

RURAL MEDICAL AID FOUND INADEQUATE

**Commonwealth Fund Holds
Service Is 'Not Good Enough'
—Wide Help in Year.**

\$1,720,000 GRANTS MADE

**Harkness Organization Reports
Assistance to Town Hospitals
—Buying Revival Noted.**

The annual report of the Commonwealth Fund, of which Edward S. Harkness is president, records the use of \$1,720,000 for philanthropic purposes in 1934.

Public health, rural hospitals, medical education and medical research accounted for 58 per cent of the total appropriations made by the fund during the year. Fellowships for British students in American universities took 14 per cent; mental hygiene activities, 12 per cent, and publications, legal research and miscellaneous activities, 16 per cent. Family welfare agencies here received \$100,000 for emergency relief.

"The past year in American medicine," the report says, "has seen a continuation of the often acrimonious controversy between those committed to innovations in medical economics and those resisting change. The major interest of the fund, however, is in a problem often overshadowed by the attention paid to costs and to professional prerogatives—that of improving the quality of medical service.

"It is time for realism to replace romanticism in American thinking about this matter: a basic reality is that rural medicine, by and large, is not good enough.

Better Hospitals Sought.

"The fund gives first place, among the means of strengthening the rural practice of medicine, to the well-planned and well-managed community hospital around which educational activities are grouped. As a demonstration, the fund has subsidized the construction and given advisory service in the operation of six such hospitals, one each in Maine, Virginia, Kentucky, Tennessee, Ohio and Kansas.

"During the past year the use made of these hospitals indicates some revival of purchasing power on the part of the rural communities concerned. Average occupancy has increased 22 per cent over the previous year and collections on patients' accounts have gone up 33 per cent.

"Public support for health work in the areas helped by the fund has increased materially. Seven towns in the Southern Berkshire area in Massachusetts have voted to set up a joint health service, which sets a precedent for the New England States, in which public health responsibility has generally been carried by individual towns. Fourteen towns in the vicinity of Ayer, Mass., will vote on this question at town meetings in the next few months.

Gains Noted in Tennessee.

"In Tennessee, where the fund has been aiding public health and

medical development since 1924, definite evidence of public gain has been registered. In Rutherford County, where the fund began a child health demonstration ten years ago and where the county has maintained its own health department for the past five years, the maternal mortality rate has decreased almost a third, the still-birth rate more than a fifth, the infant death rate about a fifth, and the death rate from diarrhea and enteritis under 2 years of age almost two-thirds. Comparing the five-year period 1924-28 with 1929-33, the number of deaths of children and young people under 20 from a group of generally preventable diseases has fallen from an average of 48 per year to an average of 24.4 per year—a net saving of well over a hundred lives in this one county."

The report adds:

"The administrative commissions now playing a large part in American governmental processes are the subject of special study by the Legal Research Committee associated with the fund, Professor Joseph P. Chamberlain having been secured to review the subject broadly while other scholars have examined special fields of administrative law. A. A. Berle Jr. is directing a study of the operation of the Securities Act and other 'blue-sky' laws."