

Department of Public Health Nursing

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DEPARTMENT OF PUBLIC HEALTH NURSING

IN CHARGE OF

EDNA L. FOLEY, R.N.

Illinois.—The influenza epidemic is naturally foremost at this moment in the minds of all public health nurses in America. Local conditions controlled the handling of the situation in most places. Chicago is said to be more fortunate than many other large cities, in that its death rate only rose to 63 per thousand and its epidemic seemed to be of five weeks' duration. The local and state health authorities, ably seconded by the United States Public Health Service, handled the medical and quarantine end. The Visiting Nurse Association, the Tuberculosis Nurses and the Red Cross Teaching Center took care of the home nursing problems in the families.

The experience of the Visiting Nurse Association may be of interest to nurses elsewhere, who have to deal suddenly with epidemics. The average number of daily calls received through the main office in October is from 45 to 60; the average number of daily calls received in September, 1918, was 48, consequently an increase to 178 daily calls, during the month of October, meant an increase of more than 400 per cent in home nursing work, for in addition to its main office, the Visiting Nurse Association maintains nine sub-stations at which calls are received each noon; and these calls represent merely family names and addresses, not the number of patients found when the nurse enters the home.

The epidemic seemed most severe in distinctly localized areas; the congested areas, as usual, suffering most. One district, which is easily handled in heavy seasons by one nurse, required the constant work of four visiting nurses, many aides, and registered 971 calls.

The second and third weeks in October were the busiest and most tragic for they revealed a shortage of everything—physicians, nurses, aides, intelligent relatives, clerks, housekeepers, cleaning women, and in a few instances, supplies. The epidemic is said to be revealing an alarming shortage of nurses in the United States. To the nurses in the field, it revealed a great deal more. Whether the prevention of similar epidemics in the future depends upon the production of immunising vaccines, upon the education of the public in regard to personal hygiene and household sanitation, upon the training of a great many more women as nurses, upon a system of state medical and health insurance, or what not, the fact remains that few communities can get through such an epidemic without feeling that personal and

family hygiene are still not understood by the vast majority of our people.

Chicago workers met in conference with the Red Cross on October 11, to discuss the nursing question. It was decided that the Teaching Center of the Red Cross should call on the graduates of its home nursing course, and send out nursing aides; that families able to pay should be referred to registries; that the Visiting Nurse Association would try to cover all families for whom it was impossible to get private duty nurses or aides. So many unnecessary calls were answered by both the Visiting Nurse Association and the Teaching Center in the first twenty-four hours, and so much duplication was found because anxious neighbors, relatives, physicians and friends telephoned for the same family to so many different sources, that the Teaching Center, on the second day, put three investigators into the field. Unless the call for an aide came from a very reliable, well-known source, the investigators went to the address first, to see how great the need was. The Teaching Center stopped all of its classes, kept open Sundays and evenings, and did an enormous amount of work. Nine hundred families in all were referred to it; 932 volunteers, many of whom asked remuneration, responded to its call. Five hundred and twenty-nine of these were assigned to families; thirty-five practical nurses were secured, and these 564 women were sent out repeatedly. Of course some of the homes to which they were sent were in such bad shape and had so many patients that no one person could remain in them for more than an eight or twelve-hour duty at a time, and frequent changes were necessary, but the volunteers rendered splendid, generous help on very short notice.

Many young women occupied during the day gave up their evenings, Saturdays, and Sundays, and it was hard to turn down the enthusiastic volunteer who had already been at work all day but who insisted that she was able to sit up all night with a sick family, and work the next day.

On the 10th of October, the Health Commissioner offered the Visiting Nurse Association the assistance of all the tuberculosis nurses in the city, about fifty. Instead of combining the two staffs, at a meeting in the Health Commissioner's office it was decided that all the patients in five zones, the territory lying about the tuberculosis dispensaries, should be turned over to the tuberculosis nurses. They took twenty-four hours to get their supplies and nursing bags in shape, and on Saturday morning, after one meeting with the Visiting Nurse Association supervisors, and one day in which to straighten out their own work and secure the supplies required for general work, they took over nearly 500 cases and continued to carry all of the

new cases of pneumonia and influenza in those areas, for more than two weeks. By this time the peak of the epidemic had nearly been reached and the nursing resources of the city were taxed to their utmost. Chicago had already given its full quota to the Red Cross, five visiting nurses had been loaned to Waukegan for extra-cantonment service around the Great Lakes Naval Training Station, and three others were given for public health nursing service outside of Chicago.

The Visiting Nurse Association had, in addition, the services of about thirty-five aides paid by the Red Cross and advertised for by the Health Department. They were, for the most part, women well over forty, both white and colored, many of them mothers who had never worked outside their own homes. These aides were paid \$17.00 a week and served for twenty-four hours, or twelve, as they were able or as the case required.

The city was further districted into small areas, each in charge of a local physician, who had been sworn in as a United States Public Health Service man. When a family needed inspection or free medical service, the case was reported to one of these doctors.

