which were from out of town); and for the first time, it was reported that the Isolation Hospital had remained unoccupied during the year. 3/

The noteworthy occurrence during the year 1942 as far as public health is concerned was a "cyclic" scarlet fever outbreak. The number of cases reported was 211, compared with 1/1940 Report of Board of Health, p. 4. 
2/ Ibid. 
a yearly average of twenty-four for the previous three years. Also the number of reported cases of tuberculosis increased from eighty-nine in 1941 to 114 in 1942, over twenty per cent. To this increase the Board stated that, "It has been well proven that in periods of economic stress or war-time with its intensified industrial program and migration of large numbers of people, an increase in the incidence of tuberculosis is generally the rule."

Although this is true I think that the intensified examinations of thousands of men from New Bedford for the armed forces had a lot to do with this increase. It was stated in this report that twenty-eight cases of tuberculosis were reported to the Board by the Army Induction Station.

Because of wartime conditions the Board was having many new problems to cope with. First, a shortage of milk was reported because of a shortage of labor and prices for milk being so low that it didn't pay dairy farmers. Another problem was the garbage collection; the Board received 840 complaints about it in one month. The reason given by the contractor for these conditions was also a shortage of help. The result was the suspension of his contract and the award to another company of a new contract for garbage collection.

During 1943 the incidence of most communicable diseases

\[1/1942 \text{Report of Board of Health, p. 4.}\]
\[2/\text{Ibid.}\]
\[3/\text{Ibid., pp. 41-42.}\]
showed an increase over the previous few years, with 472 cases of scarlet fever being reported, the highest since 1926. Also there were 765 cases of measles reported, which was in excess of reported cases for the last thirteen years.\(^1\)

Tuberculosis showed an increase, the highest number reported since 1937. The Board stated that, "The war effort with its overtime work and inadequate food supply has, no doubt, been in some way responsible for this increase but the findings of Army Induction Centers also increased the number of cases, bringing to light a number of symptomless and incipient cases who would, no doubt, have gone on unrecognized for an indefinite period of time."\(^2\) However, this situation didn't continue as 1944 had the lowest mortality rate (10.4) since 1925, and disease was held to a minimum.\(^3\)

Except for diphtheria and tuberculosis, the communicable disease situation was satisfactory during 1945.

Sixteen cases of diphtheria were reported with one death, the greatest number of diphtheria cases reported since 1936. To this appalling situation the Board stated, "To successfully carry out a program of adequate immunization your Department must have the parents' full cooperation. This is not only needed, but absolutely indispensable."\(^4\)

\(^1\)1943 Report of Board of Health, p. 4.
\(^2\)Ibid.
\(^3\)1944 Report of Board of Health, p. 4.
\(^4\)1945 Report of Board of Health, p. 4.
Eighty-five cases of tuberculosis with thirty-nine deaths were reported. This number of deaths was the largest since 1942. To help combat the problem through early diagnosing, the Board received x-ray equipment. They said that, "By detecting T.B. in its early stages we will help in the eradication of this preventable disease. With this we hope to make tuberculosis as obsolete as typhoid or smallpox." For the first time it was mentioned in this report that people often use the Board of Health as the last resort of complaints; to which it was stated, "that by no stretch of the imagination can the majority of them be considered of any concern to this department."

It was stated in the 1946 yearly report by Alphege A. Landreville, Agent of the Board of Health, that, "The manner of dealing with communicable diseases, in spite of our enlightened age and all of the advancements in medicine, does not appear to effectively control them as might be expected. Great emphasis has been placed upon immunization for diphtheria in the past few years yet, while there were no deaths from this disease, fourteen cases occurred through the year. If the public heeded the widespread propaganda concerning the fight against this disease, it could be immediately wiped out in this community. The incidence of scarlet fever in 1946 showed an increase over the previous year of more than 300% and there was also a marked increase in cases of measles and

1/Ibid.
whooping cough.

