AN EVALUATION OF THE PHYSICAL EDUCATION,
HEALTH, AND RECREATION PROGRAM
OF THE WACO STATE HOME

THESIS

Presented to the Graduate Council of the North
Texas State Teachers College in Partial
Fulfillment of the Requirements

For the Degree of

MASTER OF SCIENCE

By

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CHAPTER I

INTRODUCTION

The purpose of this study was to evaluate the program of physical education, health, and recreation of The Waco State School from 1933 to 1940.

Chapter I outlines the plan which was followed, states the purpose of the study, lists source of the data, and discusses the general plan of the work.

In order to make the evaluation, it was necessary to set up a yardstick or standards for measuring the efficiency or the inefficiency of the Home. Authoritative educational leaders in the field of education and the recommendations of The State Board of Education were consulted.

Chapter II states the aims and objectives of a physical education, health, and recreation program, sets up definite objectives or goals, and gives the results of this study.

Chapter III deals with the history of The Waco State Home. Because the Home has some unusual conditions with which to deal, especial emphasis was given to the type of children who live in the Home. Attention was given to the causes of dependency, the methods necessary for admittance
to the Home, the length of stay, the growth and population of the Home, the counties represented, the distribution of population according to counties, the physical plant of the Home, and the size and enrollment of the public school maintained within the Home.

Chapter IV lists the health facilities of The Waco State Home and gives the Health Records of the Home since 1933. Attention was given in this chapter to the physical examinations of the children, to the facilities of the hospital, and to the physical conditions of the plant. The Health Records, as presented in the annual reports to The State Board of Control were given in detail for the years 1933, 1934, 1935, 1936, and 1937. The 1938, 1939, and 1940 reports are presented in statistical form.

The physical education, health, and recreation program of the Home was reported in Chapter V. The study was presented through the presentation of reports from the School to The State Board of Control. In this respect it was possible to give a picture of the growth of the programs, a statement of the addition of necessary equipment and staff members, and a record of results achieved.

In Chapter VI a summary and conclusions derived from the study were given and an evaluation was made.
CHAPTER II

STANDARDS FOR EVALUATING THE PHYSICAL EDUCATION,
HEALTH, AND RECREATION PROGRAM
OF THE WACO STATE HOME

There must be a yardstick by which to measure the physical education, health, and recreation program of The Waco State School. Without such a yardstick, there would be no adequate means of evaluating the efficiency or the inefficiency of the work. Fortunately, educational authorities, in their study of the conditions, have formulated aims and objectives which will be helpful in any analysis undertaken.

In its efforts to formulate a state course of study for the public schools, The State Department of Education of Texas lists a definite philosophy of physical education:

In the curriculum of the elementary school, physical education contributes by means of a progressive program of physical activities to the physical, mental, emotional and social development of the child. It is therefore a definite part of the total education of the individual.\(^1\)

The importance of health education was also stressed. The Tentative Course of Study says:

It is recommended that the health education work be placed on an intelligent basis with the student from the beginning. This method does not

place a value on giving awards for health practices, using personification, or placing emphasis on health jingles or plays. Instead, the teaching procedures emphasize real life experiences based on the natural interests of the child.

The importance of mental, emotional, and social health increasingly has been realized with the acceptance of the educational principle that the child is an integrated personality. Modern psychologists have stressed their important influence on physical health. In the complicated social and environmental life of the modern day, these phases of health need definite consideration in the health education curriculum.²

The Tentative Course of Study then set up this definite philosophy of health education:

The health education program in the curriculum of the elementary school contributes to the healthful living of the student, physically, mentally, emotionally, and socially, by progressively furthering the development of necessary skills and habits, the formation of desirable attitudes, and the imparting of useful knowledge favorable to health.³

The State Department of Education of Texas set up the following standards upon which the success of a desirable physical education program depends:

1. The physical education period in the school day must be an instruction period during which the child is taught knowledges, skills, habits, and attitudes favoring participation in wholesome physical activities.

2. The minimum time allotment for the physical education period should be thirty minutes daily for the elementary school.

² Ibid., p. 409.
³ Ibid., p. 410.
3. The physical education period must be placed in the school day at a time favorable to the physiological condition of the student. This principle discredits the practice of scheduling physical education classes at the noon hour or immediately after the noon hour.

4. Because of the differences in the development and ability of children of various ages, students should be placed in homogeneous groups for classes in physical education.

5. By the time the boys and girls have reached the fourth grade, they should be separated for those activities in the physical education program in which there is a difference in interests or physical ability. They should be kept together in those activities in which there is an interest in being together and in which there is no disadvantage to either group.

6. Children should be given an equal opportunity to participate in some type of physical activity suited to their needs, interests and abilities.

7. In the physical education program of the elementary school, the fundamental skills should be stressed, such as walking, running, jumping, kicking, climbing, throwing, catching, striking a ball, and responding with bodily movement to rhythm. The normal, physically educated child, as he leaves the elementary school, should have correct, coordinated movements and satisfactory performance in the above fundamentals.4

The above standards, which apply directly to the teaching of physical education in the public schools were used to measure the efficiency of the physical education program of The Waco State Home, since the Home maintains a regular public school for its children.

In order to achieve a success in a desirable health program, the following standards were set up by The State Board of Education:

4 Ibid., p. 382.
1. Proper facilities which make possible healthful living should be furnished; these should be properly supervised; and administrative provisions made for the use of the facilities to promote desirable health practices.

2. The cooperation of every adult in the school should be had in carrying out the health program throughout the school day.

3. A daily instruction period in health education should be taught by the teacher.

4. Integration of the health education work should be made with other units and subjects of the curriculum.

5. A health examination of the child should be made at least in alternate school years for determining the health status.

6. A daily inspection of the students to determine the existing health conditions should be made.

Other authoritative standards, besides the ones used to carry on a desirable physical education and health programs, which were set up by The State Board of Education of Texas, were examined to evaluate the program at The Waco State Home. The following aims of the physical education, health and recreation of the public school were presented by Bernice Moss and W. H. Orion:

The aim of a health instruction program is to aid in the development of healthful behavior in the pupils. Such behavior should be revealed through daily habits, the expression of desirable attitudes, and the grasp of a body of scientific knowledge which will give a basis for intelligent self-direction. It is recognized that all experiences of the child condition his behavior, and that health

5 Ibid., p. 410.
education is the product of a variety of experiences. The instructional program in the school should be so organized that it will make its contribution to the development of a scientific, wholesome, intelligent attitude concerning individual and community health.6

E. D. Broome says:

There are three definite but closely related parts in a complete plan of physical and health education... All three phases are directed toward a common objective—the building of healthy bodies and healthy minds.7

J. F. Rogers stated that there is a fundamental purpose motivating the health program of any school. He says:

The human body is a machine through which the mind works. Every exhibition of mental activity is accompanied by physical activity, and the quality and quantity of mental work depends as certainly upon the condition of the machine by which it is exhibited as do the quantity of work produced by any less complex-man-made mechanism with the working of which we are familiar.8

R. T. Gregg believed that the building of good citizens was or should be one of the main aims of education. He says:

If the secondary school is to be oriented to present-day life, its major purpose inevitably becomes identified with the purpose of modern democratic society. The high schools should assist individuals to gain an understanding of society, should develop in them concepts, attitudes, knowledge, and habits which not only will help them as individuals to deal successfully with their


own problems but will lead them to build cooperatively a better society. The individual should be guided toward an awareness of the confusion in social thinking and encouraged to think about the problems involved. As a result he should be stimulated to establish clarity in his own thinking and action.9

A. A. Douglass made this statement:

"Learn to do by doing," is the popular statement for the educational principles of self-activity. Whether the popular statement means that one learns best by doing, is not clear. On this point, however, educational theory is outspoken. The doctrine of self-activity means that a pupil is educated only through his own responses. But extracurricular activities have every advantage when contrasted with traditional classroom methods.10

Even a casual survey of the aims and objectives, not only of physical education, health, and recreation programs but of the whole educational program as well, reveals that the fundamental aim of all is to build healthy, sane, happy, useful citizens. The work of The Waco State Home was therefore evaluated mainly on the basis of what it has been able to accomplish along these lines.


CHAPTER III

HISTORY OF THE WACO STATE HOME

The Waco State Home, formerly The State Home for Dependent and Neglected Children, is located about three miles northwest of the business district of Waco, Texas. It was established by an Act of the Thirty-Sixth Legislature, and was formally opened to children in 1923. The purpose of the Home, as set out in the Act, was for the care, education, and training of "Dependent and Neglected White Children."

The term "Dependent or Neglected Child" has been defined by an Act of the Twenty-Ninth Legislature, in 1907, as:

Any child under sixteen years of age, who is dependent upon the public for support, or who is destitute, homeless, or abandoned; or who has not proper parental care or guardianship, or who habitually begs or receives alms, or who is found living in any house of ill fame or with any vicious or disreputable person, or whose home by reason of neglect, cruelty, or depravity on the part of its parents, guardian or other person in whose care it may be, is an unfit place for such child; or any such child whose parents or guardians permit it to use intoxicating liquor except for medicinal purposes or to become addicted to the use of such liquors, or permits it in or about any place where intoxicating liquors are sold. 

The primary purpose of the institution was thus seen to be "the care, education and training of neglected or dependent

1 Annual Report for The Waco State Home, 1933, p. 2.
white children." The act unquestionably presupposes a basic policy of long time care of such children, and not merely their care for a short period of time.

Admittance to the institution may be had only through a court order. The Statutes provide that any person who is a resident of a county, having knowledge of a child in his county who appears to be "dependent or neglected" may institute proceedings in the District Court to have the child declared "dependent" or "neglected." If, upon proper hearing, the child is so adjudged, an order may be entered, making disposition of the child as the Court deems best for his moral or physical welfare. Due to the lack of facilities for caring for the children, not all "neglected" children are admitted to the State Home, but all that are admitted enter through or by the way of a court order. The period of time during which the child is committed by the order of the Court extends over the years of a child's minority.

The Statutes are rather general in providing a policy of admission, but they are selective in regard to the age and condition of children to be admitted. Preference is given to children of "tender years," and they must be shown to be free from "feeblemindedness, insanity, epilepsy, venereal diseases, tuberculosis, or other communicable

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diseases. No child who is known to be a habitual violator of the law may be received. In making the Annual report of the Home for 1940, R. R. Patterson, Superintendent, makes the following comment on the above provisions:

It would be beneficial to the group as well as to the individual child if admissions could be limited to those children for whom the institution is best qualified to care for.

No institution can be so well organized that the best care can be given to all the varied types of dependent children. Clearly, there are some children who should not be received in institutions for their own good or for that of the other children with whom they are to be associated. It is doubtful if any child should be kept in an institution until he is twenty-one years of age.3

Because the Statutes expressly commit "neglected" or "dependent" children to the Home during minority, the change in the population is slow. Comparatively few children for whom applications are filed can be admitted. From time to time however the State has increased the facilities of the Home, and it is now possible to care for more children than when the Home was first established. Over a period of ten years, 1930 to 1940, an appreciable increase in population has been made. The total number of children living in the Home in 1930 was 227; in 1940, there were 422 children in the Home. This shows an increase of almost fifty per cent. Table 1 shows, in statistical form, the record of this growth. The effects of the depression are noticeable for

3 Annual Report for Waco State Home, 1940, p. 3.
the years 1934-1935. In 1934, there was a total of 380 children in the Home; in 1935, the number was 379. After these years there was a sharp drop in the population of the Home until, 1940, when the records show a population of 422 children. However, this late increase is due more to added facilities than to other causes.

