



Children's Progress

1833 ☆ 1933



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CHILD



HEALTH

ONE hundred years ago our country was very different from what it is today. We all know many of these differences—steamships, railroads, telephones, automobiles, airplanes, electric light, radio. Some people measure our progress by such inventions and improvements alone. ¶ There is another measure of progress, however, even more important. What has happened during this amazing century to our children? Are they now assured of better care than they were in earlier periods? Have they greater chances than they had in 1833 of becoming healthy, capable, happy citizens?

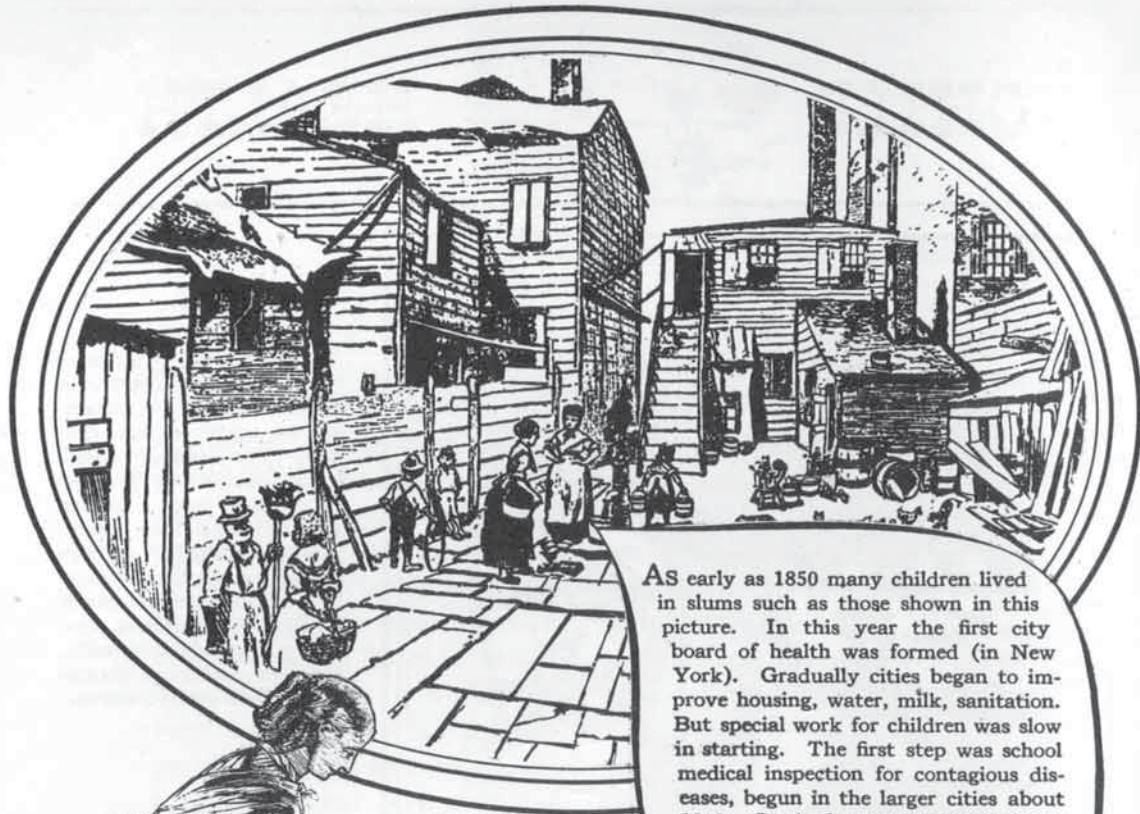
This booklet tells something of *children's progress* from 1833 to 1933. It shows some of the important steps taken to reduce the death rate among babies, to educate parents in the care of children, to help children who are dependent, delinquent, or physically or mentally handicapped, to protect the child worker. ¶ The United States Children's Bureau is concerned with all these phases of child welfare. It offers help, through booklets and advice, to every parent, and it hopes for the cooperation of every citizen. The children of today are the parents of tomorrow—our future and the future of our Nation.



THE mother and father of 1833 had almost no help from their town or city in protecting the health of their children. Few sanitary precautions were taken. Because of polluted water, unclean milk and other food, insanitary conditions of garbage and sewage disposal, epidemics were frequent and devastating. Typhoid fever, dysentery, smallpox, diphtheria, and other contagious diseases killed thousands of children.