On the 16th of October, the Red Cross Teaching Center, aided by the Woman's City Club and nearly every settlement in the city, started an organized canteen service. Up to that time, different settlements had helped out in specific cases, but within forty-eight hours about twenty-five canteen centers were started, from which hot food was sent to hundreds of families.

Conditions in Chicago approximated those in other cities,—whole families were stricken. In many instances, the need of food and coal and bedding was most acute, but under ordinary circumstances the families requiring this aid would have been self-supporting and quite able to look out for themselves. The number of orphaned children and the number of children who have lost one parent does not, at first count, seem so large as has been reported from other cities, and funerals, for the most part, were attended to promptly. The schools were not closed. Theaters and other places of amusement were closed. Public funerals were forbidden.

The illness among the physicians and nurses naturally hampered the work; in fact, in no previous epidemic has the mortality and morbidity of nurses been so great. At this writing, November 5th, the city death rate, while distinctly lower, has not yet fallen to normal and the Visiting Nurse Association is still using aides, in carrying on its books over 700 cases of pneumonia and more than 200 cases of influenza. During the month of October it had reported to it 9200 patients, of whom 1000 were turned over to the tuberculosis nurses,

and to the remainder of whom over 25,000 calls were made. The Teaching Center of the Red Cross has resumed its class work, and much of the canteen work has been discontinued. A system of follow-up for convalescents is being considered.

It is gratifying to be able to state that in this emergency, the friends of the Association were never more active. The Illinois Motor Corps and the Red Cross Motor Corps furnished cars for the transportation of the nurses, the Board of Directors sanctioned the very liberal use of taxicabs, made thousands of gauze masks, and served in the office and in the sub-stations in numerous ways. When the epidemic first began, it seemed as if all of the usual activities of the Visiting Nurse Association would have to be discontinued in favor of pneumonia and influenza work, but with the assistance of the tuberculosis nurses, and by discontinuing our special work in the after-care of infantile paralysis patients, by visiting uncomplicated maternity cases every second day instead of daily, and by neglecting our poor old chronics until they felt most shockingly abused, we were able to carry all of our acute work, in addition to the work caused by the epidemic.

One very valuable piece of volunteer service was rendered by three friends who came in daily to clip influenza items from newspapers from six other cities, consequently we had on file news from Boston, New York, Philadelphia, Toronto, and other cities. Allowing for occasional inaccuracies, these clippings were extremely helpful in aiding us to avoid the mistakes of other communities, and at the same time to take advantage of all of their good works. We borrowed shamelessly, without taking time to say "Thank you," but we helped our patients, and after all, that was our chief concern.

From the first, the nurses used gauze face masks. We began by using a stitched mask with four strings. This involved carrying two bags, one for fresh and one for soiled masks, and a supply of about sixteen masks for each nurse. It also required some one to boil these masks and dry them daily, and before long we conceived the idea of folding squares of gauze on the bias, making strips of six thicknesses of gauze, which were tied over the face or pinned to the hair. Each one of these improvised masks was folded in a paper towel, and after the mask was discarded, it was burned. Of course this took a very large amount of gauze, but it was safer, cleaner, and more time-saving than the previous way of using innumerable stitched masks. The nurses carried long-sleeved all-over gowns. Our usual custom is to leave one such gown in every family where there is pneumonia, but our supply of several hundred quickly gave out, we recalled the gowns, and each nurse carried two aprons, one the usual Visiting Nurse Association

crepe apron for non-respiratory disease cases, and the long-sleeved, all-over gown wrapped in newspaper, carried outside her nursing bag, for giving care in chest cases.

Nursing care was emphasized in every home entered, even when that care meant only the taking of a temperature and the hasty instruction of a mother, an aide, a husband, or an older daughter, in the bathing and feeding of a patient. In few diseases does nursing care mean more to the patient than in influenza and pneumonia, and in spite of the fact that not all new calls were made on the day received, and that many of our nursing visits were made in less than half our usual time, we tried never to give instructive care, only, when actual hand nursing was indicated.

The main office was kept open evenings and Sundays, and the staff worked in shifts on Sundays. We did not, however, attempt night visiting nursing. The amount of illness among the nurses and the very heavy amount of work carried by each one during the day, precluded any evening nursing.

It is perhaps too soon to analyze the lesson that such an epidemic teaches us, but in our homes at least, of the middle class, the working class and the destitute class, if such a classification is permissible, the visiting nurses are convinced of two things, that more home nursing must be taught to every woman and girl in Chicago, and that better housekeeping must not only be taught, but insisted upon. We sent aides and nurses into homes where the dirt of months was supposed to be cleaned away by women who kept their own homes in immaculate condition. Surely epidemics of this sort can, in some small measure, be better controlled if we devise not only a scheme for better ventilation of the homes of our people, but if we teach and then require, better housekeeping and cleaner homes.

