throughout the country should be intimately associated with the School Medical Service Department, and supervised by its Medical Officers.

Mr. L. Haden Guest, M.R.C.S., L.R.C.P., Assistant School Doctor to the London County Council, in a paper on the "Provision of Meals in Public Elementary Schools," considered that the need of the child and not the "necessitousness" of the parent should be considered. The results of school feeding, when properly conducted, were physical, mental, and moral improvement.

Dr. Ernest T. Roberts, D.P.H., Chief Medical

Dr. Ernest T. Roberts, D.P.H., Chief Medical Officer to the Glasgow School Board, described what had been done in Glasgow, in connection with the feeding of school children.

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Mr. W. A. Nicholls, Former President National Union of Teachers, said that there were two classes of parents whose children needed care. Some parents were unable, by reason of extreme poverty, to provide suitable food for their children; others, through ignorance or vice, neglected the duty. On grounds of humanity the children must be fed.

Mrs. Walter Black, of the Durham County Council Education and Insurance Committees, emphasised the fact that the diet of school children was not satisfactory, and expert reports pointed to the fact that, as a nation, we were declining physically. She considered that the only remedy was to feed all children at school at least in respect to the chief meal in the day, and to make those parents pay for it who were able to do so.

Mr. George Finch, M.R.C.S., D.P.H., Oxon., late Assistant School Medical Officer to the East Sussex County Council, discussed the Diet of Elementary School Children in Country Districts, which had nothing, he said, to do with the feeding of necessitous school children in the great cities. In country districts a child might have to walk three miles to school. It therefore left home early, and did not return till five o'clock in the afternoon. Therefore, instead of a hot meal in the middle of the day, it was entirely dependent on a luncheon basket for its nourishment. The contents of these baskets were inadequate for the needs of a growing child. Moreover, the dinner, such as it was, was eaten in unhygienic surroundings, without supervision. He advocated a modification of the school curriculum, which would make the practical teaching of cooking compulsory, and the product of the cooking class available for the mid-day meal of those coming from a distance. He thought the materials would be supplied by the parents.

Dr. Gordon Lang dealt with the same question from the broader standpoint, such as the condition of the teeth, the circumstances of the parents, the distance from centres where food can be bought.

Miss M. Cecile Matheson, Warden of the Birmingham Women's Settlement, considered the Relation of School and Home, and Dr. W. Spencer Badger, D.Ph., School Medical Officer, Wolverhampton, spoke of the difficulty of teaching personal hygiene, because its practical application was a matter of domestic training and discipline.

(To be concluded.)

THE BRITISH HOSPITALS ASSOCIATION.

At the Conference of the British Hospitals Association at Oxford last week Sir William Osler had the temerity in his presidential address to question the infallibility of the voluntary hospital system. He contrasted the methods of colonial and American hospitals with those of British hospitals. A special feature of the British system was, he said, the admirable quality of the smaller institutions, such as the county hospitals. In regard to the voluntary system his advice was, "Give it up, it is antiquated, and it is not going to continue." They must make up their minds to accept the principle of taking pay in the general hospitals.

The clinical laboratories and pathological arrangements of English hospitals were out of date, he said, because they had never been in date. "You are hopelessly behind the times," remarked Sir William Osler. "You have got to reform, to re-arrange your ideas, because many of you are pig-headed, obstinate, and hopelessly ignorant on

this question.'

Dr. D. J. Macintosh (Glasgow) opened a discussion upon the National Insurance Act. He remarked that before they discarded the voluntary system they should prove it to have been a failure. They were at the parting of the ways, when they must either look to the State or receive more enthusiastic support under the voluntary system than they had obtained in the past. During the six months of national insurance it had not been found that the working man had ceased to contribute to the hospitals, and so long as that obtained why should they expect him to give any part of his sickness benefit to the institutions? He favoured making no agreement with any Government body or approved society to take any proportion of sickness benefit until they saw by experience how far they could adequately run

the hospitals without.

"Tuberculosis and General Hospitals" was the subject of a paper read by Sir Thomas Oliver, who declared that on the whole the best results could be obtained by the residence of tuberculosis patients in sanatoria. The open-air treatment was doubtless the most satisfactory, although the death from tuberculosis of wood pigeons weakened belief in the efficacy of pure air. He advocated the establishment of special State or municipally maintained hospitals for the treatment of the disease. Much could be done by the State as guardian of public health in not neglecting infected

children.

Sir William Osler advocated tuberculosis dispensaries in connection with general hospitals. The condition of things revealed by the social service work at St. Thomas's Hospital indicated that the work of prevention would never progress until the conditions under which patients lived were improved.

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