OLD cemeteries have many tiny gravestones marking the early deaths of children, often within a few months of birth. Since there were in those days no Government statistics of births and deaths, no one knew how many babies died, but the death toll was enormous. No one knew how many mothers died in childbirth, although that number also must have been great.





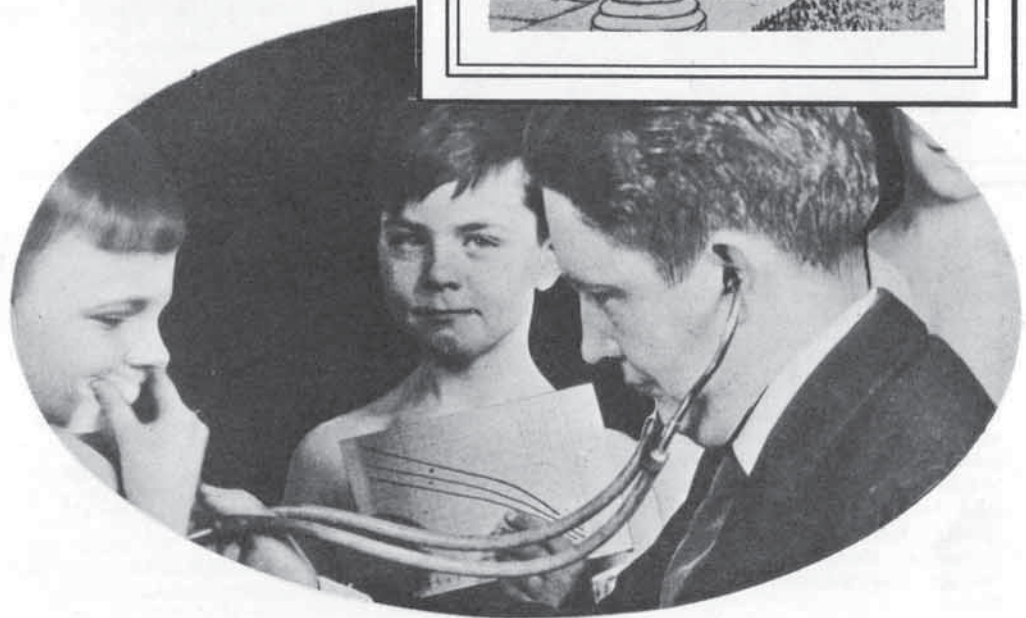
AS early as 1850 many children lived in slums such as those shown in this picture. In this year the first city board of health was formed (in New York). Gradually cities began to improve housing, water, milk, sanitation. But special work for children was slow in starting. The first step was school medical inspection for contagious diseases, begun in the larger cities about 1890. In the last 40 years knowledge and use of protective measures against communicable diseases have made rapid advances.



ALTHOUGH very little was known during the nineteenth century about diet and its effect upon child health, charitably inclined people did attempt to supplement the food undernourished children received. This picture shows a class of children in 1866 receiving lunch at school, an early forerunner of the school lunches and nutrition work now established in many cities.

● In 1889 a consultation center for mothers and children was established in New York City, and in 1893 the first milk station in the United States, where mothers might get pure milk for their children, was opened—also in New York City. Later this became an infant-welfare center, which gave mothers advice on the care of babies and children. The picture shows one of the early milk stations, in a Rochester (N.Y.) police station. By 1900, 20 child-health centers had been started.

● Gradually the States began to recognize their responsibility for child health, especially for the health of public-school children. Laws were passed making physical examinations and health inspection compulsory, Connecticut, Vermont, and Massachusetts leading. Here a modern school physician is examining a class of boys.





●A great advance in child-health work became possible when, in 1902, a nurse was employed in the public schools of New York City. Later public-health nurses were employed to visit mothers in their own homes, helping to care for the sick and teaching how to prevent sickness and protect health. One of these pioneer nurses is shown in the picture. Since then thousands of nurses have been sent out by public and private agencies to teach and help millions of mothers and children.

●New York organized the first *city* bureau of child hygiene in 1908; other cities followed with similar bureaus. The first *State* division of child hygiene was formed in Louisiana in 1912. The same year Congress established the United States Children's Bureau, the first bureau of its kind in any *national* government. One of the early activities of the Bureau was this traveling child-health clinic, the "Child Welfare Special", which in 1917 journeyed thousands of miles through rural communities in many States.