### TABLE 1*

THE STUDENT POPULATION OF THE WACO STATE HOME
EACH YEAR FROM 1930 TO 1939, INCLUSIVE

<table>
<thead>
<tr>
<th>Year</th>
<th>Boys</th>
<th>Girls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1930</td>
<td>106</td>
<td>121</td>
<td>227</td>
</tr>
<tr>
<td>1931</td>
<td>121</td>
<td>155</td>
<td>276</td>
</tr>
<tr>
<td>1932</td>
<td>134</td>
<td>159</td>
<td>293</td>
</tr>
<tr>
<td>1933</td>
<td>164</td>
<td>167</td>
<td>331</td>
</tr>
<tr>
<td>1934</td>
<td>204</td>
<td>176</td>
<td>380</td>
</tr>
<tr>
<td>1935</td>
<td>211</td>
<td>168</td>
<td>379</td>
</tr>
<tr>
<td>1936</td>
<td>196</td>
<td>152</td>
<td>348</td>
</tr>
<tr>
<td>1937</td>
<td>187</td>
<td>162</td>
<td>349</td>
</tr>
<tr>
<td>1938</td>
<td>193</td>
<td>159</td>
<td>352</td>
</tr>
<tr>
<td>1939</td>
<td>212</td>
<td>210</td>
<td>422</td>
</tr>
</tbody>
</table>


The distribution of these children from over the state is general but not all counties are represented. A survey made of the Home's population, in 1938, revealed that there were 180 families represented at the institution.⁴ Seventy-six families were represented by one child each; fifty-three families by two children each; thirty-eight families by

**TABLE 2**

**DISTRIBUTION OF THE STUDENTS, AS TO COUNTIES, OF WACO STATE HOME IN 1940**

<table>
<thead>
<tr>
<th>County</th>
<th>No. of Children</th>
<th>County</th>
<th>No. of Children</th>
<th>County</th>
<th>No. of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anderson</td>
<td>4</td>
<td>Hale</td>
<td>3</td>
<td>Palo Pinto</td>
<td>2</td>
</tr>
<tr>
<td>Angelina</td>
<td>2</td>
<td>Hamilton</td>
<td>4</td>
<td>Panola</td>
<td>2</td>
</tr>
<tr>
<td>Bell</td>
<td>10</td>
<td>Hays</td>
<td>2</td>
<td>Parker</td>
<td>1</td>
</tr>
<tr>
<td>Bexar</td>
<td>2</td>
<td>Harrison</td>
<td>1</td>
<td>Farmer</td>
<td>3</td>
</tr>
<tr>
<td>Bowie</td>
<td>2</td>
<td>Haskell</td>
<td>7</td>
<td>Polk</td>
<td>2</td>
</tr>
<tr>
<td>Brazoria</td>
<td>2</td>
<td>Henderson</td>
<td>12</td>
<td>Potter</td>
<td>4</td>
</tr>
<tr>
<td>Brazos</td>
<td>3</td>
<td>Hill</td>
<td>10</td>
<td>Robinson</td>
<td>11</td>
</tr>
<tr>
<td>Brown</td>
<td>1</td>
<td>Houston</td>
<td>3</td>
<td>Rockwall</td>
<td>2</td>
</tr>
<tr>
<td>Cameron</td>
<td>6</td>
<td>Hunt</td>
<td>1</td>
<td>Runnels</td>
<td>3</td>
</tr>
<tr>
<td>Cherokee</td>
<td>6</td>
<td>Hutchinson</td>
<td>5</td>
<td>Rusk</td>
<td>2</td>
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<tr>
<td>Clay</td>
<td>3</td>
<td>Jack</td>
<td>5</td>
<td>San Antonio</td>
<td>2</td>
</tr>
<tr>
<td>Coleman</td>
<td>2</td>
<td>Jefferson</td>
<td>2</td>
<td>Schleicher</td>
<td>2</td>
</tr>
<tr>
<td>Collin</td>
<td>5</td>
<td>Johnson</td>
<td>6</td>
<td>Shackelford</td>
<td>1</td>
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<tr>
<td>Commanche</td>
<td>6</td>
<td>Kerr</td>
<td>1</td>
<td>Smith</td>
<td>4</td>
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<tr>
<td>Cooke</td>
<td>1</td>
<td>La Salle</td>
<td>1</td>
<td>Stephens</td>
<td>2</td>
</tr>
<tr>
<td>Coryell</td>
<td>1</td>
<td>Leon</td>
<td>2</td>
<td>Tarrant</td>
<td>2</td>
</tr>
<tr>
<td>Crosby</td>
<td>3</td>
<td>Lavea</td>
<td>3</td>
<td>Taylor</td>
<td>8</td>
</tr>
<tr>
<td>Dallas</td>
<td>10</td>
<td>Lubbock</td>
<td>1</td>
<td>Tom Green</td>
<td>5</td>
</tr>
<tr>
<td>Denton</td>
<td>4</td>
<td>Lynn</td>
<td>2</td>
<td>Travis</td>
<td>11</td>
</tr>
<tr>
<td>Donley</td>
<td>1</td>
<td>McLennan</td>
<td>40</td>
<td>Upshur</td>
<td>4</td>
</tr>
<tr>
<td>Eastland</td>
<td>2</td>
<td>Mason</td>
<td>2</td>
<td>Upton</td>
<td>3</td>
</tr>
<tr>
<td>Ellis</td>
<td>6</td>
<td>Milam</td>
<td>9</td>
<td>Van Zandt</td>
<td>3</td>
</tr>
<tr>
<td>El Paso</td>
<td>2</td>
<td>Mills</td>
<td>6</td>
<td>Walker</td>
<td>1</td>
</tr>
<tr>
<td>Erath</td>
<td>6</td>
<td>Montague</td>
<td>2</td>
<td>Washington</td>
<td>1</td>
</tr>
<tr>
<td>Falls</td>
<td>13</td>
<td>Morris</td>
<td>3</td>
<td>Wheeler</td>
<td>2</td>
</tr>
<tr>
<td>Fannin</td>
<td>1</td>
<td>Navarro</td>
<td>3</td>
<td>Wichita</td>
<td>3</td>
</tr>
<tr>
<td>Foard</td>
<td>4</td>
<td>Nolan</td>
<td>6</td>
<td>Wilbarger</td>
<td>6</td>
</tr>
<tr>
<td>Freestone</td>
<td>4</td>
<td></td>
<td></td>
<td>Williamson</td>
<td>5</td>
</tr>
<tr>
<td>Galveston</td>
<td>4</td>
<td></td>
<td></td>
<td>Williamson</td>
<td>5</td>
</tr>
<tr>
<td>Goliad</td>
<td>2</td>
<td></td>
<td></td>
<td>Wood</td>
<td>7</td>
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<tr>
<td>Gonzales</td>
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<td>Young</td>
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</tr>
<tr>
<td>Gray</td>
<td>3</td>
<td></td>
<td></td>
<td>Transferred</td>
<td>3</td>
</tr>
<tr>
<td>Grayson</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grimes</td>
<td>2</td>
<td></td>
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</tbody>
</table>

*Annual Report of Waco State Home, 1940, p. 32.*
three children each; eight families by four children each; and two families by six children each. These facts support the theory that most dependency occurs in families where there are large numbers of children.

There are 254 counties in Texas, but in the year that this survey was made, 1938, only seventy-four counties were represented at the Home. The annual report for 1940 shows that ninety-five counties were represented at that time. Table 2 shows the distribution of population by counties, in 1940. It reveals some interesting facts. As a rule, the counties having the largest cities within their borders present the most pressing relief and dependency cases among the adults. But such is not the case with the "neglected" and "dependent" children of Texas. For example, Bexar County with a population of 325,000, in 1930, had only two children at The Waco State Home, while Henderson County with a population of 32,500, had twelve children at the Home. Harris County within which is situated one of the state's largest cities, Houston, had only one child in the Home while Dallas County had ten, Travis County had eleven, Robertson County had eleven, and Falls County had thirteen. McLennan County, the parent county of The Waco State Home, had forty

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5 *The Texas Almanac*, 1939-40, p. 95.

children in the Home. Proximity to the need of children has evidently had some influence in the selection of this large number of children from McLennan County.

Children may be discharged from the Home if parents or relatives show proof that they are able to support them and to raise them in healthy moral surroundings. In the early days of the Home, however, little provision was made for the transfer of children, either into or out of the Home. At the present time, a different policy is being followed. In 1938,7 one boy was transferred to the Juvenile Training School, Gatesville, Texas, and eight children were transferred to the Austin State School, Austin, Texas. On the other hand, six boys were transferred to the Home from the Juvenile Training School. In a subsequent report, 1940,8 Superintendent Patterson of the Home states that the group of boys transferred in to the Home had conducted themselves in a satisfactory manner, and were desirable inmates in every way. The now flexible methods of transfer have proved to be of benefit to the institution as well as to the children who live there.

Some children, however, do not react satisfactorily when placed in a group; a quieter more secluded atmosphere is needed. In order to provide this, the Forty-Sixth Legislature9

9 Ibid.
authorized the placing of a limited number of children in boarding homes. Superintendent Patterson comments on this new phase of State care in the following way:

The Act passed the 46th Legislature authorized the placing of a limited number of children in boarding homes is a variation from the original policy, and while we have only been able to put this provision into effect in a limited way, the children so placed have shown marked improvement under the influence of normal home life. We believe that if the plan were extended and enlarged, it would enable the institution to perform a more satisfactory service in the care of many children who fail to adjust to group life. We hope to place a sufficient number of children the coming year to give the plan a more thorough test.10

Another question that confronts the Home in the release or discharge of the children concerns the older children. A regular grade school is maintained within the institution, and, upon completion of this, the children enter the High School at Waco, Texas. Many of them graduate before they reach the age at which the State releases control of them. Superintendent Patterson expresses the opinion that it is not always to the best interests of the children to keep them in the Home beyond this period.11 He suggests that a small appropriation to provide scholarships for certain pupils desiring to enter special training in the various vocations would be a help to the child and a saving to the State.

The causes of dependency are significant in any study of the physical education program of the Home, because the

10 Ibid.
11 Ibid.
physical conditions of the children in the Home influence the
results to a large extent. A recent survey of the case his-
tories of all the children in the Home was made in order to
determine causes of dependency. While, in many instances
there are overlapping causes of dependency, the following
percentages were arrived at as somewhere closely defining the
causes.

Although The Waco State Home is not an orphan's home
in the strict interpretation of the term, twenty-nine per
cent of the family histories show one or both parents de-
ceased. In 1900, among the leading causes of death, tuber-
culosi was first; in 1930, it was sixth in the cause of
death. It is the largest cause of child dependency due to
orphanage.

Breakdown in the family life caused thirty-three per
cent of the dependency of the children in the Home. Par-
ents had left their children without provision for their care,
had relinquished all their rights, and renounced all their
duties as a parent. It is shown that desertion and non-
support and abandonment are closely related, and are causes
of child dependency.

Thirteen per cent of the children in the institution
had a history of feeblemindedness. The two families that
were represented by six children each at the time the survey
was made had feebleminded parents.

12M. C. Carlisle, M. D., Interesting Facts Concerning
The Waco State Home. (Unpublished speech delivered to Waco
Rotary Club, June 19, 1939.)
Twelve per cent of the children at the institution had come from families that had been broken up because of divorce. Children from broken homes are frequently torn between conflicting loyalties, and are deprived of that sense of security and belonging which is so important to normal development. Frequently they are taken back and forth between their parents, and at no time do they feel secure. The child who fails to get continuity of training and affection often develops a feeling of being unwanted.

