The Quarterly Bulletin of The Frontier Nursing Service, Inc.

(Successor to Kentucky Committee for Mothers and Babies)

VOL. IV.

MARCH, 1929

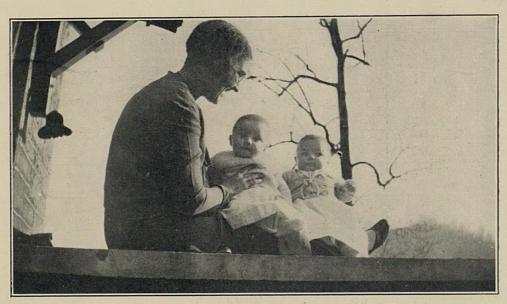
NO. 4



BABY EVA



 $\begin{array}{c} \textbf{ENOS} \;\; \textbf{AND} \;\; \textbf{EVA} \\ \textbf{AS THEY CAME TO US, AGED THREE WEEKS} \end{array}$



SIX MONTHS LATER

THE WEALTHIEST NATION IN THE WORLD ITS MOTHERS AND CHILDREN

"Perhaps, an accident Perhaps, an intention."

-Bridge of San Luis Rey.

In the course of three weeks there have been three maternal deaths in territories not far removed from our nursing stations, for complications which could have been handled by good medical care. One mother, we hear, left a three day old baby. One died following a miscarriage. Of course we haven't the details of these cases, since we didn't see them, but from the information we glean it is apparent that these women died from complications not unlike similar conditions our service has met successfully during almost exactly the same period of time.

Let us illustrate just by telling the story of the last three abnormal cases which we have handled.

No. 1 was a miscarriage, like the one which died on Wolf Creek. Ours was in the Possum Bend territory. The miscarriage was incomplete and the patient shot up a temperature on the third day. We located our consulting surgeon in the distant mining town of Hazard, through a relayed conversation by telephone. He agreed to come in on the evening train the next day. This train passes a flag station after dark. There the surgeon was met by horses and rode on in to the patient's house—a one room log cabin. At nine at night, assisted by two nurses, he did a curettage—the only light from a lantern, an electric flash and the open fire. One nurse gave the anaesthetic, the other waited on him. On another bed in the same room the patient's children lay sleeping. After the surgeon left, one of the nurses remained in the cabin to special the patient, who was given special nursing at night as long as she needed it. Her

tenure of life hung by the narrowest thread, but brilliant surgery and good nursing saved the day, and she is now restored to her family.

No 2, a young married woman of seventeen, expecting her first baby, came on a visit to her parents in the Beech Fork territory in order to be near the nurse-midwives for her confinement. They did not know of her arrival, though she had been there two days. She was seven months pregnant. At two in the morning there came a call that she was in convulsions. She had seven terrible convulsions one right after the other. Her young husband rode off for the nearest doctor in an adjoining county, but it was twenty-one and a half hours before he could come. Meanwhile the nurse-midwives proceeded with the routine authorized by our Medical Advisory Committee for cases of eclampsia, and this the doctor continued after his arrival. He stayed the night, leaving directions for the procedures to be carried on after he had gone, because it would be impossible for him to return. His territory covers a thousand square miles. Influenza and pneumonia were raging and the patients in the Beech Fork area were the only ones, except at his own headquarters, getting even nursing care. This patient also had a special nurse every night as long as one was needed. The baby, dead from the profound toxaemia, was born spontaneously a few days later. The girl-mother is alive today, with youth and hope still beckoning her, and health nearly restored.

No. 3. This patient, another young married woman, had such small measurements that it was plain she could not give birth normally to any but a very small baby. This type of case we try to persuade to let us take altogether out of the mountains, on passes furnished by the Louisville & Nashville Railroad, and put under one of our consulting obstetricians in one of the large cities, who give their services. But this patient was timid and could not face the thought of leaving home. We failed in persuading her, but, as we could not abandon her to her fate, we arranged a medical examination with the same doctor from an adjoining county who had handled the eclamptic. He carried the confinement through, and Baby Betty, though tiny, is all the reward any of us need for the weeks of anxiety we have felt on her mother's behalf.

These illustrations are given to show that the Frontier Nursing Service is not only able to take care of normal confinements, but that it can meet the abnormal also, through its medical and surgical consultants. Within a comparatively few miles there have occurred over a short period of time these six abnormal obstetrical cases. The three who had only old neighbors to take care of them are all dead. The three who called in the nurse-midwives of the Frontier Nursing Service, and through them got the skilled medical care they could not have reached alone, are all living. The difference is one between life and death.

THE CURSE OF THE FRONTIER CHILD

"Practically all children in a country with backward sanitation need worming regularly. Worms are a fearful handicap to growing children and often cause severe attacks of illness, with high temperature, due to the elimination of the discharges of the worms in the children; as well as constant anaemia and ill health."

-Excerpt from the Routine, authorized by the Medical Advisory Committee of the Frontier Nursing Service.