●This picture shows a modern child-health center. The United States Government helped the States to organize many centers like this, as well as prenatal centers for expectant mothers, during the seven years (1922-1929) when the Federal Maternity and Infancy Act was in force. This act gave financial aid to the States in their health work for mothers and children.

●The Children's Bureau works with other child-welfare agencies—public and private—to help mothers and children. For example, the Bureau cooperated with the Yale University School of Medicine in a demonstration of the prevention of rickets by cod-liver oil and sun baths.





No wonder that you are ashamed
Upon that bench to stand
With dunce's cap upon your head
And switches in your hand.

●Another important phase of modern child-health work is the study of the mental health of the child. In the early days the child who could not do his school work wore a dunce cap or stood in the corner. Teachers—and parents, too—did not realize that children who do not succeed in school or who misbehave need special attention.

●During the past 20 years child-guidance clinics and habit clinics, where the child's environment, as well as his physical, mental, and emotional make-up are studied, have developed, and these do much to help "problem children."



THE DEPENDENT



CHILD



●The dependent child in the early years of the past century was usually cared for in an almshouse with pauper adults. The little girl in the picture is an almshouse child up for punishment before the guardians. Health conditions were bad in many almshouses; education was neglected. Sometimes the children were "packed like sardines in double cradles."

After a few years in the institution even young children were often indentured as apprentices or servants or "farmed out."

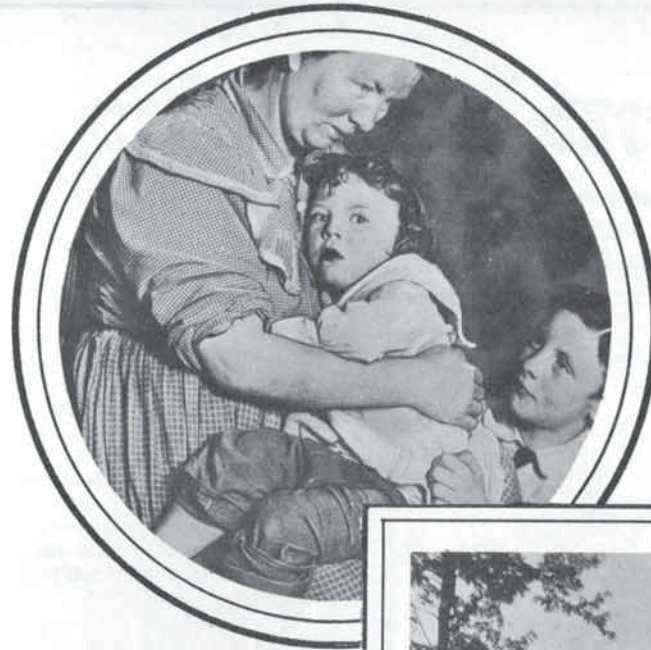
An early report sums up: "The education and morals of children of paupers * * * are almost wholly neglected. They grow up in filth, idleness, and disease * * * early candidates for the prison or the grave."



● Gradually people began to realize that children are better off in family homes than in institutions. In New York children were put out "at nurse" early in the century. But often the homes were not carefully chosen and inspected, as this 1845 picture indicates. It shows "three half-starved almshouse children in the room of a hired nurse."



● Organized child placing in foster homes dates from 1853 (in New York). In 1881 Massachusetts began to pay board for children in homes. Gradually other States provided for supervision of children placed in such homes. However, no State until recent years provided aid for dependent children in their own homes. One early attempt to help poor mothers to keep their own children was the day nursery, where youngsters were cared for while the mother worked. The picture on the left shows a day nursery, 1856.



● Some children are placed in institutions, but the modern children's institution is very different from the old almshouse. It is likely to consist of a group of attractive little cottages, where the children have opportunity for good physical care, habit training, education, and play, under the supervision of persons trained in meeting children's needs. A fine institution of this kind is illustrated below.

● It was in 1911 that the great modern movement to give public aid to poor children in their own homes began. Illinois passed the first Statewide "mothers' aid" law in that year. Now 46 States, Alaska, Hawaii, and the District of Columbia have such laws. More than 250,000 children who in former times might have spent unhappy years in orphan asylums are now living with their own mothers, brothers, and sisters.

● Today many children whose mothers cannot care for them are placed in foster homes under continuing supervision of child-caring organizations. These children have a wholesome family life, which fits them to become useful citizens.