Eleven per cent of the families represented in the Home had one or both parents in the insane asylum. According to the latest data obtainable, in 1939, there were some 338,251 people in the hospitals for insane in the United States. It may be seen then that insanity is one of the important causes of child dependency.

Seven per cent of the children in the institution came from homes of extreme poverty. Because Texas has no funds to provide aid for dependent children, the children are deprived of nourishing food and proper living conditions. Those that come to the Home from such environments are often stunted and otherwise retarded--conditions not always possible to overcome.

13 Ibid.
14 Ibid.
Four per cent of the children in the Home were illegitimate. Since illegitimacy in our country is looked upon with repugnance, these illegitimate children have to suffer because of the stigma placed upon them.

Three per cent of the families represented at the Home had chronic alcoholism. This factor, alone, presupposes unhappy living conditions in the homes of dependent children.

It may be seen, then, that the group of children with which the Home has to work are not ordinary children in the common meaning of the term. In the majority of cases, the children have bad heredity and come from unsatisfactory environments. To take these destitute, unhappy children and make an effort to transform them into self-respecting, self-supporting, honest men and women is no small task. The obstacles to be overcome are many.

The Waco State Home is situated on a tract of ninety-four and one-half acres of land. The campus comprises approximately twenty-four and one-half acres, while the remaining seventy acres are used for pasture and farm crops. The Act of the Legislature, which authorized the establishment of the Home, made an initial appropriation of $100,000 for construction of the plant. The first buildings were completed in September, 1922, and by the end of the first fiscal year, forty-two children had been admitted.

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15 Ibid.
16 Ibid.
The plant at the present time, 1941, consists of fifteen brick buildings, ten frame structures, and four residences. From time to time, the State has appropriated additional money for growth and improvements, and the facilities of the Home are gradually being enlarged. In considering the size of the state of Texas and the population, it is found that there should be a greater expansion of the plant in order to care for the number of dependent children that inevitably occur in a population the size of Texas. At the present time the capacity of the Home is overtaxed. The capacity of the girl's dormitories is 190 children, that of the boy's dormitories is 176, and the capacity of the pre-School dormitory is forty children. The total capacity for the entire plant then is 406 children. The number of children in the Home last year, 1940, was 422, an excess of fourteen more than capacity.

As a State institution, the Waco State Home is under the control and the direction of the State Board of Control. This Board merely exercises supervisisonal control. The direct control of the Home has been in the hands of Superintendent R. R. Patterson since its organization. Superintendent Patterson is aided by a staff of specialists and workers along with a number of teachers employed in the public school which is maintained in the Home.

The school is under the direct supervision of a principal. The school census for 1939-40 was 329. The enrollment during the school year was 340. According to classes it was divided as is shown in Table 3.
TABLE 3*

THE ENROLLMENT IN EACH GRADE, IN THE WACO STATE HOME SCHOOL AND THE NUMBER OF TEACHERS IN EACH GRADE

<table>
<thead>
<tr>
<th>Grade</th>
<th>Boys</th>
<th>Girls</th>
<th>No. of Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>First</td>
<td>20</td>
<td>19</td>
<td>1</td>
</tr>
<tr>
<td>Second</td>
<td>13</td>
<td>15</td>
<td>1</td>
</tr>
<tr>
<td>Third</td>
<td>16</td>
<td>22</td>
<td>1</td>
</tr>
<tr>
<td>Fourth</td>
<td>21</td>
<td>21</td>
<td>1</td>
</tr>
<tr>
<td>Fifth</td>
<td>19</td>
<td>22</td>
<td>1</td>
</tr>
<tr>
<td>Sixth</td>
<td>30</td>
<td>29</td>
<td>2</td>
</tr>
</tbody>
</table>


The teaching load of the teachers, as shown in Table 3, is heavy. In the first five grades, there are thirty-seven pupils on the average to each teacher. School authorities agree that better results are achieved when the teaching load per teacher is much less than this. Some indication of the children's ages may be gained from the table. As a usual thing there are more children in the first grade in the public schools than in any other grade. In this instance, there are more children in the sixth grade, and the fourth grade has the next largest number.

The seventh, eight, and ninth grades are departmentalized with seven teachers having charge of same. There were forty-three pupils in the seventh grade, twenty-six in the eighth
grade, and twenty-four in the ninth grade. The total number of teachers in the school was thirteen, and the total number of students was 340.\textsuperscript{18}

Activities in this school are conducted in much the same way as in the other public schools of the State. One of the aims of the institution is to provide, as nearly as possible, a normal home life for the children. To this end, the children are assigned household tasks; the girls help with the housework, and the boys help care for the stock and assist in the farming operations. In making his annual reports, Superintendent Patterson has stressed the need for more land. This, he said, would serve two purposes: add to the income of the Home, and provide an outlet for the boy's idle time. These are his recommendations:

There are many benefits to be derived from a reasonable investment in farm land. The cost of maintaining the dairy herd should be materially reduced by the growing of hay and other forage crops and by the pasturing of growing calves and dry cows on either native grass or lands planted to grazing crops.

The production of pork could be greatly increased and with the construction of facilities for curing meats, the needs of the Institution for such products could largely be taken care of from the farm.

Equal importance with the financial consideration is that of providing a place to teach older boys to work. There are many duties around an institution that boys can do. Most of them are the type that only requires a few minutes to do a particular job. They do not provide the training and discipline that goes with a steady job lasting over a period of hours.\textsuperscript{19}

\textsuperscript{18} Annual Report of Waco State Home, 1940, p. 5.

\textsuperscript{19} Ibid.
Since they deal with more particular phases of the problems in this study, other phases of the Home's activities will be studied in detail in the following chapters.
CHAPTER IV

HEALTH FACILITIES OF THE WACO STATE SCHOOL AND

HEALTH RECORDS FOR 1933-1940

The survey of causes leading up to dependency of children in Texas revealed that the great majority came from poverty-stricken, broken homes. It is believed that if children are to be molded into average, self-respecting, self-supporting citizens, the first requisite is a sound mind in a sound body. In its restricting clauses, the State sets up a requirement that children selected for the Home must be mentally sound. It is then, the first duty of the Home to rebuild little bodies that, because of poverty, may have been wasted through hunger, neglect, or disease. Too, social diseases are often prevalent among the poverty-stricken and the dependent. Then, the first work of the Waco State Home was to make a complete physical examination of each child that was admitted to the Home.

This physical examination of the child antedates his admission to the Home. The management makes an effort to secure a complete history of each child. Each child is thoroughly checked for common childhood diseases. Thorough examinations are required of physical condition as to infections and
contagious diseases and a possibility of recent exposures to such diseases. Laboratory investigations are requested when there is an indicated need for them. With this completed, the family history is examined and the cause for dependency determined. A study is then made of any physical or mental defects in any member of family who has lived with the child. This study includes insanity, illegitimacy, feeble-mindedness, epilepsy, alcoholism, tuberculosis, syphilis, and gonorrhea.  

When the child is admitted to the Home, it is detained in the Hospital during the isolation period for a thorough routine examination. Where laboratory tests indicate infectious diseases, the isolation period is extended over whatever time is necessary to eliminate the hazard. Since a long period of isolation tends to emphasize the change that has been made in the life of the child, the period is limited to three days. When children enter an institution for the first time they enter a wholly unknown world and are filled with doubts and misgivings. Adjustments are made quicker when they are sent to a dormitory with children of their own age where a hearty welcome and homelike atmosphere await them.

The hospital of The Waco State Home is a one-story brick building with a capacity for twenty-eight patients. The boy's ward has ten beds, the girl's ward has the same, and

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1 Annual Report of Waco State Home, 1940, p. 5.
there are four private rooms with eight beds. In addition, there is a record room, an X-Ray room, a drug room, a dispensary, a treatment room, a dentist's office, and living quarters for two nurses. The hospital has a staff of one physician (part-time), one dentist (part-time), and a registered day nurse.

When the child is first admitted, the hospital has the following routine worked out for him:\(^2\)

1. History (from admittance papers and child's story)
2. Physical examination
3. Complete medical record
4. Wasserman Test
5. Schick Test
6. Tuberculin Test
7. Dick Test
8. Brucellergin Skin Test
9. Vaccination
10. Vaginal Smear
11. Anti-typhoid vaccination

After the child has finished with this routine examination and has been assigned to dormitory home, the teachers and matrons cooperate with the medical staff by calling attention to defects in seeing or hearing, loss of weight, or other conditions that indicate lack of normal health and development.

Heights and weights are recorded at regular intervals. For each child is kept a medical record which includes history of previous illnesses, accidents and operations, all

\(^2\text{Ibid.}, \text{ p.7.}\)
physical examinations, and special diets. A routine examination by the dentist is conducted, and necessary corrections are made. Defects in seeing, which can be corrected by glasses, are promptly given attention.

The living conditions of the children are as sanitary and as conducive to good health as financial support will allow. Buildings used for children's institutions are generally of the cottage or congregate type. In the Waco State Home the congregate type prevail. This makes it impossible to give each child the amount of individual care it should have.

In the Superintendent's annual report, 1940, a description of each dormitory is given. Its capacity and equipment are listed. They are as follows: Dormitory A is for girls ranging in age from eight to ten years, who are in the first and second grades. Its capacity, for good results, is twenty-eight children and its maximum capacity is thirty-two children. There is one large bedroom, a matron's room, two living rooms, and a play room. Each child is required to take a bath daily. Two bathtubs, two showers, four lavatories and two commodes comprise the equipment in each bath room.

Dormitory B is also for girls. The age range here is from fourteen to sixteen years. The capacity, for good results, is twenty-eight children and the maximum capacity is
thirty-two. There is one large bedroom. Bath facilities comprise two tubs, two showers, four lavatories and two commodes. There are a matron's room, two living rooms and a play room.

Building Number 2 contains A and B dormitories for girls. Dormitory A (second floor) is for girls ranging in age from nine to twelve years. Its capacity, for good results is twenty-eight children, and its maximum capacity is thirty-two. One large bedroom serves for all. In the bath room there are two commodes, two tubs, two showers, and four lavatories. Dormitory B has the same facilities as Dormitory A and the only difference is in the age range, which is eleven to fourteen years.

Building Number 3 contains two dormitories. These are for boys. Dormitories A and B have the same bath facilities: two tubs, two showers, two lavatories, and two commodes. The capacity, for good results, of both dormitories is thirty-two children, and the maximum capacity is thirty-five. Dormitory A is for the age range of eight to twelve years, and a matron has a room in the dormitory. Dormitory B is for the age range of twelve to sixteen years, and a custodian's room is included in it. Each dormitory has hot and cold water. Baths are required daily. A living room and play room are available.

Building Numbers 4 contains two boy's dormitories. The bath room in Dormitory A is equipped with two tubs, two showers,
lavatories, and three commodes. Dormitory B has the same, except it has four commodes instead of three. Dormitory A is for the age range of twelve to sixteen years; Dormitory B is for fifteen to nineteen years. Dormitory A's capacity, for good results, is forty-four children, and its maximum capacity is fifty-six. Dormitory B has a custodian's room, a living room, and a play room; Dormitory A has the same except the living room is used also for a play room.