"While such increases may be explained as having gone through a certain cycle, it has, nevertheless, been oftentimes demonstrated that with proper effort such increases in disease can be avoided if adequate precautions are taken by everybody. It now appears that a fight should be directed not only against these contagious diseases, but against the apathy on the part of the public toward aiding in their control. 1/

The year 1947 was a very active one for the Board with several new services being added and some of the older established services being closely scrutinized and improvements made wherever possible. A new quarters for the tuberculosis clinic were opened this year, with the addition of a transportable x-ray unit for work in the field. 2/ The inspection of all eating and drinking establishments was begun by the Board in July. The Board adopted regulations similar to those of the United States Public Health Service and three meetings were held with restaurant owners and managers to familiarize them with the requirements. 3/

New regulations were adopted governing overnight and trailer camps in this same year. Also remodeling of the Isolation Hospital was begun and new equipment was obtained.

The report further went on to mention that "The matter

3/Ibid.
of investigating nuisances in this city has become a major problem for this department. They are continually on the increase and, in many instances, are caused by carelessness and thoughtlessness on the part of the public." The report went on to give examples of this.1/

The Agent of the Board ended up his report with the following paragraph,

"It is with considerable surprise that we view the attitude of the public toward contagious diseases for, in spite of all the publicity and educational work which is done, advising parents to guard their children against the possibility of contracting contagious diseases, we find them very careless in this matter. It must be instilled in them at all costs that contagious diseases are dangerous and that every safeguard, including immunization and vaccination, must be taken to prevent the spread of these diseases. Too many children suffer and actually die not only from these particular diseases but from their aftereffects, for us to be nonchalant when we speak of contagious diseases. They are preventable and yet intelligent people ignore the warnings voiced by the medical profession and public health officials. The immunizing and vaccinating services are offered free by the Board of Health and our nurses are continually preaching about making use of them. As was illustrated in our recent outbreak of diphtheria, the children who became ill were not immunized. The opportunities that are presented to us by modern medicine in the protection of health and the prevention of disease go unheeded in many instances simply because they are not surrounded by sensationalism." 2/

The report of the T.B. Clinic for 1947 stated that, "The lack of supplies, the failure of the public to immediately take advantage of free chest x-rays was probably responsible

1/Ibid., p. 7.
2/Ibid., pp. 7-8.
for the smaller number of chest x-rays taken in the year 1947 as compared to the larger groups now being x-rayed in 1948. 

In the Board's report of 1948 it was stated by the Agent that, "For many years, the public has been more or less indifferent to public health needs and they suddenly find that all sorts of suggestions are being advanced as a cure-all for sickness and disease. All these programs should be approached with the greatest of caution for it is no different today than it has ever been that public health costs money and we should always keep in mind our ability to pay for those services."  

The tuberculosis clinic and the mass x-ray program got under full sway during this year with good results. The report stated that, "The patronage of the clinic has increased beyond the expectations of the Board of Health and the interest the public has shown in tuberculosis has been most gratifying from a public health standpoint."

The report for 1949 brought out the need for better housing facilities for the various offices, clinics and other functions carried out by the Board. It was proposed that all the health activities be concentrated and housed under one roof, resulting in a much greater degree of efficiency and elimination of lost time. The report went on to state that,

1/ Ibid., p. 38.
"The attendance at the Well Baby Conferences should have increased during the time when our birth rate increased. Instead...they have shown a continual decrease. This is largely due to the fact that the housing facilities are inadequate, dingy, and totally unsuited to a program of public health protection and education."¹

An added financial burden was placed upon the Board in 1949 by the State Legislature. A law was put into effect which required the Board to pay for the expenses of all prematurely born infants whose parents were unable to pay for their care. It was mentioned that some people were taking advantage of this law.²

In 1950 the Board was still plagued by the lack of adequate housing facilities. During this same year, five cases of diphtheria were reported. It was stated that, "None of these patients had any history of having been immunized. This again points to the fact that the parents of the children afflicted were certainly negligent in not having taken necessary precautions to prevent the illness. It is the opinion of this department that the presence of diphtheria in this city is now inexcusable because of the means which are available to protect our population."³