THE HANDICAPPED CHILD



● Now, too, much is done to prevent crippling. Education in accident prevention, modern treatment of infantile paralysis, and the Nation-wide campaign against tuberculosis in its various forms—all are lessening the number of deformed backs and limbs. Sunlight and cod-liver oil are preventing and curing rickets, so that fewer children are deformed by it.

● A hundred years ago there was no organized care for crippled children. Little beggars on crutches, like the boy pictured, were common. A private institution for cripples was opened in 1863, but not until 1897 was there any State legislation to aid crippled children. Today hospital treatment, orthopedic exercises, and special provision for education give the crippled child his chance.



● These happy little children are blind. They are receiving modern care in the Perkins Institution, Watertown, Mass., one of our first schools for the blind, opened in 1832. The first State institution for blind children was established in Ohio in 1837. Special schools, libraries in raised print, and sight-saving classes in the public schools have followed. Every State has made some provision for the protection of babies' eyes at birth.

● Deaf children have received special attention from the State governments since comparatively early days. Even before 1833 nearly every State had appropriated some money for the education of the deaf. Today special emphasis is placed on physical care and vocational training. Deaf children are now taught by means of lip-reading instead of by the old method of the sign language. Most of the States have institutions for the deaf, and there are many day schools.

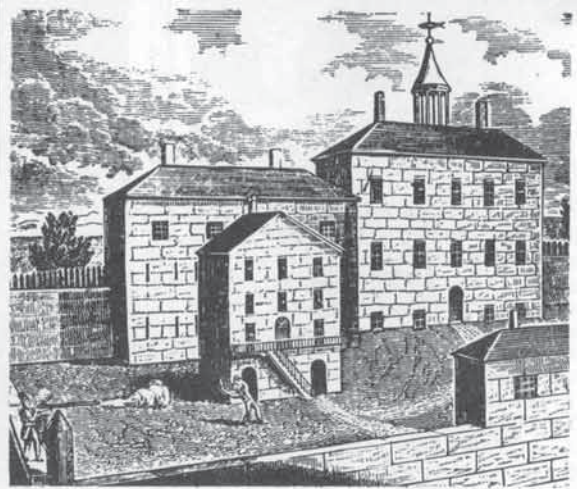


THE DELINQUENT CHILD



● The case of the bad boy of 1833 was a simple matter to his parents and the authorities. They had no doubts about the proper treatment—he was admonished and flogged. If these remedies had no effect, he went to jail and there learned from older criminals the refinements of lawbreaking. When he was released from jail the community paid no further attention to him except to sentence him again if he committed a further offense.

● Even children as young as 8 during the later years of the last century were tried in ordinary courts and sentenced as if they were responsible adults. Massachusetts pioneered in trying children separately from adults as early as 1869, but our modern children's courts, which attempt to find the cause of the child's misbehavior and then to correct it by individual treatment, were unknown until the dawn of the twentieth century.

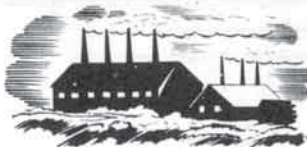


● Today the attitude of the community toward "bad" children has changed. The law now tries to prevent and cure delinquency, not merely to punish the offender. The establishment of modern children's courts and the probation system has made this possible. When a child is brought before these courts, a probation officer (such as the one in the picture) is assigned to visit his home, make friends with him, study his history, and get at the cause of the trouble. Physical and mental examinations are provided in a clinic.

● The judge in the best of our children's courts (as in the photograph at the right) meets the young offender in a friendly manner, and his decision is based upon the individual needs of that child. In some cases the child is placed in a foster home or an institution, but if at all possible he remains in his own home. His friend, the probation officer, helps him with his problems of health, home conditions, school, and recreation.



THE CHILD



WORKER



● Colonial America believed strongly in the homely virtues of hard work and thrift. Often these virtues were forced on children at the expense of their health and education. The picture on this page shows youngsters on their way to work in a factory before 1819.

The first cotton-spinning factories were established around 1800, and they

employed many young children. A 15-year-old was considered grown up, and many children under 10 were working in factories.

Hours of work in the early mills were from sunrise to sunset. Children worked long hours in domestic industries also—spinning, candle-dipping, making clothing—and in agriculture.