One of the Hyden nurses responded to a maternal call outside the limits of her district. In the same cabin four year old Ray was too sick to get up. His temperature was 100, his pulse 156, his respirations 52. During the night and day preceding his death he vomited thirty large worms. Of what did this little child die?

Three year old Hannah, from another house on another creek, has also been very ill, but she is getting better. After worming, she passed seventy-five round worms, not one of them less than six inches long.

In telling these stories so plainly, we know that we lay ourselves open to criticism by those who think only in the niceties of language. But we who share the lives of our people are unable to frame our language to please the sensibilities of the unimaginative. We can contemplate with equanimity the ravages of the worms upon our mortal bodies when we have discarded them, but as citizens of the wealthiest nation in the world we resent offering up to these Minotaurs the living bodies of our young children.

THE DIFFERENCE BETWEEN A DISTRICT AND A COUNTY NURSING SYSTEM

We are often asked about this. Visiting nursing associations are integral units of all our American cities, sometimes as part of a generalized system including baby hygiene, mental hygiene, tuberculosis, public health, etc., and sometimes as separate services caring only for the sick. They are nearly always under voluntary boards and are supported by voluntary contributions. In addition, the cities also have health departments, with nurses, and frequently carry the health of the school children as well.

The work of county nurses is analogous to that of city health department nurses, plus the school nursing. A county health department is as essential as a city health department, but county nursing does not take the place of visiting district nursing. The rural sections need visiting nursing, on a district family basis, much more than cities need it, because they have less of everything else.

The Frontier Nursing Service does not attempt to concern itself with the problems of the accessible rural counties in the United States, which are reached in different ways by existing national organizations. A great many of these have county nurses, but except where such counties embrace in their area large cities or wealthy estates, they have none of them the equivalent of the city visiting nurse associations. Nevertheless, they are accessible, and the adjustment of their difficulties is not one which the Frontier Nursing Service can make its concern.

The Frontier Nursing Service has come into existence in order to provide a district nursing, midwifery and child hygiene service for the inaccessible, difficult areas, mostly in the mountain ranges. Its bounderies are topographical and not artificial. It works on a regional and not a county basis, and divides its nursing areas into districts, every part of which is accessible to its own nursing center. It functions in territories where no other agency is at work, and such territories still, in the United States, aggregate the size of an empire and are inhabited by

millions of people. It aims to provide the same painstaking individual family nursing care, especially for the helpless and the young, that is taken as a matter of course among the poor in cities, but is unobtainable for our finest old American stock in the outposts of our country. Such cases as we have described in the first pages of this Bulletin are only reached by a district family nursing association working in the homes.

The cost of such a service can be met only to a small extent by the people making use of it; but then the cost of visiting nursing in cities is met only to a small extent by the people making use of it. Such work is financed by voluntary contributions handled by voluntary boards. In our June Bulletin, when we will as usual lay before the public a complete audit and accounting for the year of all our financial affairs, we purpose giving at the same time an outline of the program which our trustees have assumed for the next few years and the way in which they are meeting it. Those who have followed our work from the beginning know that after our first fiscal and nursing year we had a study made of costs and issued it immediately, showing the cost of our service per visit and per capita. These compared favorably with the costs of similar services in cities where distances are not so great but where rents are high. We feel that the public, which has so generously supported our first three and a half years of existence, and never so generously as during this past year, would like to know the plans our trustees are making for the support of the Service, which is extending its territory rapidly, and demonstrating nearly every day that the difference it makes in the areas it covers is one between life and death.

We wish to thank the New York Times and the Philadelphia Public Ledger, the one for its editorial and the other for its special feature article covering our work. Both were written in the restrained and accurate style which is the only kind of publicity of service to us—but such publicity is of very real service.

FIELD NOTES

We regret to report the serious illness of the wife of Judge Dixon, our regional chairman of the nursing centers on the Middle Fork of the Kentucky River. Mrs. Dixon has a wide circle of friends as well as many strong family ties, and her recovery is anxiously awaited by us all.

The principal of the Hyden grade school, Mr. Jesse Lewis, has instituted hot lunches for the children coming in from the creeks and branches around Hyden. Each outside child gets a bowl of soup or cocoa at noon every day. To this we have the privilege of contributing nutritive biscuits, quantities of which are sent to us every month by Mr. A. G. Bixler of New York.

Under the leadershp of Mr. Charley Woods, a Parent-Teachers Association has been formed on Bull Creek. At a recent meeting it was voted to build a clinic there for the use of the Frontier Nursing Service, one of whose nurses spends a day there each week. Voluntary contributions have been taken up to cover everything. Twenty-seven hundred feet of lumber have already been given, "on the hoof," as it were, for it is in the form of forest trees. A widow has donated her son and a team of mules to bring them down to the sawmill, which has donated the sawing. One man is giving all the nails. This is in keeping with the extraordinarily progressive spirit always shown by this particularly inaccessble community. Mr. Woods' school has 100% of its children inoculated against typhoid and diphtheria, and practically all the children under school age in the same neighborhood have also been inoculated.