Building Number 5 is a new two-story brick building and is used for a girl's dormitory. It is a complete unit and includes a dining room and kitchen. The age range is from sixteen to twenty years and for school grades eight to eleven. The capacity, for good results, is sixty-two children, and the maximum capacity is sixty-two. Where the other dormitories have only cross ventilation, each room in this building has several windows. Baths and lavatory adjoin or connect each room. There are eleven tubs, four showers, eleven commodes, and eleven lavatories. There is a room for a matron, a large living room, and a dining room.

The new building is a great improvement over the other buildings. The capacity, for good results, of all five dormitories would be 316 children. The capacity for good results of the first four dormitories is 254. For these 254 children, the Home has only sixteen tubs, sixteen showers,
twenty-four lavatories, and twenty-five commodes. It is considered that these facilities are not enough for this number of children.

Besides the dormitories for boys and girls, there is a baby cottage at the Home. Its capacity is eighteen boys and eighteen girls, and it is designed for pre-school children. Due to overcrowding in the other dormitories, it has been impossible to confine this population to the pre-school age.

The building is a one-story brick, with plastered walls, concrete floor, and it contains: living room sleeping room for boys; sleeping room for girls; dining room; kitchen; bath room for boys; bath room for girls; and a private room for the matrons. Equipment here is satisfactory except for double beds and lack of bath room space and lavatory equipment. However, the Superintendent states that no bad results have been noted from the lack of space or equipment.

Food is prepared and served under the supervision of a graduate dietitian. Menus are typed, and a copy for each day is kept on file in the Superintendent's office and another copy is mailed to the Chief of the Eleesmosynary Division.

The dietary budget is ample to provide a well-balanced diet for growing children. Whole milk which is served from the institution dairy approximately amounts to a daily average of one quart per child. Other items stressed on children's menus include eggs, green vegetables, and fresh fruits.
The progress made in improving the health of the children in the Waco State Home may be measured by an examination of the Health Reports made by the Home's physician over the period of years since definite records have been made. These reports will be copied here in order that the improvement in health conditions and in equipment may be noted.

No specific records of the children's health were kept previous to 1934, but the 1933 Annual Report gives some interesting information on health conditions. It follows:

The staff for health service includes a part-time visiting physician, registered nurse, and a part-time dentist.

Children are given physical examination preliminary to their admission. They are vaccinated against small-pox and given diphtheria toxoid. Owing to limited funds, it has not been possible to give complete laboratory examinations. However, many laboratory examinations are made when in the opinion of the physician such tests are needed. Provision should be made for all the children to have at least a Wasserman and a Tuberculin test. Routine dental examinations are made twice each year and teeth are cleaned regularly by the dentist.

Children are sent to a Clinic for treatment by a specialist for eye, ear, and nose troubles, when the need of such treatment is indicated. There should be a regularly employed part-time specialist to give all the children examinations at regular intervals.

All cases needing the attention of a surgeon are sent to a downtown Clinic.

A trained nurse is employed for full time. There is maintained for her use a treatment room and dispensary for the dressing of minor surgical cases and injuries. Medical records are kept of major operations and serious cases of illness, but there is need of much improvement in the
system of keeping records. We hope to soon be able to keep a record of heights and weights of all children in the institution and complete histories of all hospital cases.\(^3\)

In 1935, Dr. Witt was replaced by M. C. Carlisle as physician for the The Waco State Home. M. C. Carlisle gave every child in the institution a thorough physical examination with diagnosis and advice as to treatment. He gave The State Board of Control a detailed account of these examinations. He described the preventive health measures and outlined the various physical handicaps of the children. His report is given in full as follows:

Since this is the first report I have made it will necessarily be a long one. My service with the Institution dates from March 1, 1935.

Records. When I began my service at The Waco State Home on March 1, 1935, there were no history records at all. The only information available to me was the admittance sheet which is very brief and has very little information on the health of the child. Every child (375) has been examined since then and complete record made of both the history and the physical examination with diagnosis and advice as treatment.

All subsequent entries in the hospital are recorded and a complete record kept of the ailment, treatment, temperature, pulse, etc. In other words, every happening relative to the child's physical condition is kept on record as it would be in any Class A Hospital.

Prevention. Smallpox: After a check-up of each child in the institution fifty-two were found who did not have satisfactory vaccination scars so these 52 were vaccinated for smallpox.

Diphtheria: The late Dr. Witt gave all the children diphtheria toxoid two years ago. It is not 100% effective so it is necessary to Schick test them after giving the prophylaxis. This was

\(^3\)Annual Report of Waco State Home, 1933, p. 12
not done until a few weeks ago when each child was Schick tested. An additional dose of toxoid was given these thirty-one unprotected children.

Scarlet Fever: Every child in the institution is being Dick tested for the susceptibility to scarlet fever. This will be finished in the next few days.

Typhoid: Serum is not given routinely because we do not have typhoid in Waco, ordinarily. Those children who have vacations in typhoid areas are given the serum before going on these trips.

Tuberculosis: In an institution with so many underweight children it is obligatory that each child have the skin test for tuberculosis. 284 children have this skin test and some sixteen reacted positively. This does not mean that they have the disease now either in an active or an arrested form or have tubercular healed scars in their lungs or other organs. These sixteen cases are being studied now with reference to their temperature reaction, heart rate, X-rays of chest to determine if they are active or not. No doubt some few have active tuberculosis. As soon as this diagnosis of activity is established their application to the State Sanatorium will be filled out. There are still ninety-one cases to have the skin test for tuberculosis. Some fifty were on their vacations. The entire baby cottage, consisting of some forty children, have whooping cough now and their skin test was deferred for the present time.

Other diseases: Measles and chicken pox are hardly preventable as a public health measure. The former can be prevented in individual cases as in tuberculosis. Whooping cough is preventable and should be prevented in infancy.

Classified below I am giving you a list of the physical defects as I found them during my recent examination of each child. They are exceptionally high because of the type of child we get at this particular institution. Where treatment will improve these conditions it is being carried out.

Underweight children. There are forty-six underweight children in the institution. This means they are 10% or more under the average for their age and height. At the present time I am checking their physical condition again and those who are still underweight will be put in a Nutrition Class with special diets, added rest, and other necessary attention.
Poor posture. There are fifteen children who have very bad posture. Many of these are underweight. These are put in a class and at present are being given corrective exercises by our physical director, Miss Pflugger.

Tonsils and adenoids. There are seventy-one children in the institution who had diseased tonsils and adenoids. After rechecking this group we found it imperative that fourteen of this number have their tonsils removed. Seven of these were removed last month and there are seven in the Baby Cottage who will have to have their tonsils out as soon as the Whooping Cough subsides.

Caries teeth. There were thirty-five children in the institution who had diseased or decayed teeth. This does not include stained teeth, broken, or irregular teeth.

Overweight children. This means they were 10% over the average for their weight and height. In most of these it is a physiological gain which comes with puberty, in some it is familiar, while in a few it is a "gland" disturbance. At present we have under treatment one thyroid deficiency case, one pituitary case, and two or three mixed "gland" cases.

Abnormal eye conditions. There were some twelve cases of turning in or out of the eyes. Eight of these cases were fitted with corrective glasses. There is one case of congenital coloboma, one case of corneal opacity, and one case of syphilitic keratitis. The latter is being treated but the others can not be helped. There is also one unusual case of traumatic cataract which evidently followed corneal perforation. This eye may have to be removed because of the possible deleterious effect on the good eyes.

Acne. There are eighteen cases of acne. All are being treated at the present time.

Bedwetting. There are eight cases of bedwetting. All of these cases are being treated now and are on restrictive diets.

Malaria. There have been only two cases of malaria at the institution. Both are free from the infection now.

Heart cases. There are thirteen cases of heart abnormalities. None require treatment but some do have their activity limited and definite rest periods. None of these are bad and include for the most part functional hearts, unclassified murmurs, and possibly one rheumatic heart.
Chronic draining ears. There are nine cases who have one or both ears draining pus the entire time. Ears that drain this way always mean there is some infection in the mastoid cells. All of these are being treated now and some of them are improving. It may be necessary to operate on some of them.

Anemia. There are nine cases of anemia. Most of these are the result of some other infection and are secondary in character. They are found chiefly in the children with the chronic draining ears and in diseased tonsils, adenoids.

Hydrocele. There are two cases of hydrocele. Many recover without operation.

Varicocele. There are three cases of varicocele. They wear suspensors and will not require other treatment.

Hernias. There are five cases of umbilical hernias. All will get well without surgical interference. One case of inguinal hernia which is improving and will get by, I believe, without operation.

Undescended testicles. There are eight such cases. All are being treated medically. They may require an operation before the testicles descend.

Prolapse of rectum. There is one case of this kind.

Allergic manifestations. There are four cases consisting of eczema, urticaria, dermatographism, and other similar skin conditions.

Tuberculosis. There are four known cases consisting of tuberculosis, all in the arrested stage. No doubt there will be a few more found among the children who reacted positively to a recent skin test for tuberculosis.

Ingrowing toe nails. There are four cases of this. Two children were operated on last week.

New growths. There are eight cases of this kind who have extra large moles and warts and one who had a large cauliflower-like tumor next to the ear. All of these cases have been operated on.

Furunculosis. Four cases of recurrent boils. All are under treatment.

Phimosis. There are thirty-eight cases of phimosis. Many of them require only a simple retraction. A few will have to be circumcised.

Orthopedic conditions. This includes the following: one deformity left elbow due to old break; deformity right shoulder due to old break;
recent fracture right wrist; fractured skull and broken right leg, well; Erb's paralysis left arm and weak left leg; old deformity left elbow; and a spinal cord condition called Frederick's Syndrome (a drying out of the motor tracts of the spinal cord resulting in crippling).

Miscellaneous cases. This includes such cases as apparent mental retardation; minor skin conditions; cuts and abrasions; occasional case of scabies; broken teeth; Vincent's mouth infection; pyorrhea; moles and warts; webbed toes; menstrual disorders; and a few cases of masturbation.

There is some equipment at the Hospital that we need very badly and if we had it we could improve our service to the children of the institution. Needed equipment is some laboratory supplies as a microscope and other essentials for doing routine laboratory work. We have no surgical equipment at all. We need an autoclave to sterilize our dressings. We are badly in need of new scales. We also need chart desks. In looking back over the records and noting what has been paid out for x-rays I am firmly convinced that a small x-ray machine would save the institution money and at the same time be very beneficial in diagnosing and treating these children.  

M. C. Carlisle, M. D.

This lengthy report shows that the Waco State Home lacked many materials required to care for the health needs of the children in residence there.

On October 16, 1936 the 1935-36 annual report was submitted. M.C.Carlisle again presented a detailed picture of the health conditions at the Home. The report follows:

Judge R. R. Patterson, Superintendent,
State Home for Dependent and Neglected Children,
Waco, Texas.

Dear Judge Patterson:

I hand you herewith the Physician's report for the State Home for Dependent and Neglected Children, for the fiscal year, ending August 31, 1936, as follows:

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Records: At the present time, we have 348 complete Records upon the children of the State Home. We also have fifty-one records on children who have left the home within approximately the last year and a half. In addition to the complete medical record, there is a brief Admittance Record, which is made immediately upon their entry into the Home.

Prevention. Smallpox: On a check-up of all the children, it was found that eighteen did not have satisfactory scars. These were vaccinated, and all but two had typical "takes."

Diptheria: There are four children in the Institution now, to have diptheria toxoid. All the rest have negative Schick reactions.