● Before the Civil War State legislatures paid little attention to child workers. Laws in some States required that factory children must have had a specified number of weeks or months at school during the preceding year. However, in other trades even this small protection was denied youngsters. For example, the young "printer's devil" of 1856 (right) and boys in

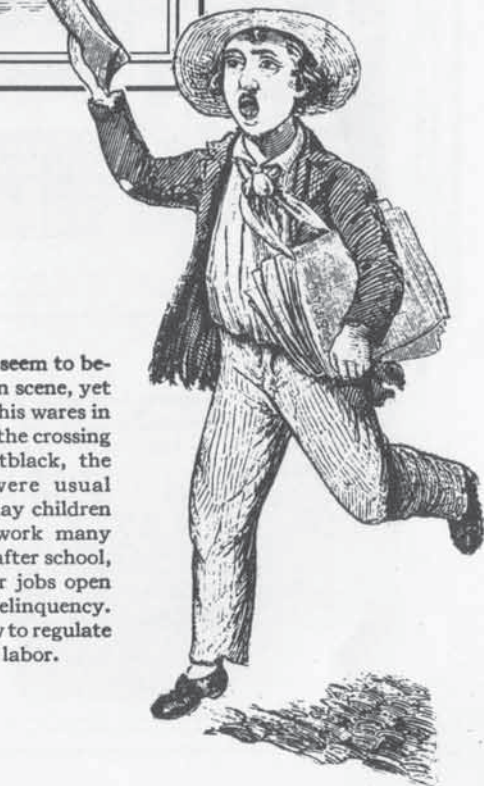


street trades (below) did not come under these education laws.

After the Civil War State bureaus were established to collect labor statistics and enforce labor laws. These bureaus reported that children as young as 7 worked long hours. People began to demand laws limiting the child's working day; slowly such laws were passed. They applied mainly to factories.



● Newsboys may seem to belong to the modern scene, yet here is one crying his wares in 1856. Then, too, the crossing sweeper, the bootblack, the child peddler were usual sights. Even today children in street trades work many hours before and after school, and some of their jobs open easy paths to delinquency. We have been slow to regulate this type of child labor.





● In 1870 the national census for the first time included figures for child workers. People were becoming aroused to the social waste of letting young children cut short their education in order to go to work; and the illustrated papers of the time show many pictures like the one above of little girls working as tobacco strippers (1873).

In 1880 the census showed that child

labor had actually increased. Gradually an aroused public sentiment began to demand action; and in the North and East, particularly, laws were passed raising the age at which children might be employed and cutting down hours of work in factories and shops. At first these laws were laxly enforced, but in recent years States have gradually improved their administration.



● By 1916 every section of the country had taken some steps toward limiting child labor, although many occupations were unregulated—for example, work in oyster-shucking establishments (above). In 1916 a *national* child-labor law was passed by Congress; it was in effect 9 months. Another law, enacted in 1919, was in effect nearly 3 years. Thus for a while the Nation and the States, working together, succeeded in reducing greatly the number of children under 14 in factories and of those under 16 in mines. The dangerous work of mining, the Government felt, should not be done by young boys such as those in this picture (right).

● In 1922, however, National-State cooperation came to an end because the Supreme Court declared the national law unconstitutional. Now only State regulations exist. There is pending before the States a child-labor amendment to the Constitution which will, if ratified, permit the Nation and the States again to act together on behalf of working children.





●A group of neglected child workers are those who work in the "sweated trades," wearily finishing trousers or coats, stringing beads, making doll clothes, working on flowers, Christmas seals, powder puffs. We need better laws to protect these young workers, for they work pitifully long hours for almost no pay. Such child labor stunts children and is an economic waste for the community.



●This modern little field worker represents another type of child worker whom we do not, even today, protect. Thousands of such youngsters work in the beet fields, in the tobacco fields, on truck farms. They are often migratory workers, hired with their parents or relatives to harvest crops. Many of them work under miserable conditions and miss months of school.