The nurses at Red Bird River have at last got a well—185 feet and 4 inches deep, with 75 feet of casing. It took all of that to reach the water, and the total cost has been nearly \$1,000. And yet we are often asked why people in rural districts have an unsanitary water supply! Nobody prefers an open surface well—but it is cheap.

The F. N. S. has just bought forty-seven acres between Hyden and Wendover for a pasture for horses when they are off duty. We have found it necessary to keep more horses than nurses, because horses haven't the resistance of nurses and are out of condition much oftener. They badly need a little green, especially in the spring, and a place where they can relax occasionally. We have studied, with great profit to ourselves, the work of the Robinson Experiment Station at Quicksand, and are going to plant our mountain pasture after the methods they have demonstrated to be successful. One of our trustees at Hyden, Mr. Walter Hoskins, is regotiating the purchase and drawing up the deed for us, as one of his many similar gifts to the Service.

* * *

The mountains have had their fill of influenza and pneumonia this winter. The suffering among the people has been terrible and the tax upon our nursing system heavy, although only four of us have been ill ourselves.

We are so happy to report that Dr. Stoddard, who has been desperately ill from pneumonia, has safely pulled through. In the territory left without medical care during the epidemic, because of his illness, Dr. Hiram C. Capps has carried on. It will be remembered that his position as health officer in Leslie was made possible through special grants from the U. S. Public Health Service and the State Board, the county meeting a sixth of the cost.

* * *

We often say that nobody comes to see us in the winter, and indeed it is rare for a guest to make the hard trip in at this time. But this January we did have such a guest in Miss Theresa Kraker, widely known among public health nurses all over America. She met all the difficulties of the season gallantly, even learning to ride in order to get about with the nurses over trails the buckboard could not possibly cover. Her visit has been a huge help to us in connection with more than one problem.

The nurse in the picture of Enos and Eva as they first came to us, is Doris Park, and the one in the lower picture is Ellen Halsall. It is to the devotion and skill of these two nurses that we owe the lives of two of the most acceptable babies that ever

graced this planet. One of the younger nurses is shown on the cover with the enlarged picture of Eva. She is Doris Beaumont.

The only sadness in the growth or our young organization is that we must measure the passage of time by the deaths of our friends. In our last Bulletin we had to record the passing of one in Detroit. Now we feel with equal poignancy the loss from our Cincinnati Committee of Mrs. John F. Winslow, whose early encouragement three years ago was one of the largest factors in getting our work sponsored by that great city.

* * *

Within the past month, the Frontier Nursing Service has suffered a great and irreparable loss in the death of Mrs. William Erskine Simms. Since the very beginning of the organization, Mrs. Simms and her family have aided the work through gifts of time, energy and substance. As trustee of the Frontier Nursing Service, Mrs. Simms stood ready in any emergency to give of her counsel and strength to the affairs of the Service. Through the consecration of her life, she wielded an influence very real and important throughout her own community and the State at large. She was kind and gentle, generous and unselfish, noble in thought and deed. Permeating all her qualities of mind and character was a deep inner spirituality. She drew her strength from "the day-spring from on high," and the reality of her Christian faith made strong and valuable all her relationships with those about her.

We, fellow-members of the Frontier Nursing Service, will miss her always, and we will often in future wish we could have the privilege of her companionship and counsel. Our deep sympathy goes forth to her brother, Dr. A. J. A. Alexander, our chairman since the organization of the association, and to Mrs. Alexander, her devoted sister-in-law, who is also one of our trustees. For her husband and daughters and little grandchild, we feel the greatest sorrow, and we wish that in some measure we could express to them our full realization of their loss, which is also in some measure our loss. The memory of Lucy Alexander Simms will serve as a beacon light to us for further endeavor. The radiancy of her spirit will yet live amongst us, and will inspire those who are left on this earth to try and help other mothers to attain in some degree to the fullness and beauty of her womanhood. "Blessed are the pure in heart for they shall see God." M. P. J.



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(Successor to The Kentucky Committee For Mothers and Babies, Inc.)

Its motto:

"He shall gather the lambs with his arm and carry them in his bosom, and shall gently lead those that are with young."

Its purpose:

To safeguard the lives and health of mothers and young children by providing trained nurse-midwives for remotely rural areas where resident physicians are few and far between—these nurse-midwives to work under supervision; in compliance with the Regulations for Midwives of the State Boards of Health, and the laws governing the Registration of Nurses, and in cooperation with the nearest available medical service.

THE QUARTERLY BULLETIN OF THE FRONTIER NURSING SERVICE, Inc.

Published quarterly by the Frontier Nursing Service, Lexington, Ky.

SUBSCRIPTION PRICE \$1.00 PER YEAR

VOLUME IV.

MARCH, 1929

NUMBER 4

"Entered as second class matter June 30, 1926, at the Post Office at Lexington, Ky., under the Act of March 3, 1879."