Scarlet fever: There are forty-nine children in the Institution who have a positive Dick reaction. Three of these had Scarlet Fever this past year. There are forty-seven children in the Institution who have not had the Dick tests, but who will be tested within the next few weeks. No attempt is made as yet to immunize against Scarlet fever. The immunization, so far, is rather severe, and is not altogether practical as a public health measure.

Typhoid: During the past year, three children have had sanatorium treatment, and applications are on file now for four others to have sanatorium treatment. In the past, we have had seven cases of tuberculosis, who have had sanatorium treatment. This makes a total of fourteen cases of tuberculosis. There are, in addition, thirteen cases of tubercular infection, but these do not have any activity at this time. Every child in the Institution has been tested for tuberculosis, and this is done, at the present time, when they enter.

Other diseases: No cases of measles or chicken-pox have developed during the past year; neither have we had a case of whooping cough. Each child that enters the Institution has a routine Wasserman, Tuberculin skin test, Schick and Dick tests, Vaginal or Urethral smears, and Vaccination. They are kept at the hospital for three days before they are allowed to mix with the other children. We feel that this prevents many diseases that might otherwise occur.

Tetanus: During the year, five children had injuries, mostly from nails, and these were given tetanus anti-toxin.

Surgery. There were three cases of acute appendicitis during the year, and one of these had an appendiceal abscess which was first drained, then later
removed. After removal, he developed an abscess in
the abdominal wall, and had to go back to the hos-
pital for the third time, for drainage.

There were seven circumcisions during the
year. Seven children had their tonsils and adenoids
removed; one child had an epulis removed from the
gum; two children had infected hands incised and
drained; some two or three children had infected
toe-nails, and ingrowing toe-nails removed; and
120 children had warts and moles removed from parts
of the body where they were likely to have become
irritated and cause trouble.

Orthopedic surgery. Two children with ortho-
pedic deformities were operated on by a local Ortho-
pedic Surgeon, in cooperation with the organization,
The Division of Vocational Rehabilitation of the
State Department of Education. One child had a
cast applied, with a subsequent brace, through the
same agency. We obtained an artificial leg for
one of the boys through this Division.

Fractures: One boy had a complete fracture of
the distal end of the humerus. Another boy had a
green stick fracture of the radius and ulna. One
of the girls had a complete fracture of the left
side of the mandible, beneath the third molar tooth.

Orthopedic conditions: There is one case of
Frederick's Syndrome. There is one case of an old
super-condular fracture, with exostosis. One boy
in the Institution has a partial atrophy of the left
arm and left leg. One boy has a pretibial bursitis.
Some of these old deformities will be corrected
through the aid of the Division of Vocational Re-
habilitation.

Epidemics. During March, of the past year,
we had 210 cases of influenza. Fortunately, most
of them were mild. Only some six or eight were
severely ill. Although not reaching epidemic
proportions, we did have three cases of Scarlet
Fever, and because of the strictest isolation, further
spread was prevented. Some twenty-five cases of Epi-
demic Sore Throat occurred within a period of six
weeks.

Eye Refractions. During the year, thirteen
cases had their eyes refracted. All of these
cases are being treated. There is one case of
Congenital Coloboma; one case of Corneal Opacity;
one of Pterygium, and two cases of Syphilitic Kerato-
titis. There is also one unusual case of Traumatic
Cataract, evidently following Corneal Perforation.
It is possible that this eye will have to be en-
ucleated.
Chronic draining ears. There were six cases of Chronic Draining Ears. Nine were reported last year. Three have definitely improved to the point where it appears they will not have any more ear trouble.

Tonsils and adenoids, chronic. There are twenty-six cases in the Institution. This includes those cases which have large glands in the neck, and who have recurrent attacks of tonsilitis.

Hyperthrophied tonsils and adenoids. There are forty-two such cases. This includes cases which have enlargement of the tonsils, and adenoids, and, in some cases, definite mechanical obstruction. They are not necessarily diseased, but crowd the upper air-passages.

Undulant fever. It was found that something over 60% of the herd of cows had Bang's Disease, at the Institution. Since the children drank raw milk, it was considered advisable to test their blood for Undulant Fever. Two cases were found, out of some two hundred children. All of the children have not been tested as yet, but we are planning to skin-test the rest for Undulant Fever.

Acne. We have twelve cases of Acne. These cases have been treated during the year with Acne Vaccine, and a special diet.

Malaria. There have been two cases of malaria in the Institution. Both boys were from East Texas.

Poison Ivy. Eight cases of poison ivy have developed. They were treated.

Enuresis. There are fifteen cases of Enuresis. All of these cases are being treated at the present time, and special diets are being carried out.

Congenital Syphilis. There are two such cases in the Institution. Both are receiving anti-syphilitic treatment.

Anemia. There are six cases of Anemia, all being of the secondary variety. Each is being treated.

Sinus infection. There are sixteen cases classed as Sinus Infection, although they have not been confirmed by X-Ray. The diagnosis was made on the history and examination. They have recurrent colds, chronic nasal discharges, post-nasal dripping, enlarged glands in the neck and a low grade fever at intervals.

Poor posture. There are twelve cases of poor posture. Most of them are underweight, or have some chronic infection. They are given postural exercises, as outlined by the Physical Education Instructor.
Phimosis. There are twenty-four such cases. Some of these are very mild, and will not need to be circumcised. Some have a few adhesions which will have to be broken loose; while there are nine that will have to be operated on.

Venereal infection. At the present time, there is only one case of infection. This is in a boy, sixteen years old.

Hernias. There are five cases of Umbilical Hernia. All of these are small, and will not require any treatment. There are three cases of Inguinal Hernia. It will be necessary to operate on some of these at a later date.

Undescended testicles. There are three cases of Undescended Testicles. All have been treated with anti-urtian S, with only slight improvement. Surgical interference may be necessary in order to cure these cases.

Hypospadias. There is only one such case in the Institution, and it will not require treatment.

Hydrocele. There are two cases of Hydrocele. Both are doing satisfactorily.

Varicocele. There is only one case, and it is taken care of by wearing a suspensory.

Prolapse rectum. There is only one case. It has been treated medically, for over a year, with poor results, and it will unquestionable have to be operated upon.

Hemorrhoids. There is only one case of Hemorrhoids, and it is a mild one.

Burns. There were two burn cases. One, a rather severe burn of the leg, and the other, a moderate burn of the back of each hand, including the fingers.

Snakebites. Only one case, with complete recovery.

Hyper-thyroidism. There is only one such case, which has responded very well to treatment.

Hyper-thyroidism and hypo-pituitarism. One case. This boy has been treated and has been slow to recover.

Traumatic chest. Two boys had chest injuries, but no ribs were broken in either case; only pleurisy resulted.

Mental retardation. Only eleven cases are listed as mental retardation; however, none of these have had an intelligence test. Each is definitely retarded.

Heart disorders. There are nine such cases. Most of these are functional heart conditions, and do not require treatment. A few have had to have their work and exercise restricted.
Underweights. There are fifty-eight underweight children in the Institution. This means that they are 10% or more under the average for their height and age. Most of these have some chronic infection, or some physical defect, which is responsible for their underweight condition. A few are underweight because of family characteristics.

Overweights. There are thirty-five children overweight. They are also 10% or more over the average for their height and age. A big percentage can be accounted for by the physiological gain which comes at puberty; while a few can be accounted for due to some glandular disturbance.

Laboratory investigations. The two graduate nurses, Mrs. P. E. Noonan, and Miss M. Keppler, studied laboratory technique during the year, and materially assisted in the laboratory work at the Institution. Fifty-two complete blood counts were taken, eighty-five Urinalysis were made, 354 Wassermans were done, and only two were found to be so consistently positive as to warrant the diagnosis of syphilis. Forty vaginal smears were done and some 200 Agglutination tests were done for Undulant Fever. Fifteen blood smears were made for Malaria.

Caries teeth. No attempt will be made to give the number of diseased teeth, gum conditions, or cases of poor dental hygiene. This will be left to the Dentist.

Miscellaneous conditions. This includes such conditions as colds, ear infections, tonsillitis, adenitis, gastro-intestinal upsets, granular eyelids, warts, moles, pediculosis pubis, and capitas, and scabies. Such conditions were very prevalent, and properly recorded on the records, but no attempt will be made to report them in detail.

Conclusion. The $150.00 appropriated last year for the hospital was carefully used in equipping the laboratory. This was very badly needed, and routine work can now be done in our own laboratory in the State Home. We are badly in need of a small X-ray Unit, and an Autoclave; also, an electrical sterilizer.

Respectfully submitted

M. C. Carlisle, M. D.
State Home for D & N Children.

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This report indicates that progress has been made in many respects. The addition of extra laboratory equipment has facilitated the extension the health work possible to be done in the Home.

M. C. Carlisle again went into detail, in his 1936-37 report, on the health conditions in the Waco State Home. This report is given in full as follows:

Records. At the end of the fiscal year, we had 363 records on children at the Institution. During the year, twenty-four left the Home and their records were filed away for future reference; this makes about seventy-five records of children that are not in the Home now, but have been in the past. These have accumulated during the past 3\(\frac{1}{2}\) years that I have been associated with the Institution; prior to that time there were no medical records. During the year, our records show that thirty-seven were admitted giving a net increase of thirteen. Each child in the Institution has a complete medical record, and also there is a brief admittance record on each entry.

Prevention. Smallpox: Every child in the Institution has been vaccinated against smallpox and each one has a satisfactory scar with the exception of four small children who have been vaccinated yearly but have never had a reaction or "take." There have been no cases of smallpox this year.

Diptheria: Every child in the Home has been Schick tested and has a negative test. In the new cases admitted this year eight had positive Schick tests and when they entered they were all given Alum Precipitated Diptheria Toxoid as furnished by the State Health Department, and they subsequently had a negative Schick test. No cases of diphtheria this year.

Scarlet Fever: Every child in the Institution has been Dick tested to determine if they are susceptible to scarlet fever. There were fifty-three positive Dick tests, out of approximately 375 tested, or about 14%. None of these cases have been immunized against scarlet fever.
At the present time, immunization against scarlet fever is rather severe, and is not altogether practical as a public health measure. However, the fact that we knew which children were susceptible to scarlet fever has, in the past, been very valuable for quarantine purposes during an infection of this kind. No cases of scarlet fever this year.

Typhoid: Eight boys were given typhoid vaccine prior to going to National Guard Camp. No attempt is made to immunize the whole Institution against typhoid fever because of the safe water supply, and the pasteurization of milk. To my knowledge there has never been a case of typhoid fever in the Institution.

Tuberculosis: Every child in the Institution has been skin-tested for tuberculosis. There are fourteen cases of childhood tuberculosis at present; three are new ones, and their applications are now pending at the State Sanatorium for their admittance, and ten of these cases of childhood tuberculosis have had previous treatment in the State Sanatorium. All cases, including the three new ones, are doing satisfactorily, except one boy seventeen years old, who is very hard to manage, coughs a great deal and on the whole, is a menace to the children, so far as his infection is concerned; although we have not been able to demonstrate tubercular organisms in his sputum, I feel that he is definitely infectious. For this reason, we have him more or less isolated in a room in the hospital.

Tetanus: We now keep on hand tetanus antitoxin, and during the past year have given it to nine children as a prophylactic measure against this disease; seven of these children stuck nails in their feet, and two other children had deep puncture wounds. I am now investigating the practicability of the immunization, which includes tetanus, as well as diphtheria in a combined form; if I find that this is advisable, it will probably be used on children Schick positive, and on new cases entering the Institution from now on.