²/Ibid., p. 7.
This same year there was seen a tremendous drop in the total number of reported cases of communicable diseases. In 1949, there were 3,003 cases, as compared with 1,454 in 1950. Along with this encouraging picture it was stated that, "The highest of praise should go to the medical profession and to the hospitals serving this community for not having had a single maternal death during the entire year. Our nursing division has noted that a larger proportion than ever of our expectant mothers are seeking prenatal care, thus being better prepared for the coming events." 1/

The report of the Agent for the Board of Health in 1951 started out by saying that, "There are two major causes of death in the United States, namely heart disease and cancer, which have not commanded the attention of public health officials as is indicated by vital statistics. The time is not far away when this department should play an active role in carrying on an educational program to combat these two diseases." 2/The report went on to mention the problems dealing with geriatrics. It was interesting to note that the per capita costs of all public health functions in New Bedford in 1951 was $.783. To these figures, the report stated, "This community should be spending not less than $1 for these services, according to the Massachusetts Department of Public Health."

1/Ibid.

Although the year 1951 had the lowest number of contagious diseases reported, there were fourteen cases of diphtheria, with one three-year-old child dying from the disease. It was stated in the report that, "This child had no history of immunization and had been sick for several days before adequate treatment was begun. We must again repeat that this child's life as well as others in the past, could have been saved, had the parents taken the trouble to have their child protected by immunization."\(^1\)

At the beginning of the report for 1952, it was mentioned that the Board of Health had voted to make extensive changes in the presentation of the Annual Report. A great deal of material which had been of an historic nature in previous reports would be excluded from the present report for the sake of brevity.

The report of the Dental Clinic for this year stated that, "The information which is not contained in this report is the alarming number of decayed, filled and missing teeth in the mouths of the present day school children. Much has been said pro and con about the fluoridation of public water supplies but nothing seems to be done about this appalling condition."\(^3\)

\(^1\)Ibid.
\(^2\)Ibid., p. 8.
\(^3\)1952 Report of Board of Health, pp. 6-7.
Again the problem of using an antiquated Garbage Plant and run-down equipment was mentioned. It was stated that "Except for three modern garbage collection units, the remainder of the open-bodied trucks...are in such a poor condition as to rate the title of 'junk'." This report further went on to say, "The Board of Health has continually pleaded for funds, not only to replace this equipment but also to improve the general conditions surrounding the collection and disposal of garbage and refuse."  

This year also witnessed the highest number of cases of measles recorded in New Bedford since 1915 (1,403 cases) with the exception of 1923. However, only one death resulted from this epidemic. 

In the report of 1953 the report mentioned that, "Because of legislative action, boards of health in Massachusetts...find themselves called upon to continually expand the services they are already rendering the community, as well as to provide new services." The Board felt that these laws had made many rather simple problems very complex. It was also mentioned that, "In the last thirty years, in the state of Massachusetts, public health rules, regulations and laws have more than quadrupled and yet very little added personnel has been hired to carry out these functions."

1/Ibid., p. 7.
2/Ibid., p. 9.
The lack of personnel with the increase in population the Board had to serve was mentioned in the reports for almost every division of the Board of Health.

In New Bedford, during the year 1953, there were forty-four new cases of tuberculosis, this being the lowest ever recorded by the Board. However, it was further stated that, "There has been a pronounced trend in the last four or five years for tuberculosis sufferers to remain at home for treatment rather than avail themselves of hospitalization. While, in a few cases, this could not be considered significant, there are many families wherein children live with a tuberculosis patient...There has been an indication recently that there is an increasing number of pulmonary tuberculosis cases among children, which may be due to the fact that fewer people are seeking hospitalization and prefer to remain at home."\(^1\)

For 1954 the yearly report went into detail on the damage done by the two hurricanes that struck the city. The danger to public health after the storms was covered; and it was interesting to note that no epidemics of any kind broke out. However, the Board stated that, "The havoc and devastation wrought by Hurricane Carol on August 31 pointed up the inadequate preparations that have been made in this community."\(^2\)