Arizona, Miami.—Ruth Wendell (Illinois Training School, Chicago), a former Chicago visiting nurse, and now school nurse in Miami, was put in charge of an emergency hospital in the high school when the epidemic took hold there. Practically all of her assistance was rendered by volunteers, and the response of the townspeople was very generous. As Miss Wendell wrote, "To express a wish was to have it granted." The assembly hall was made into one large ward, and nine class rooms were equipped for smaller wards. The diet kitchen, under a very capable teacher of dietetics, assisted by a score of volunteers, provided the food, and everybody sent in supplies. There were so few nurses in town that all sorts and conditions of patients were sent in, the rich and the poor truly mingling together. Many of the cases went into pneumonia and the workers in the hospital had a very difficult month, but they feel that the death rate was

low in proportion to that of other places. The splendid service rendered by the physicians of the town lightened the work in the hospital to a very great degree.

Ohio, Cleveland.—The following extracts from a letter from the Cleveland Visiting Nurse Association shows how another city met the epidemic:

There still seems to be no decrease in the epidemic here. When the schools closed, Miss Stanley assigned eight of her nurses to us and the remainder to the Board of Health, who, under Miss Ludwig's supervision, were opening extra wards in hospitals which now accommodate about 700 influenza cases. Some of the school nurses were placed in charge of wards with Red Cross Aides working under their direction. The Red Cross appropriated a certain sum for the epidemic work. Two of the day nurseries turned over their whole equipment for influenza children, which has been a great help. We also advertised for undergraduates. Many women responded to this but few of them were satisfactory. Four hundred of the Catholic school Sisters offered their services for any kind of help. They willingly went into any home and did everything there was to be done, except medical care, which they did not know how to give. Many of them could give the baths and in every case they did all of the housework and cared for the children, the graduate nurses going to the same houses to give hypodermics, etc. Many of our nurses are ill and two were previously loaned to Camp Sherman. If the remainder stand the extra pressure until the worst is over, we hope to live through it. The school teachers are doing much of our clerical work and they, with the Red Cross, are furnishing motor service.

Akron.—The armory was turned into an emergency hospital and nearly all of the public health nurses, under the charge of Olive E. Beason, their superintendent, were called upon to serve. The generous notices of the daily press left no doubt in anyone's mind as to the good will felt by all of the people in Akron for Miss Beason and her staff.

Kentucky.—Two Chicago visiting nurses were loaned to a coal mining town in the Kentucky Mountains and their experiences are still unlike those of the rest of us.

If it were not that I can understand and make myself understood, I should think I were somewhere in Europe, everything is so different. This morning I went out with one of the doctors and made calls in the homes; this afternoon I went alone, and managed pretty well. If I did not find the number I was looking for, it really didn't matter, for there is some one sick in nearly every house. The houses are all numbered, but not consecutively; No. 556 is in one street and No. 557 several blocks away. One part of the town is "School House Hollow," another "Machine Shop Hill," etc. The men here all make large salaries in the mines, but still have no home comforts, although you don't see the poverty we do in some of our Chicago districts. I asked for milk to prepare a baby feeding to-day and was told that the cow had gone away while they were all sick. No one seemed to be very much worried as to whether she ever came back or not. This town has about 2000 inhabitants and I should judge that two-thirds of the people were ill. At first we were assigned to hospital duty, but now we are

doing home nursing. An emergency hospital has been fixed up in the Y. M. C. A.; it is very nice, and we are glad that there is some place to send our sickest people for good care. There are four physicians and six nurses and we are getting along very well. Our hours are supposed to be from 10 a. m. until 4 p. m., but naturally we can't stand anything so foolish and we are going out as soon as we have breakfast. Although everyone here has had or is about to have influenza, we have had few deaths, which speaks pretty well for the care that the company has given its people.

Colorado, Denver.—Of course we have been more than busy with the epidemic. We have had a motor car from the Red Cross for every nurse, also nurses' aides and volunteer service. Four nurses were ill but we were fortunate enough to get substitutes, but could get no additional nurses.

Washington, Seattle.—Barbara H. Bartlett was in Seattle expecting to serve as Director of the course in public health nursing; instead, she proceeded to have influenza and as soon as she could leave the hospital, she helped organize an emergency hospital on the campus. Patients came in from the Student Army Training Corps. Two dormitories were used and although some of the patients were desperately ill, none had been lost at the time of writing, October 24. The Red Cross had been more than generous with supplies of all sorts and the nursing care was given by two graduate nurses and nurses' aides. The hospital grew rapidly from 47 to 124 patients. One nurse writes: "I find hospital management under these conditions somewhat trying, on account of my varied volunteer assistants. The difference between the Army, the Navy, and the Marine, consumes hours of my time in painful interviews, during which I feel that our boys are being neglected, but I suppose that is military necessity. Then, too, the nurses come and go, for practically all of them are signed up with the Red Cross and are on call. The boys are so young, so imprudent and so attractive, one has to watch them carefully, they do such rash, boyish things. The University postponed its opening until after the epidemic and everyone has been more than generous with help of every description."