Syphilis: Every child in the Institution, with the exception of two, have had Wasserman reactions on their blood, and many of them have also had the Kahn and Kolmer tests. We have had one case of acquired syphilis, which comes to the Institution during his vacation from the State
At the School for Blind at Austin, he had had intensive antosyphistic treatment, but has never developed a negative Wasserman. We have three cases of congenital syphilis in the Institution; one has been with us for some time, and two cases were admitted this year; but they have a negative Wasserman.

Cold Vaccine: There are four or five children in the Institution who have recurrent colds. The cold vaccine has been given repeatedly with some improvement.

Acute Infections. Influenza: There were thirteen cases this past year. This compares favorably with 210 cases we had last year. Each of the influenza infections this year were mild.

Colds: Twenty-nine children were treated in the hospital this year for colds. None of them were seriously ill.

Pneumonia: There were four cases of pneumonia in the Institution this year; two of which were broncho-pneumonia, and two were lobar pneumonia—all recovered.

Abscesses: Five children had abscesses; one over the right eye; one on the knee; one involving the middle turbinate of the nose; one in the left ear, and one in the scalp.

Infection: One child had a severe infection of the hand, but after incision and drainage, recovered entirely.

Chronic Infections. Brucellosis: Twenty-four chronic cases. About 1½ years ago, we had a herd of forty-five cows, and all of them were tested for Bang's disease, in cooperation with the Federal Department of Agriculture. All but eight were positive reactors. At this time the children were drinking raw cow's milk; however, immediately after these facts were discovered a pasteurization plant was installed. It occurred to me that since the children had been drinking raw milk from a herd of infected cows, that there should be some cases of Brucellosis in the Institution, as a result of drinking this infected raw milk. Every child in the Institution had a skin test for Brucellosis. Twenty-four cases showed a definitely positive reaction. This number included one of the employees. Four children in the Institution showed a positive agglutination reaction for Brucellosis. By use of the opsono-cytophagic test, it was found that twenty-three of our children and one employee had chronic Brucellosis; this same test showed that about forty per cent of these children are beginning
to show immunity. These twenty-four children are not sick, but are in the symptomatic stage of Brucellosis; probably six of them will have to have active treatment. Since the disease is a self-limited infection, it is likely that the other cases will recover of their own accord and will not require treatment. The fact that they are not now getting raw milk infected with the Brucella organisms gives them an opportunity to recover. These cases have been developing over a period of ten years, and none of them has become infected since the pasteurization plant was installed. All new cases entering the Institution have a routine skin test for Brucellosis done on admittance to the Home.

Congenital Lues: Three cases.
Acquired Lues: One case.

The status of these cases was given under Prevention, sub-headed Syphilis.

Genito-Urinary Conditions: Nephritis: We had three cases of acute hemorrhagic nephritis, and two of them had a marked increase in blood pressure. All three recovered without any evidence of permanent kidney damage.

Primosis: There are forty such cases in the Institution. The worst cases were circumcision a year ago and the others have been retraced, and are not causing any difficulty.

Simple Vaginitis: There are three such cases in the Institution, all being new girls; one had a history suspicious of GC, but we were never able to demonstrate the GC organisms in the vaginal smear. All three cases were kept in the hospital immediately upon admittance to the Institution until they were cleared up, before allowing them to go to the dormitories.

Specific Urethritis: One boy in the Institution had this infection, but he was definitely cured and subsequently he left the Institution.

Cryptorchidism: There are five cases of undescended testicles in the Institution. Antuitrin-S has been used on them without any benefit. No doubt some of them will have to have surgery before they can be relieved.

Hypospadias: There is one such case in the Institution, and he will not require treatment.

Hydrocele: There are two such cases, neither having had any particular trouble. This condition frequently disappears in children without any treatment.
Enuresis: There are thirteen cases of bed-wetting in the Institution. These have been treated repeatedly with atropine, ephedrine, limited fluid intake and dietary management without much improvement.

Eye Conditions. Refractions: During the year, six children had to have their eyes refracted. Most of them were fitted with glasses.

Strabismus: There are twelve cases in the Institution, most of them are wearing glasses for correction of this disability.

Congenital Coloboma: Only one such case, and there is not any treatment for this abnormality.

Corneal Opacity: One case.

Cataract: One case in the Institution.

Corneal Ulcer: One case which recovered without any lancing.

Pterygium: One case.

Ear, Nose, and Throat Conditions. Tonsillitis: There were seventy-two cases of acute tonsillitis in the Institution during this year. There were more entries to the hospital for this one condition than any other infection. This compares closely to seventy-eight cases of diseased tonsils and adenoids that we have in the Institution. If these tonsils and adenoids could be removed, it would solve a lot of our yearly sickness problem.

Acute Ear Infections: There were fifteen cases, but none of them developed into mastoid infection or other complications.

Chronic Ear Infections: There are nine cases in the Institution. These ears have been discharging many of them for five or ten years, and longer; they have been treated, but unsatisfactorily. In all probability they would need to have a mastoid operation, and then one could not be assured that they would quit draining, because of the long duration of this infection.

Chronic Tonsils and Adenoids: There are twenty-six cases in the Institution; these have repeated attacks of tonsillitis, and most all of them have enlarged cervical lymph glands. These children should have their tonsils and adenoids removed.

Hypertrophied Tonsils and Adenoids: There are fifty-two cases of this type; most of these are damaging because of the mechanical blocking. Some of these tonsils are tremendously enlarged. These children would be better off if their tonsils could be removed, although it is not as necessary as the cases above.
Sinus Infection: There are about sixteen cases that I have listed under this classification. These children have recurrent colds, prolonged colds, chronic nasal discharges, and other suggestive evidence of sinus infection. If we had an X-Ray, these cases could be further worked up, and perhaps treated more scientifically.

Skin Conditions. Acne: There are eleven cases; some of these are very bad, and are getting extensive scarring from this skin disorder. Two or three are bad enough that they should have X-Ray therapy, but because of the expense, we have not felt it advisable to do this. The various diets, vaccines and local applications have been used with only slight improvement.

Pityriasis: Two cases.
Dermatitis Venenata: Three cases due to poison ivy, and one due to wet cement.
Toxic Erythema: One case which followed an acute infection.

Pompholyx: One case.
Scabies: Eight cases. This is a considerable improvement over former years, when it was in the Baby Cottage practically all the time.
Pediculosis Pubia: Thirty-three such cases in one of the boy's dormitories.

Heart Conditions. Heart Trouble: There are fourteen cases in the Institution, classified as: congenital heart; functional heart; and one or two with early organic heart disease. All of these cases are symptom-free.

Secondary Anemia. Anemia: There are six cases of secondary anemia; most of them have some form of chronic infection that keeps their blood count at a low level. Particularly is this true of chronic ear and chest conditions.

Nutritional Disorders. Underweight: There are sixty-six children underweight, which includes nine new ones, admitted this year. Most new children, when admitted, are underweight, but soon gain, when given well-balanced diets, and proper care.

Overweight: There are thirty-one children overweight; most of these occur as excessive growth at puberty, and are not pathologic.

Hernias. Umbilical Hernia: There are eleven cases of umbilical hernia in the Institution; most of them are mild, and none require treatment.
Right Inguinal Hernia: There are two cases of right inguinal hernia, direct type; both of these wear trusses. Each should be operated on.
Left Inguinal Hernia: One case of left inguinal hernia.

Mid-Epigastric Hernia: One case.

Mental Conditions. There are twenty children in the Institution which are designated as being retarded mentally. We have made application for six of these to the State Home for Feebleminded at Austin.

Foreign Bodies. One boy aspirated a whistle into the right bronchus. The whistle was successfully removed by doing a bronchoscopy. One girl swallowed a straight pen, without ill effects. One girl swallowed a straight pen, but evidently without ill effects.

Injuries. Nail Wounds: There were seven such cases. All had the prophylactic dose of tetanus anti-toxin, as given under heading, Prevention.

Lacerations: There were eight cases, all required suturing; the lacerations were principally on the scalp, face, and legs.

Traumatic Injuries: There were thirteen cases of traumatic injury. Four cases were rather severe; two to the eye region, one had a dislocated middle right finger, one an injured knee, sprained ankles, and injured wrists make up the remainder.

Fractures: One child had a fracture of the left mandible. Three children had their left arms broken, all below the elbow.

Surgery. During the last year, there were two children operated on for acute appendicitis. Last year, we had three cases operated on for acute appendicitis.

Four children had their tonsils and adenoids removed.

Two children had ingrowing toe-nails removed.

Orthopedic Conditions. Genuvarum: One case.

Genuvalgum: One case.

Old Fracture of the Skull: There is one such case in the Institution, and there is a lack of skull-bone about the size of a dollar in the upper region of the forehead, just at the hairline.

Fredericks Syndrome: There is one such case, and unfortunately, there is nothing to be done about it.

Poor Posture: There are ten cases of poor posture in the Institution; nearly all are underweight. Arrangements are now being made for them to have posture exercise, and a very nutritious diet.

Miscellaneous. Two children had extensive swelling from bee-stings.

One child was bitten by a dog.
One child had a first degree burn, fire.
One child had extensive sunburn after going in swimming.
One child had hyperthyroidism in the Institution.

There is one case of Froechlicks syndrome.
There were two cases of rheumatic arthritis.
There is one case of prolapsed rectum, and this is the same child that has a chronic pyuria.

Hospitalization. During the year there were 293 patients admitted to the hospital. September was the lightest month, with six patients, and a total of twenty-three hospital days. March was the heaviest month, with fifty-nine patients and a total of 211 hospital days. For the entire year, the 293 patients stayed in the hospital for a total of 1,054 days.

This does not include cases that were in the hospital over a month, nor does it include the many cases that come in with minor disorders, and stay in the hospital for forty-eight hours or less; neither does it include the many cases that are treated at the hospital daily by the nurses.

Deaths. One boy died as a result of chronic nephritis, with hypertension, and a complete anuria. An autopsy performed on him confirmed the diagnosis.
One girl died a respiratory type of death, but she was kept alive about eighteen hours by artificial respiration. Autopsy on this girl disclosed a large brain abscess.

Recommendations. The hospital is badly in need of the following equipment: X-Ray unit; a diathermy; an ultra-violet lamp; a small autoclave (We have to carry all of our dressing, bandages, etc. to one of the hospitals in order to have them autoclaved), and lastly, we greatly need an electric icebox. At the present time the biologicals are kept in the same icebox with the food.6

Inasmuch as the health reports for the different years contain much duplication, except in figures, the information contained in the Physician's Reports for 1938, 1939, and 1940 will be summarized in table form. The preceding reports, given in full, have contained the necessary descriptive matter to make the statistical report intelligible.

Table 5 shows the preventive measures taken against disease by the Home.