\(^1\)Ibid., p. 11.
The two most noteworthy achievements in the field of vital statistics in the year 1954 were the tuberculosis death rate, the lowest ever recorded, and the maternal death rate. However, there were nineteen cases of poliomyelitis reported, the largest number since 1941, with one death occurring. 1

In the report for 1955, the approval and use of Salk vaccine in preventing poliomyelitis was covered. It was stated that, "The outbreak of poliomyelitis in this community brought very close to home the serious problem involved not only in the treatment of this disease...but now its control through the use of vaccine. Originating within the city itself, were forty-five cases which resulted in only one death, an excellent showing in that respect." 2

It was further stated in this report, "Handicapped by the lack of funds and personnel, this community, nevertheless, when our vital statistics are studied, shows continual improvement by and large in the health of its citizens." 2

The yearly reports of the Board of Health for 1956 and 1957 were not yet printed at the time of this research. However, this material was supplemented through personal interviews with the Agent of the Board of Health.

The main problems confronting the Board from 1956 to the present time are inadequate office facilities and being

1/Ibid., pp. 9-10.
inadequately staffed. The Agent of the Board stated that they couldn’t carry on a public health program because they had no professional workers that have a knowledge of present day science. Other problems now confronting the Board were improvement of housing facilities in certain areas of the city and treatment and rehabilitation of the chronically ill.

One major problem mentioned by the Agent was the indifference on the part of the public toward immunization of any kind, with emphasis upon the Salk vaccine program. It was felt that a larger staff could help in improving advertising of these programs. The Agent also stated that a director of public relations or a health educator were needed to do a good job.1/

1/Supplied by Agent of Board of Health, Alphege Landreville in an interview, July 5, 1957.
CHAPTER V
SUMMARY AND CONCLUSIONS
The purpose of this study started out to be an analysis of the progress of the Board of Health of the City of New Bedford, Massachusetts. I had anticipated studying the various departments of the Board, comparing them with the way they operated years ago, and how they might be improved. However, after I had delved into the problem, I decided to place the major emphasis upon the attitudes of the people toward public health work. I found this to be of major importance in the operation of a board of health.

At the very beginning the actual establishment of the board was delayed for two years. No one seemed to know or care about getting the board started. Also, unfounded fears on the part of the people were very common at this time. The idea that the caskets of people who died of contagious diseases should be sealed and that neither teachers nor scholars should attend these funerals are just two examples of these fears. However, it was quite enlightening to see how many of these fears have been overcome over the years.
As early as 1880, the board had difficulty in getting adequate sewers built to meet the necessities of the population. It was at its very beginning that the board stated that "the course then pursued was to enlighten the minds of the people upon the subject". From that time to the present day they have been trying to accomplish this but with only limited success. The time it took to get an isolation hospital built and equipped and the lack of interest shown by the general public toward most of the board's projects illustrate this point.

Over the years the Board of Health has grown in both its size and importance. However, in comparing its growth with other city institutions such as the public schools and the very size of the city itself, it hasn't grown at a comparable rate.

In conclusion, the results of this study showed that many superstitions and prejudices have worn away over the years; however, they seem to have been replaced by apathy and complacency on the part of the public. Difficulty in obtaining proper funds to carry on the functions of the Board of Health have plagued the Board from its beginning to the present time. In relation to this I have observed that only during and immediately after a severe epidemic has the public taken notice of the Board of Health and flocked to its clinics for immunization, etc. Also, the city during these crucial times is much more prone to appropriate the funds needed by the Board to operate effectively.
CHAPTER VI

IMPLICATIONS
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This study has proved the need for a professional worker in the Board of Health. This opinion was shared by the Agent of the Board, Mr. Landreville as previously stated. Any board of health serving a city of this size should have a public relations man or health educator to help overcome one of the major problems in public health work, namely the complacency and apathy of the public toward public health work. In overcoming this problem, it would alleviate a multitude of problems, including the reluctance of the city in appropriating sufficient funds to carry on public health work effectively.
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