

## SEVERAL THOUGHTS ON SCHOOL HYGIENE AT THE BREAK OF THE 19TH AND 20TH CENTURIES

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**Abstract:** *Educationalists and doctors in the Czech Lands began to take an increasing interest in matters of school hygiene during the last decades of the 19<sup>th</sup> century. The principal forum for thought and deliberation in this regard were medical and educational journals. A clear conclusion was reached from discussions on the topic – the need for the establishment of the institution of the school doctor. This article gives a brief indication of the situation in other countries, and in the Austro-Hungarian Empire in particular. The Czech Lands were among those that did not question the need for school doctors, though their introduction proceeded relatively slowly. They were first seen in larger towns and cities (notably in Prague, Brno, Karlovy Vary, Opava, etc.), and even there on a rather fragmentary basis. This article is devoted to the situation in Prague, and includes two appendices giving an insight into the situation at that time.*

**Key words:** *school hygiene, the history of public health*

Educationalists and doctors in the Czech Lands began to take an increasing interest in matters of school hygiene during the last decades of the 19<sup>th</sup> century. The principal forum for thought and deliberation in this regard were, in addition to medical and educational journals, periodicals of a political and literary nature. The largest number of articles on the topic appeared in the journal “Zdraví”, which began publication in 1895.

The discussion that proceeded on the pages of these publications reached the clear conclusion that “the school doctor alone is responsible for overseeing the health of our children, and should be charged with the official duty of concerning himself with health at school and the diseases of our schoolchildren.” Stated as an argument supporting this idea was the view that “certain children, instead of being brought up as useful members of society, fall by the wayside, being naturally weaker, and perhaps unsuitably raised at home, victims to the school they die prematurely or, physically decrepit, face a wretched life, a sad and harsh fate, they become a burden to a society that may proclaim magnificent words about the public education of the citizens of the future, but in reality does little to this purpose.”

A brief historical look back into the “prehistory” of efforts to implement the principles of school hygiene was to serve to support efforts directed at the Austrian authorities aimed at the establishment of the institution of the school doctor. The directive of 1595 passed in Lucerne in Switzerland in response to the occurrence of plague in the town is stated in this regard as the earliest school hygiene decree, though there is evidence of similar decrees in Würzburg in Germany dating back to 1563. The frequency with which doctors and teachers called for changes at school increased from the end of the 18<sup>th</sup> century onwards. A collective work by five authors (Frank, Hebenstreit, Schmidtmüller, Schmerler and Faust) entitled “A Catechism of Health for Schools and Churches” dates back to 1793. Something of a controversy was caused by Lorinsen’s article “In the Interests of the Health of Pupils” of 1836, as did the ideas of Schreber and Pappenheim (1858) demanding permanent medical care at schools. Allowances must, however, be made for the standard of school education as a whole at the time, though this is not the subject of this article.

A look at the history of school doctors shows that they operated in a number of European countries from the eighteen eighties onwards, particularly in Scandinavian lands such as Norway, Sweden and Denmark. They were also recorded sporadically in Belgium and Holland, while England lagged some way behind. In France, in contrast, medical inspection at schools was introduced by law in 1886, though its implementation encountered a number of problems. Progress was also seen in two South American countries in the same decade – Argentina introduced medical supervision in schools in 1883, while Chile appointed a supreme councillor for public health, who was also responsible for hygiene supervision in schools, in 1888.

The situation in neighbouring Germany was rather different. The state authorities and many municipal authorities began to consider the issue somewhat later, though more thoroughly, than the countries mentioned above. The municipal council in Berlin, for example, drew up a plan that stipulated that a school doctor be appointed to every primary school (each doctor being responsible for six schools). The duties of these school doctors were to be: 1. To examine the children attending the school and make sure they are able to cope with their school commitments; 2. To conduct a special examination of those children applying for secondary subjects; 3. To examine pupils who have failed to attend classes; 4. To hold surgery for one hour at each school once every fourteen days. School doctors were also to be obliged to monitor the state of school buildings and individual classrooms, and to notify the school administration of any shortcomings discovered. The regulations passed by the municipal councils of many other German towns and cities were of a similar nature, with Wiesbaden in particular being held up as a “model example”. The situation in Breslau in Silesia was similar, with the town council calling for the introduction of medical supervision at schools in 1882. The Silesian Medical Society put forward the interesting argument that “education and knowledge cannot be achieved without a certain injury to the body”. Evidence of the importance attached to school hygiene by the local doctors is provided by the fact that 57 of Breslau’s doctors expressed a willingness to perform the function of school doctor without payment.

We now come to a brief description of the situation in the Austro-Hungarian Empire. In Hungary the foundation stone of school hygiene was laid in 1885, when the

institution of the school doctor was established at secondary schools. Detailed instructions accompanying this legal standard and relating to the duties of doctors were issued two years later, including checks on the state of the atmosphere, adequate lighting in classrooms, the purity of drinking water, the teaching of physical education and singing, examination of the medical condition of pupils, determination of any excessive burden imposed on pupils by the content of the curriculum, and so on. School doctors were obliged to take a special three-month course at the university in Budapest, ending with a final examination.

In Austria the work of school doctors was regulated by order no. 4816 from the Ministry of Education of 19 June 1873, which imposed on medical officers and district and local doctors the duty of monitoring school hygiene and appointed them as advisory bodies to provincial, district and municipal school boards. The reality, however, differed considerably from the intentions of the state authorities – the order remained largely on paper.