**TABLE 4**

PREVENTIVE MEASURES AGAINST DISEASE TAKEN BY WACO STATE HOME, 1938, 1939 AND 1940

<table>
<thead>
<tr>
<th>Type Disease</th>
<th>Number of vaccinations or tests made each year</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1938</td>
</tr>
<tr>
<td>Small Pox Vaccinations</td>
<td>10</td>
</tr>
<tr>
<td>Diptheria Tests</td>
<td></td>
</tr>
<tr>
<td>Schick</td>
<td>46</td>
</tr>
<tr>
<td>A.P. Toxoid</td>
<td>34</td>
</tr>
<tr>
<td>Scarlet Fever</td>
<td></td>
</tr>
<tr>
<td>Dick tests</td>
<td>43</td>
</tr>
<tr>
<td>Whooping Cough</td>
<td></td>
</tr>
<tr>
<td>Sauer vaccine</td>
<td>34</td>
</tr>
<tr>
<td>Typhoid Fever</td>
<td></td>
</tr>
<tr>
<td>Vaccine</td>
<td>376</td>
</tr>
<tr>
<td>Rabies</td>
<td></td>
</tr>
<tr>
<td>Anti-rabies vaccine</td>
<td>1</td>
</tr>
<tr>
<td>Tetanus</td>
<td></td>
</tr>
<tr>
<td>Anti-tetanus serum</td>
<td>8</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td></td>
</tr>
<tr>
<td>Skin tests</td>
<td>48</td>
</tr>
<tr>
<td>Syphilis</td>
<td></td>
</tr>
<tr>
<td>Wasserman tests</td>
<td>48</td>
</tr>
<tr>
<td>Colds</td>
<td></td>
</tr>
<tr>
<td>Vaccine</td>
<td>4</td>
</tr>
</tbody>
</table>


An examination of this table reveals that the statistics vary from year to year. This is due to health conditions outside the Home as well as those within. For instance, 376 typhoid vaccines were administered in 1938, 109 in 1939,
and none at all in 1940. The physician notates, in the 1940 report, that the previous inoculations had obviated the need for any in that year. The cold vaccines were found to yield no apparent beneficial results and were discontinued. The number of Wasserman tests given each year indicates that the Home carefully checks the children in respect to venereal diseases. This is due not so much to a number of acquired cases, but to the large number of congenital cases originating through heredity. The skin tests for tuberculosis, too, indicate that special notice is given this disease.

Table 5 is a summary of the health reports for the years of 1938, 1939, and 1940.

### TABLE 5*

**PHYSICIAN'S REPORTS ON HOSPITAL ACTIVITIES IN WACO STATE HOME, 1938, 1939 AND 1940, AS TO NUMBER OF CASES TREATED FOR EACH DISEASE**

<table>
<thead>
<tr>
<th>Type of Disease</th>
<th>Number of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1938</td>
</tr>
<tr>
<td>Epidemics and Contagion</td>
<td></td>
</tr>
<tr>
<td>Influenza</td>
<td>39</td>
</tr>
<tr>
<td>Pink Eye</td>
<td>105</td>
</tr>
<tr>
<td>Measles</td>
<td>0</td>
</tr>
<tr>
<td>Diptheria</td>
<td>1</td>
</tr>
<tr>
<td>Scarlet Fever</td>
<td>0</td>
</tr>
<tr>
<td>Smallpox</td>
<td>0</td>
</tr>
<tr>
<td>Ringworm</td>
<td>50</td>
</tr>
<tr>
<td>Mumps</td>
<td>6</td>
</tr>
<tr>
<td>Chicken Pox</td>
<td>0</td>
</tr>
<tr>
<td>Genito-Urinary Conditions</td>
<td></td>
</tr>
<tr>
<td>Phimosis</td>
<td>45</td>
</tr>
<tr>
<td>Simple vaginitis</td>
<td>2</td>
</tr>
<tr>
<td>Hypospadias</td>
<td>1</td>
</tr>
<tr>
<td>Type of Disease</td>
<td>Number of Cases</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-----------------</td>
</tr>
<tr>
<td></td>
<td>1938</td>
</tr>
<tr>
<td>Cryptorchidism</td>
<td>4</td>
</tr>
<tr>
<td>Hydrocele</td>
<td>2</td>
</tr>
<tr>
<td>Inguinal Hernia</td>
<td>1</td>
</tr>
<tr>
<td>Enuresis</td>
<td>0</td>
</tr>
<tr>
<td><strong>Gastro-Intestinal Conditions</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Gastro-intestinal</strong></td>
<td></td>
</tr>
<tr>
<td><strong>upsets</strong></td>
<td>10</td>
</tr>
<tr>
<td>Umbilical Hernia</td>
<td>15</td>
</tr>
<tr>
<td>Appendicitis</td>
<td>1</td>
</tr>
<tr>
<td>(no operation)</td>
<td>1</td>
</tr>
<tr>
<td>(operation)</td>
<td>2</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>2</td>
</tr>
<tr>
<td>Anorexia</td>
<td>0</td>
</tr>
<tr>
<td>Hook worm</td>
<td>0</td>
</tr>
<tr>
<td><strong>Injuries and Accidents</strong></td>
<td></td>
</tr>
<tr>
<td>Lacerations</td>
<td>16</td>
</tr>
<tr>
<td>Teeth (knocked out)</td>
<td>1</td>
</tr>
<tr>
<td>Puncture wounds (nail)</td>
<td>3</td>
</tr>
<tr>
<td>Burns</td>
<td>2</td>
</tr>
<tr>
<td><strong>Skin Conditions</strong></td>
<td></td>
</tr>
<tr>
<td>Ringworm</td>
<td>50</td>
</tr>
<tr>
<td>Scabies</td>
<td>5</td>
</tr>
<tr>
<td>Prickly heat</td>
<td>60</td>
</tr>
<tr>
<td>Eczema</td>
<td>12</td>
</tr>
<tr>
<td>Phthertasis</td>
<td>4</td>
</tr>
<tr>
<td>Dermatitis</td>
<td>7</td>
</tr>
<tr>
<td>Impetigo</td>
<td>12</td>
</tr>
<tr>
<td><strong>Orthopedic Conditions</strong></td>
<td></td>
</tr>
<tr>
<td>Orthopedic deformities</td>
<td>8</td>
</tr>
<tr>
<td>Syndromes</td>
<td>1</td>
</tr>
<tr>
<td>Genu varum</td>
<td>1</td>
</tr>
<tr>
<td>Genu valgum</td>
<td>2</td>
</tr>
<tr>
<td>Poor posture</td>
<td>0</td>
</tr>
<tr>
<td>Fractures during year</td>
<td>2</td>
</tr>
<tr>
<td><strong>Acute Infections</strong></td>
<td></td>
</tr>
<tr>
<td>Soft tissues--infections</td>
<td></td>
</tr>
<tr>
<td>as in hands, feet</td>
<td>9</td>
</tr>
<tr>
<td>Abscesses</td>
<td>4</td>
</tr>
<tr>
<td>Furunculosis</td>
<td>3</td>
</tr>
<tr>
<td>Adentis</td>
<td>0</td>
</tr>
<tr>
<td>Bronchitis</td>
<td>5</td>
</tr>
<tr>
<td>Vincent's Infection</td>
<td>2</td>
</tr>
<tr>
<td><strong>Chronic Infections</strong></td>
<td></td>
</tr>
<tr>
<td>Brucellosis</td>
<td>24</td>
</tr>
<tr>
<td>Tuberculosis</td>
<td>43</td>
</tr>
<tr>
<td>Lues</td>
<td>5</td>
</tr>
</tbody>
</table>
A study of the health records for the years 1938, 1939, and 1940 reveal that conditions in the Home were very similar to those in private homes and in everyday life. In the field of contagious diseases, the figures vary from year to
During the years 1938 and 1939 there was not a case of measles in the Home; during 1940 there were 185 cases. This indicates that there was probably an epidemic of measles in the surrounding territory and that the children in the Home, as elsewhere, contracted them. In 1938, there were fifty cases of ringworm, and in the other years this disease was negligible. There were 105 cases of pink eye in 1938, ten in 1939, and fifty-one in 1940. In the more serious types of disease, and especially those which may be guarded against through inoculation, the Home had few cases. There was one case of diptheria in 1938, not a single case of smallpox in the three years, and no typhoid fever. This indicates that the Home's hospital facilities and health preventive measures were functioning at a high degree of efficiency.

Acute infections followed the trend of contagious diseases. There were few cases considering the number of children in the Home. Surgical work varied from year to year, but the greater part of this type of work was minor operations. Tonsils and adenoids furnished the major basis for other surgery.

Respiratory infections--colds, acute laryngitis, bronchitis, and pleurisy--were few. There was only one case of pneumonia in the entire three years.
At first glance the chronic infections appeared to be rather high. The tuberculosis cases, however, are not active. All the children that show any evidence of the disease in either active or inactive form are listed on the records as afflicted with the disease. The active cases are transferred to the State Tuberculin Colony when they are discovered. There were twenty-four Brucellosis infections in both 1938 and 1939 but they decreased to six cases in 1940.

There were a number of ear, nose, and throat conditions. M.G. Carlisle explained in his reports that many of these infections had become chronic before the children were admitted to the Home, and that there was no relief possible, except medical care and supervision.

Clinical studies revealed a large part of the genito-urinary conditions were due to hereditary causes. Some of these refused to yield to treatment, but they were not severe. Bed-wetting yielded the largest number of cases in this connection.

From 1938 until 1940, skin conditions showed a decided improvement. The number of cases of dermatitis, eczema, and ringworm were the main causes of skin disorders.

Orthopedic conditions were about the same from year to year in most instances. These cases were listed under the detailed reports and were shown to be incurable.

Taken as a whole, the medical reports of The Waco State Home on the health of the children and on the facilities of
the Home for taking care of them from 1933 until 1940 show a continued improvement. Many of the hospital supplies, the need of which was shown in the early reports, were furnished the Home by the state. In the majority of cases, the children of The Waco State Home have unusually good medical care and supervision.
CHAPTER V

PHYSICAL EDUCATION AND RECREATION PROGRAM

OF THE WACO STATE HOME

The information given in the preceding chapters has revealed some understanding of the problems that confront the Superintendent and the Staff of The Waco State Home. The children cared for within its walls present not only the usual problems of children but additional ones as well. Many of the children coming to the Home are the products of disorganized homes with nervous and emotionally unstable parents. Such heredity and environment can only breed insecurity and inferiority, with mental attitudes and complexes far from normal. The medical reports show many of the children are weakened by disease due to heredity or neglect. It is a tremendous problem to work out a program that will care not only for the physical needs of the child but for the social needs as well. In his annual report for 1938 Superintendent Patterson shows that he feels the responsibility of this undertaking:

Good housing, proper food, comfortable clothing, education, recreation, moral and religious training are basic essentials that cannot be minimized. It is also realized that if the child develops normal social relationships, he must have a life that is satisfactory to his own self.
He must experience some means of success from his own personal efforts—he must have an opportunity to build-up self-confidence, self-respect and responsibility.1

A sane program of recreation and physical education combined with health protection has been the Superintendent's best method to develop the children along normal lines. This may readily be seen when an examination is made of the growth of the physical education and recreation program since 1932.

After its establishment, one of the first acts of the Home was the setting up of a public school for the children. As near as possible, it was maintained in the same way as the average public school. In 1933, the enrollment at the beginning of the school year was 300 pupils. The first seven grades were taught.2 At the time these grades met the needs of all the children of the Home. In this school, as in other schools, the physical education activities were carried on as a part of the curricula. Nine regular academic teachers comprised the teaching staff. In addition to these teachers there was a teacher of public school music and of piano. A band master was provided for the boys, and a playground director who assisted in the Baby Cottage worked with the girls. The physical director of the boys was not a member of the teaching staff.


The academic work in the three upper grades was supplemented once a week with club-work. Different leaders sponsored the following clubs: Dramatics; Know-Your-City; Personal Improvement; Games; Nature Study, and Current Events. A beginning of girl's athletics was made with the assistance of two of the teachers.

