

**A SOCIAL SURVEY OF ARIZONA;
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MARY KIDDER RAK

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A SOCIAL SURVEY of ARIZONA

BY
MARY KIDDER RAK

FOREWORD

In the past it has been very difficult to obtain information concerning Arizona's institutions, philanthropic and social organizations, and this Survey attempts to present these data in a brief form hoping that many will find them useful.

The Survey was planned, and the first questionnaires were sent out, in July, 1919, and though all were urged to tell of any new work or developments planned for the near future, much progress may have been made since the material was gathered.

All possible publicity has been given the Survey, and every effort has been made to cover every philanthropic and social work organization in the State. If any have been omitted it is unintentional and will be greatly regretted.

The writer wishes to express her gratitude to those who have responded to her many letters and questionnaires, and particularly to thank the officials of Pima County who assisted in the preparation of the questionnaires, adding sensible, and eliminating "foolish questions."

Since we have entered upon a peace program, any mention of war work done by various organizations is purposely omitted.

It is earnestly hoped that the splendid flood of social service enthusiasm, which had its source in devoted war work, will be diverted into peace channels and find some guidance in this little Survey.

LIST OF REFERENCES, AND SUGGESTED READING.

Bulletins published by the following organizations, which will furnish a list upon request:

Arizona State Board of Health, Phoenix, Arizona.

Children's Bureau, U. S. Department of Labor, Washington, D. C.

The National Committee for Mental Hygiene, 50 Union Square, New York City.

The Russell Sage Foundation, New York City.

BOOKS

Social Service and the Art of Healing, by Richard Cabot.

American Charities, by Amos Warner. (Third revision.)
The Kalikak Family, by Henry H. Goddard.

Social Diagnosis and The Good Neighbor, by Mary E. Richmond.

PUBLIC HEALTH

All references to Public Health laws are found in Chapter 1 of Title 41, Revised Statutes of Arizona, 1913, unless otherwise described.

The public health administration consists of a State Board of Health of which the Governor is ex-officio president, and of which the executive officer is the Superintendent of Public Health, a practicing physician appointed by the Governor.

In each county there is a local Board of Health of which the chairman of the Board of Supervisors is the ex-officio president, and the executive officer is the County Supervisor of Public Health, a practicing physician, appointed by the supervisors.

Any incorporated city shall establish a local Board of Health, of which the executive officer is a practicing physician, appointed by the Mayor and confirmed in his office by the City Council. (There are only six Arizona cities employing a City Physician.)

It is the duty of the State Board of Health to make and enforce all needful rules and regulations for the prevention and cure, and to prevent the spread of any contagious, infectious or malarial diseases among persons or domestic animals, to establish a quarantine of humans, to kill or isolate infected animals, to remove, or cause to be removed dead bodies or decaying substances: "to condemn or cause to be destroyed any impure or diseased article of food that may be offered for sale." "To superintend the several Boards of Health in the cities and towns and the County Boards of Health of the several counties."

The duties of the city or county boards, known as local boards, are the same as those of the State Board, within their own boundaries, subject to the jurisdiction of the State Board and reporting to it.

All expenses incurred by the local Boards of Health, in the prevention of disease or the care and maintenance of sick persons, are to be borne by the city or county whose board contracted these expenses. There seems to be some friction between the City and the County Physicians as to duties and responsibilities. In response to a question on this point, one County Physician naively writes, "I happen to hold both positions, formerly there was much conflict of authority."

CONTROL OF VENEREAL DISEASES*

Acting under the Public Health Law, the State Board of Health has adopted amendments to the regulations for the control of venereal diseases, which amendments have been in effect since March 1, 1918.

Under the regulations so amended, all private physicians are to report all cases of venereal disease to their County Health Officer, who shall in turn report them to the State Superintendent of Public Health. The cases are to be reported by serial number, not by name, and the probable source of infection is given. When the quarantine, which must be established by the private physician, is broken or lifted, that, too, must be reported.

That these regulations are being obeyed only "fairly," or "I think so," was the best that any of the County Health Officers could say when questioned upon this point. The majority of them state that these cases are not being reported to them satisfactorily.

All the County Health Officers treat the cases of indigents suffering from venereal diseases, except Yavapai, whose cases are treated at the County Hospital. All counties except Yavapai and Yuma will furnish salvarsan for cases of indigents, and except in Gila, Cochise, and Pima Counties, for prisoners in the county jail who are unable to pay.

The campaign for the control of venereal diseases in this State is being conducted along the plans outlined by the United States Public Health Service, under Dr. Z. Causey, State Director of Venereal Disease Control for the Arizona State Board of Health. The main features of the campaign are here summarized from the report of Dr. Causey, published in the Bulletin of the Arizona State Board of Health, January, 1920.

"The education of the public must come first, and the establishment in all the large centers of free clinics. Douglas has already established a free clinic for venereal diseases, and there are prospects for their establishment in Phoenix and Tucson. The response from the private physicians of the State has been very cordial. Many Arizona druggists have voluntarily agreed to refrain from selling advertised venereal disease remedies, and nearly

* See supplemental chapter for new legislation.

all of the newspapers of the State now refuse to carry advertisements of such medicines.

"Boards of Supervisors and City Councilmen are being urged to make suitable provisions, in the County Hospitals or elsewhere, for the detention and treatment of disease carriers, this being vitally necessary.

"The State Board of Health is making every effort possible with the limited resources in hand, to bring correct diagnosis and scientific treatment to every victim of venereal disease in the State. To this end we have arranged with the Arizona State Hospital to make all Wasserman tests sent to them without cost to the patient or physicians. The State Board also has on hand a supply of arsphenamine for the treatment of syphilis which may be had, free of cost, for treatment of the indigent upon application from the patient's physician. We urge that the physicians of the State make use of the above opportunities to bring relief to those who are not otherwise able to obtain it.

The various City and County Health Officers have almost to a man promised their hearty co-operation in this campaign and have agreed to treat any person free of charge who appeals to them, that is not able financially to pay for same."

DRUG USERS

It is very significant that while the Health Officers of the northern and middle counties report that they have seen but few or no drug addicts, others in the counties along the Mexican border say they are frequently called upon to treat drug victims in the county hospitals or, more often, in the jails.

The following paragraph is quoted from the report of the Medical Department of the Arizona State Hospital, published in the second annual report of the Commission of State Institutions:

DRUG ADDICTS

"We have received and treated many drug addicts that were legally declared insane in order that they might be confined in the hospital for treatment. It is well known by those of experience in handling these cases that they are very undesirable subjects for an insane asylum. We are compelled to put them on wards with insane patients. They naturally complain of the food, the man-