CHILDREN

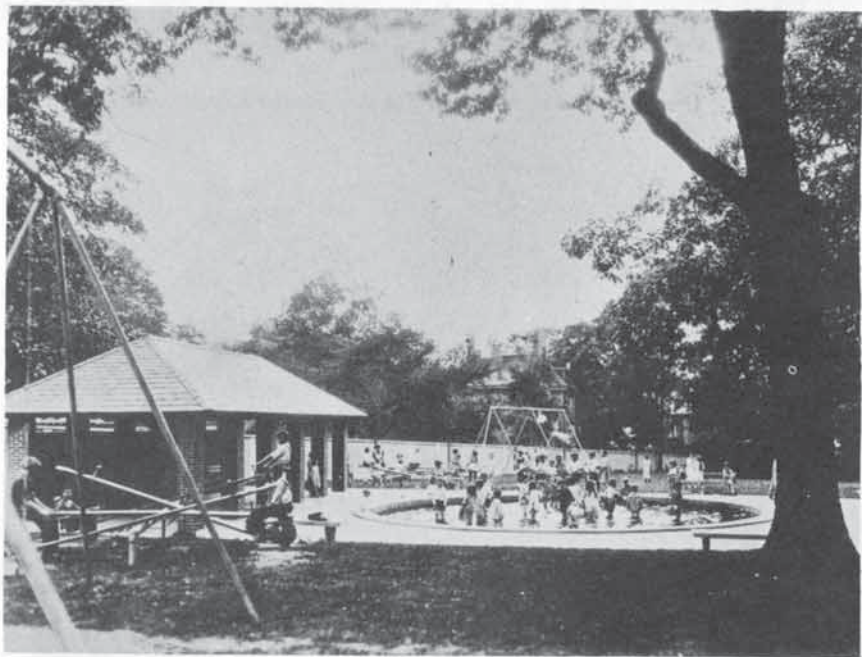


AT PLAY



●Until 1885 few cities seemed to care where the children played. Playing in the streets, in fact, was indirectly encouraged, as school grounds were closed at the end of school, and many were the signs, "Keep off the grass," in the early public parks. The above picture of an early playground was published about 1890.

●While individuals did perform exercises for their health, as the quaint 1831 illustration at the right shows, play for children was unrecognized. A long time elapsed before public play space, with simple apparatus, was provided for children.



A Well-Designed Playground in Newton, Mass.

● The movement for providing children with play space had its real beginning in 1885, when a religious society in Boston placed a large heap of sand in its chapel yard for little children to play in. Other private agencies, especially social settlements, became aware of the need for playgrounds. This interest and activity awakened the cities, and gradually public playgrounds were established throughout the United States.

By 1900 the play movement was well under way. In 1905 Chicago established 10 recreation centers, which included enclosed grounds for children of

all ages, as well as field houses consisting of assembly halls, indoor gymnasiums, swimming pools, clubrooms, and even branches of the public library.

In 1907 the Playground Association of America (now the National Recreation Association) held its first convention. Since then the play movement has steadily expanded. It has been broadened to include a great variety of leisure-time activities for groups of various ages. The modern point of view is that play space and an opportunity to spend playtime with his fellows are essential to the all-around development of every child.



DURING the past hundred years we have made great strides in child welfare. But much remains to be done before every boy and girl in this country has anything approximating a fair start in life. ¶ The infant death rate has been reduced. But 150,000 babies a year still die before they reach their first birthday. The death rate among our mothers remains too high. ¶ Too many children still show evidences of deficiencies in diet, of physical defects that could have been prevented or cured, of faulty hygiene, of lack of habit training. Too few children are protected against communicable diseases. ¶ We need to go further in our care for the handicapped child and in providing resources for the prevention of child dependency and delinquency, for the conservation of children's home

life, for the promotion of wholesome recreation, and for the study and care of dependent and delinquent children. ¶ Even our present child-labor laws allow many children to enter industry far too soon and give them inadequate protection from hazardous occupations. Moreover, the present industrial depression has undermined the enforcement of existing laws and in some fields has brought about increased exploitation of child workers. ¶ The United States Children's Bureau is working to promote child welfare in all its phases. In cooperation with State bureaus and with many private child-welfare organizations it collects and spreads information, helps to establish good standards of child-welfare work, and offers advice in letters and booklets to any parent who wishes it.



This booklet was prepared for the Children's Bureau by Eleanor Taylor, assisted by Andria T. Hourwich, and it was designed by Gerald Link. The following organizations cooperated with the Bureau in supplying information and illustrations: Detroit School for the Deaf; Macmillan Co., publishers of *The Bitter Cry of the Children*, by John Spargo, and *The Battle With the Slum*, by Jacob Riis; Milbank Memorial Fund; C. V. Mosby Co., publishers of *Crippled Children*, by Earl D. McBride; National Child Labor Committee; National Organization for Public Health Nursing; National Probation Association; National Recreation Association; Perkins Institution and Massachusetts School for the Blind; Visiting Nurse Association of Cleveland; *Volta Review*.



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