The following report on the recreation and entertainment provided for the children was made:

The importance of play in the life of a child is fully recognized. The recreation program undertakes to make some provision for all the children in the Institution, but is handicapped by lack of equipment, an indoor play-room and trained directors.

The usual athletic games are maintained for the older children. These include baseball, basketball, football, etc.

Location near the Bosque River has made it possible to give all the children opportunity to learn to swim under adequate supervision.

Children are entertained with motion pictures once a week.

There is a very great need for play-ground equipment especially adapted for the smaller children; for a gymnasium; and for an athletic director for girls, who could be on duty on Saturday and Sunday, and during the vacation period.

Although the Home was handicapped by lack of equipment and trained personnel, it was found that a physical education and recreation program was maintained along with the other activities at the Home.

Considerable equipment for the use of the school and the Home was purchased during the year. A radio, a victrola, and a Balopticon machine were made available. Superintendent Patterson, in reporting on recreation and entertainment in the Home said:

The need for adequate facilities for recreational activities on the campus was partially realized by the purchase of several pieces of modern playground equipment. The most of it is adapted for the use of the younger children. The usual athletic games for boys were maintained under the supervision of the Boy's Director, and the teacher of Health and Physical Education in the school directed playground activities for the girls.

During the summer months, swimming meets and tennis matches are sponsored for the children's amusement and instruction. In the winter months the various teachers sponsor clubs, which are practically all of a recreational nature; as well as valuable training. A special effort is made to see that every child over eight years or so, belongs to, and is active in, one of these clubs.4

This report indicates that the Home was intent on building well-rounded individuals. In this respect it meets the aim of McKown who states:

An individual lives in a physical, social, ethical, emotional and spiritual relationships as well as mental, and without suitable training in all of these he is as incomplete, useless, and ludicrous as an automobile with important parts missing.5

A very definite improvement in the recreational program is noted in the Annual Report for the fiscal year, 1935-36. It follows:

5 H. C. McKown, Home Room Guidance, p. 5.
During the year, Mr. Ronald Johnson, who had been for several years the Director of the Working Boys Recreation Club, in the city of Waco, was added to the staff as Athletic Director. He is a most versatile leader of boys, and under his direction, our recreational activities have been greatly enlarged and improved.

The goal has been to give some form of outdoor play that will interest the whole group, rather than concentrating all effort on a few stronger children who often need little training in Physical Development. To this end, separate play fields have been provided, suitable for the varying ages. During the year, courts were completed for Basket Ball, Volley Ball, Tennis, and Croquet. Teams of football were organized for the various weights. Games were played between the different groups on the campus, and with the teams from the city schools. Teams of the larger boys and girls played in the City Baseball Leagues.

Groups were taken from time to time to parks and outdoor places of interest. The larger boys were given a week in camp, on the Bosque River, near Clifton, and the larger girls were given an outing at Glenrose, Texas.

Practically the entire group were given a trip to the Texas Centennial Exposition.6

From the standpoint of recreation, there are some other items in the 1935-36 report that are interesting, although at first glance they might seem to be unrelated. It will be remembered that one of the aims of the recreation program was to aid the child in his relationships with others and to establish normal social contacts. Superintendent Patterson said that a serious handicap in rearing children in an Institution was the lack of means to develop an appreciation of values, and to impress them with the

fact that someone had to earn the money to provide the necessities of daily living. To overcome this handicap in The Waco State Home, some of the boys were permitted to earn small sums of money at various "off jobs" in the community, and personal ownership of toys and pets was allowed.

Superintendent Patterson stated, too, that particular stress was placed on the teaching of Physical Education and Health in the school. Also this year marked the beginning of a new school policy. The students who finished the course in the Home School, were allowed to go to Waco High School for completion of high school work. The results of this policy are given in the following quotation:

Fourteen boys and eleven girls were started to the Waco High School at the beginning of the fall term, 1935. One of the boys was released to his mother, and one boy dropped out of school for failure to do his work. The remaining twenty-three did satisfactory work at school; several of them making A grades. All of them entered heartily into the spirit of the school. They became enthusiastic boosters of the school athletics. One girl was run by her associates as the Most Representative Girl in High School, and ran second.

In my judgment, the class was greatly improved by the outside contact. They developed more pride in their personal appearance, and in their general behavior. Not only the class, but their associates were benefited as well.

As an example, one of the outstanding high school girls asked permission to organize a self-governing Council in her dormitory. The Council was organized by the girls, a set of rules were adopted, with the result that conditions were greatly improved in the dormitory.7

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No specific report on the recreational and physical education programs was included in the Annual Report of the State Home for the fiscal year, 1936-37. The report eliminated this phase of the Home's life and merely stated that a class of fifty-three children, eighteen boys and thirty-five girls, were attending the High School in Waco.

In submitting the Annual Report for 1937-38, Superintendent Patterson made an explanatory introduction which seems pertinent to the subject under consideration. He says:

In submitting the Annual Report for the past year, we feel justified in saying that definite progress has been made, along many lines. The Institution, as a whole, is better equipped. The physical properties are improved. There is a better spirit of loyalty and cooperation among members of the staff, and employees generally.

The children are happy and contented. They have pride in their home, rather than resentment at being placed here. They are amenable to human discipline, and are easily led by intelligent leadership, and enter into the various activities with the same spirit of youthful enthusiasm characteristic of normal children.8

Because of the addition to the staff of a Physical Director for Girls, the program of play and recreation was greatly improved during the year of 1937-38. This had been a much felt need of the Home. The new Director was able to give her time not only during the instruction periods but on week-ends and during vacations. Aside from

its primary purpose of physical development, a full program of recreation went far towards solving many difficult problems of discipline.

Character building organizations were also established and maintained at the Home during this year. Three Boy Scout troops and a Chapter of the Camp Fire Girls were all active under the direction of leaders in the Home staff.

Improvements were made in the Home School. Replacements made in the teaching force were, in some instances, very much to the advantage of the school. When replacements were made, care was taken to select teachers who had had a high standard of training, and who held college degrees, with majors in the particular field to which they were assigned.

In commenting on the record made by the students in the Waco High School, Superintendent Patterson said:

There were twelve graduates from Waco High School, the first class to graduate in high school work from this Institution. It was a matter of considerable pride that our children were able to make very creditable records in a first class high school. Four of the twelve were on the honor roll, with a general average above ninety; all of them made good averages.

The problem of placing young boys and girls, just out of high school, is a very difficult one. One member of this class was only sixteen years of age; none were past eighteen. Plans were made for two boys to enter Baylor University. One girl will enter Texas State College for Women; and two girls have entered hospitals for training as nurses.9

The Annual Report of the Home for 1938-39 does not go into great detail about its recreational activities, but the summary given presents a very clear picture of the health and recreational activities of the Home:

Staff members responsible for recreational activities include a Director for both boys and girls. Graduation from a standard college with a major in Physical Education is required of the directors.

Games and sports suited to the various seasons are encouraged and engaged in. Practically every child spends his leisure in out-door games. The remarkable physical development of our children may be attributed in a great measure to a broad program of out-door play.

Much stress is placed on activities in which all the children may engage, and time is given for free play and projects which children develop when left to themselves.

Each class in school has a regular period of supervised play. Pupils from the various grades engage in group contests among themselves and enter all types of inter-scholastic games. Desirable traits of character, as tolerance, sportsmanship, team work, modesty in victory, good cheer in defeat, etc., are stressed in all such contests.

It is a matter of pride to the whole Institution that in contests with neighboring public schools, our teams in most instances show their superiority.

It is a definite policy that play be recognized as a vital and necessary part of every normal child; that every child has an inherent right to be happy, and a well-planned program goes very far toward providing happiness, while promoting good health and building character.

Character-building organizations are maintained, with three Boy Scout Troops, and a chapter of the Camp Fire Girls. All of the groups have leaders from our staff.10

The Annual Report for 1939-40 gives very much the same information concerning recreational activities as the one

quoted above from the 1938-39 report. The report on the Physical Education activities, however, is significant. It follows:

A well-rounded physical education program offers adequate training in physical culture and health study. Physical education is correlated with the athletic department, which has had an unusually successful year. The football team was undefeated, untied, unscored on throughout a nine day schedule, with Class AA, Class A, Class B and Institutional schools. The team scored 279 points to the opponents 0. The basketball team lost only three games during the season, placing second in McLennan County.

The track team won third place in State Meet held in Denton and first place in the mile relay at State Meet.11

Besides this information concerning the physical education program of the Waco State Home, other data is listed which is pertinent to the study. This data concerns the progress of the children along other lines besides those of physical accomplishments. In the report on the school activities, the following statement was made:

In addition to regular routine work, the school entered actively into Interscholastic League work, taking part in all events, and winning the County championship in its division. The school placed in the following events:

First Place

Choral singing
Debate
Extemporaneous speaking
Seventh grade spelling

Story telling
One-act play
Junior high girls declamation

Second Place

Arithmetic
Picture memory
Ready writers
Junior boy and girl declamation
Junior high boy declamation
Senior high boy declamation

Third Place

Senior girl declamation

First Place

Junior and senior track and field
Grammar school girls volley ball

Second Place

High school girls volley ball\(^{12}\)

After making this study the conclusion is that the Home has been successful, to a large degree, in its physical education, health, and recreation programs. It has met the test prescribed by The State Department of Education for a program of this type:

The real test of the success of the health education program is the conduct of the student. Tests for knowledge have a place, but the goal which the instructor should strive for in the health teaching is to bring about behavior by the student which promotes mental, social, emotional and physical health.\(^{13}\)

\(^{12}\) Ibid.

\(^{13}\) State Department of Education Bulletin, Tentative Course of Study, No. 359, p. 383.
The records of the children of The Waco State Home, as submitted above, show that there has been good results from the Home program. The records were made by the children in competition with other children of the county, and are not imaginary statements that might or could be made by the staff of the Home in reporting to its controlling Board. The behavior of the children shows the beneficial results of careful training.
CHAPTER VI

SUMMARY AND CONCLUSIONS

The foregoing study of the program of physical education, health, and recreation of The Waco State School has resulted in the following conclusions:

1. The Waco State Home, in its self-expressed aim to produce self-respecting, worthy, self-supporting citizens, has had some formidable obstacles to overcome.

2. The majority of the children in the Home have undesirable backgrounds and environmental conditions conducive to create nervous, unstable children.

3. The first work of the Home is to try to build sound bodies.

4. A thorough physical examination is given each child on entry into the Home. A record is kept of this and future check-ups.

5. The children are protected from contagious disease by vaccines.

6. The Home hospital has facilities to care for the children under ordinary conditions.

7. The health program of The Waco State Home meets the standards set up by the State Board of Education of Texas for the public schools of the state.
8. The physical education program of The Waco State Home has met desirable educational standards.

9. The Home has competent physical education teachers who hold college degrees from recognized institutions.

10. The Home has a well-planned recreation program under the competent direction of trained Directors of Recreation.

11. Health records show that the children in the Home have a much lower death rate than that in the average institution.

12. Scholastic records and physical education records show that the children of the Home, in direct competition with other children from the county, have distinguished themselves in a creditable manner.

Conclusion

In view of these definite results, the conclusion is made that the Physical Education, Health, and Recreation Program of The Waco State Home has been successful in the following respects:

1. It has developed normal, happy children who have a chance to become useful, self-supporting children.

2. The Health, Physical Education, and Recreation Program of the Home has met and exceeded in many respects the educational standards for such activities.

3. The Waco State Home has performed a great educational service in remolding warped, underprivileged children.
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