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A Telling Look Back at Public Health In Our County

**By Melanie Reynolds
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During a recent office move, I stumbled across a fascinating document that says much about the state of health in our community.

Its title may be drab: “First Annual Report of the Full-Time City-County Health Department.” But its contents, written in 1938, attest to a sea change in the nature of health threats we face.

The health department and the issues it tackles have evolved since the nation emerged from the Depression and faced another world war. Yet, in other ways, the focus of public health remains much the same.

A Health Department Is Born

Local officials created our health department on Oct. 1, 1937, in response to petitions from “the majority of all citizens, including doctors, dentists, teachers, and other leaders... to bring the advantages of a Full Time Health Department to the City of Helena and Lewis and Clark County.” The president of the local PTA spearheaded the petition drive.

We became only the fourth full-time health department in the state, according to the report. Previously, two doctors juggled the public health needs of city and county.

The main mission of the new department was “the promotion of the health, happiness, and welfare of children.” Schools were seen as “the most accessible approach to health problems of a community.”

“The aim of the Department will be one of a participating nature with efforts directed toward the development of the capacities of the various professional groups better to provide a co-ordinated program of continuous health supervision and education of the child...,” the report said. “In this way the Health Department is not just one more agency of health in the community... but is assisting all agencies to build for a happier and healthier childhood.”

This role of the health department as coordinator, educator, and developer of capacity in the community continues to this day, though we've broadened our scope to include residents of all ages.

The original department also was tasked with supervising "sanitation, water and food supply, sewage disposal, and control of communicable diseases." These are crucial areas we continue to monitor to protect the health of all.

Old Threats

What I find most compelling about the 1938 report is the type of health threats faced by that earlier generation. They're notably different from the health issues we see today.

According to the report, the county had two smallpox epidemics in the 1930s due to "a failure to continuously vaccinate." It may have been these outbreaks that spurred creation of the health department.

The fledgling agency immediately mounted an "intensive effort" to immunize schoolchildren, "thus protecting themselves (the students) and the community" from smallpox in the future. The result was a 95-percent immunization rate, which we would be proud to achieve today.

The report identified the leading causes of death in the county as heart disease, pneumonia, cancer, stillbirth, and apoplexy (now called stroke). Scarlet fever, typhoid, diphtheria, and tuberculosis were also rampant.

The "most vital of health matters" was the "problem of final sanitary disposal of human excreta from the City of Helena."

"Helena today is about one hundred years behind the trend toward automatic final sewage disposal," the report said. It called for installation of a "modern" waste disposal plant to help eliminate the "rats harbored and breeding under the present circumstances."

New Enemies

Many of the diseases and conditions faced by our predecessors are rare in the United States today. They sound like quaint relics of a bygone time. The development of vaccines and other medical advances have practically eliminated them, at least in our country.

But immunizations continue to be a vital part of the work of public health. Some of those obscure diseases are only a transoceanic plane ride away, so we can't let our guard down. And today, as in the 1930s, flu and whooping cough continue to flare up, despite intensive prevention campaigns.

It's an ongoing fight to keep communicable diseases from gaining a foothold in our community.

Still, the most striking difference in the work of public health then and now is the rise of a new enemy: chronic disease. These are long-lasting conditions that require careful management to control.

The most recent health department report, published in 2011, identified cancer, heart disease, lung disease, unintentional injury, and stroke as our leading causes of death. All but injury are considered chronic diseases.

Many of the factors that cause chronic disease are behavioral, and thus preventable. They include tobacco use, poor diet, and physical inactivity. In other words, healthy living can help to deter chronic disease.

We now have programs aimed at reducing the rates of asthma and diabetes, and we collect statistics on cholesterol levels and high blood pressure. We encourage policies that make it easier to access healthy food, be more physically active, and avoid exposure to second- and third-hand smoke.

So the message I take from the 1938 report is this: More than ever, citizens must be active partners in protecting the public health – by continuing to take advantage of preventive measures like vaccinations and by creating a healthy environment that encourages a healthy lifestyle.

Let's hope that, 77 years from now, when the health department produces its report on the health of the community, there will be no reason to mention chronic disease.