

employed whole-time for public health or school medical work. The School Medical Service has the equivalent of 367 whole-time dentists.

(d) *School Nurses*.—The total number of Nurses in the service of Education Authorities is 4,779, of whom 2,122 are District Nurses not employed directly by the Authorities. Of the remaining 2,657, 1,209 give their whole time to the School Medical Service, 1,408 are whole-time officials giving part time to public health, and 40 are part-time Nurses.

The Nursing Staff of the Education Authorities is equivalent to 1,821 whole-time Nurses, in addition to the part-time service of District Nurses which cannot be estimated.

It will thus be appreciated that the work of School Nurses forms a large and most important branch of the School Medical Service.

Sir George Newman quotes the following summary from the annual survey of the School Medical Officer for London :

"The survey of the statistics of medical inspections shows that, while there is still much leeway to be made up, while still many children leave school with defects unremedied, there is year by year a notable improvement; this is especially marked in the case of personal hygiene, dental conditions and visual defect. It also shows that much of the defect is due to causes over which the schools can have no direct control, and that these causes operate most profoundly upon the infant child in the pre-school years.

"The records show an improvement in the health of the children during school life and an intensification of the activities of children's care in the two years immediately preceding the school leaving age. The School Medical Service is a receiver of damaged goods and spends most of its time and energies in patching them up. What is now required is an intensification of social effort directed to the care of the infant in arms and the toddler before school age, so that children shall come to school in the beginning with constitutions unimpaired and with bodies attuned to receive the mental, moral and physical education which it is the primary function of the school organisation to impart."

He also states that he has carefully examined photographs in the London Report of two comparable groups of boys of the same age at a Bermondsey school in 1894 and in 1924 respectively, and of a mixed class of infants in a Southwark school thirty years ago and in 1924 respectively, and that their differences may be summarised as follows:—

"(i) The clothing, neatness, cleanliness, alertness and 'address' of the children in 1924 were in every way superior to those of 1894.

"(ii) The posture of body, carriage and stance of the 1924 children were better than in 1894. Indeed, the physical attitude of the 1894 children is gravely untuned, slack and loose, revealing an unregulated nervous and muscular system and an absence of physical training.

"(iii) The appearance of intelligence and happiness was singularly different. The 1894 children looked neglected, overwrought, uncared for and unhappy, and the 1924 children the reverse.

"(iv) The earlier photographs show clearly the great inequality of physique, some are robust though untidy, others weedy, undersized and ill-nourished. Malnutrition as well as uncleanliness characterises the groups of 1894.

"(v) The earlier groups show mouth-breathing, the later do not.

"(vi) The character and position of the hands in the 1894 children are very striking and instructive—meaningless, untrained, and undisciplined. They are characteristically different from the children's hands in 1924.

"Thus there are six points of difference between the London school child of 1894 and 1924—clothing and

cleanliness, posture and carriage, intelligence and happiness, standard of physique, mouth-breathing, and the hands. In each of the six there has been a very remarkable and constructive advance. It has been an advance in *nutrition*. We obtain further evidence of a more exact kind in the physical measurements of children of school age. *The English child is growing in stature and in weight*. . . . From the data available it seems the child of to-day is stronger, taller and heavier than the child of 1907. He is a better nourished child. To what is this due? The medical care and supervision of the child before and during school life is producing its effect; better nurture, the remedy of infective conditions which gravely impair physique, school meals, physical training, more fresh air, and improved school sanitation can scarcely fail in the long run. The direct treatment of ailments and defects removes causes of weakness—less dental decay, less mouth-breathing, fewer inflamed tonsils and glands, less tuberculosis and anæmia, a decline in severe rickets. There has also been great reform in the social life of the people, better housing conditions, better feeding, more cleanliness, better clothing, and more fresh air. Heredity is a mighty factor in the building of physique, but the influence of nurture runs it very close, and it has this advantage over heredity that we can control it directly. . . . It cannot be too clearly understood that *health* is not an artificial accomplishment, quickly acquired and easily maintained. It is a development of body and mind; a growth, slow in process; a habit, broad-based upon heredity and nurture; a balance of moderation in all things; a harmony of a sound mind in a sound body, good nutrition combined with steady nervous regulation. *It is out of such health that creative capacity comes*. On the whole, the best children physically are the best children mentally; and a sound educational system is not dependent in childhood on improved methods of education only but on a body nurture, on better feeding, on nervous control and regulation, on a steady growth of bone, muscle and brain. We have been told on high authority that feeding wins more horse races than training. Feeding is equally important for the child. But I would call the 'feeding' *total nutrition*, for this is certainly the first and perhaps the most important of all the requirements of individual and national health."

An important matter is the application of the *open-air school principle*. Local Authorities are beginning to recognise that the principle of open-air education is applicable not only to the subnormal, debilitated, or sick child, but to the normal child, to every man.

Lastly, Sir George Newman draws the attention of Local Education Authorities, and their school medical officers, to the necessity of reconsidering the whole question of the *teaching of hygiene*.

The Board of Education, in their recently-published Handbook of Suggestions to Teachers, have re-stated their view that "the physical health and condition of the child are the basis upon which all mental education must necessarily be founded" and that the subject of hygiene and physical training should form part of the curriculum of every school. "The Local Education Authority which neglects to teach this subject to every child in its charge is incurring a very grave responsibility. For the practice of healthy living is necessary to human survival as well as to the enlargement of individual capacity, contentment and happiness."

It is impossible in this brief review of a Report already closely condensed to touch more than the fringe of the questions with which it deals. Its purpose is rather to draw attention to the importance of the Report, and to stimulate interest in its contents, so that our readers may procure and study it for themselves.

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