Regulations for municipal and family doctors applied in the Czech Lands from 8 February 1889, instructing them to attend to “health in schools” (without more precise specification), while at the same time recommending that they hold an advisory position on local school boards. Many doctors concerned with the issue of school hygiene did not, however, intend to accept an approach formulated in such a general manner. Specialist studies on the given topic appeared in other periodicals, in addition to the journal “Zdraví” (“Health”) mentioned above, at the end of the 19<sup>th</sup> century, such as “Časopis pro veřejné zdravotnictví” (“The Journal of Public Health”), “Časopis českých lékařů” (“The Journal of Czech Physicians”) and “Lékařské rozhledy” (“Medical Horizons”). Specialist societies, such as the “Czech Society for Public Health”, the “Friends of Public Health” and the “Society of Czech Physicians”, began to take an interest in many of the questions that were being discussed. The given issues also appeared on the agenda of the 3<sup>rd</sup> Convention of Czech Physicians and Natural Scientists held in Prague in May 1901. Educationalists also made their voices heard, in addition to those in medical circles. The conventions of teachers held in 1894 and 1903 also called for the establishment of the institution of the school doctor.

The greatest initiative was taken by doctors in Prague. They took up the rulings of the presidium of the municipal council of 24 January 1883 and 24 March 1885, which ordered that the city’s district doctors visit Prague’s municipal primary and secondary schools, nursery schools and crèches at least once a month to examine the children and monitor the state of hygiene in school buildings and classrooms. On 20 February 1883, the Imperial and Royal District School Board ordered that a special “Book of Wishes and Complaints” be introduced at every primary and secondary school in Prague, in which teachers could enter their comments and requests relating to the issue of school hygiene. This measure, however, proved extremely complicated to put into practice, for which reason Prague Municipal Council and school and medical representatives initiated a meeting on 8 February 1902, at which a set of “instructions for the city’s school doctors” was accepted.

The first school doctors in the Czech Lands outside Prague appeared in Karlovy Vary, Teplice, Kolín, Brno, Ústí nad Labem, Opava and Louny, and later in Roudnice, Pardubice and Hradec Králové. The organisational system in each of these localities

was characterised by its own specific features corresponding to local conditions. The aim of the central authorities of the time was to create at least a general basic structure, in which the school doctor would be the integrating component.

The following statistics from Prague help form at least a rough impression of the beginnings of the system of school doctors introduced. In 1901, the city's doctors performed the "supervision" of 46 public primary and secondary schools, 26 private schools, and 19 public and 6 private nurseries. Medical examinations were performed on just 1,628 of the 19,755 schoolchildren (8.2 %). Prague can, nevertheless, be said to have been the city in which the Council of the Royal Capital City created the institution of the school doctor, with an annual remuneration of 1,000 crowns, on 1 December 1904. Every school doctor appointed also received "Provisional Instructions" approved by the city's medical commission on 19 June 1904 (the wording of which is given in appendix 1) and "Advice for School Doctors" (appendix 2) along with his letter of appointment.

The medical documentation they received also included forms for the performance of research at the allocated schools. Form I ascertained basic medical details on year I and II pupils (bodily growth and development, head, eyes, nose, oral cavity, speech, posture, walk, spine, diseases, mental ability), while the doctor recorded hygiene deficiencies at the school (infectious diseases, imperfections to the state of the air, drinking water, the temperature inside the school, lighting, sanitary facilities, etc.) on form II.

The situation in Prague was often said to be an "exemplary model" for other towns and cities in the Czech Lands. Smaller localities still awaited a resolution of the situation.

## **Appendix 1 – Provisional Instructions**

- I.** The school doctor will examine children in relation to sight, hearing, teeth, speech, mental ability, fitness for physical education, handiwork and drawing, and in relation to overall health and diseases creating unsightliness, in a special room at the school at a time outside teaching hours.
- II.** In the case of the suspicion of an infectious disease at the school, the school doctor will suspend the attendance of the given child at the school and notify the medical authorities.
- III.** In cases of urgent medical shortcomings, the doctor will submit a report without delay to the medical authorities. He will otherwise submit periodic reports.
- IV.** In his first year he will examine, first and foremost, all children in the first two years and will establish a written register, then progressively examine children in other classes in whom the teacher or district doctor have previously observed a defect of some kind, then those children in whom he has himself noted anything irregular during his visits. In following years he will examine all children entering the school, will enter them into the register, inspect children recorded in

previous lists, and submit a principal report on his work at the end of the school year to the medical authorities and the district school board.

- V. All the duties of district doctors regarding schoolchildren and schools, unless these are assigned by the law to district doctors, pass to the school doctor (vide paragraph 12 of the approved instructions for district doctors).
- VI. The school doctor does not have the right to criticise directly either the quantity or the quality of the subject matter taught, though he may inform the pertinent authority of his observations and opinions.
- VII. The work of the school doctor in the school building must not disrupt teaching. The school doctor has the right to enter the class during teaching in cases in which this is necessary, though he may not interfere with teaching or give direct orders to the teaching staff.

The Council of the Royal Capital City Prague  
15 November 1904  
Mayor Dr. Srb

## **Appendix 2 – Advice for School Doctors**

1. School doctors for primary and secondary schools are permanent supervisory bodies supervising the medical situation at schools and the health of pupils. They are subordinate to the municipal council and to the city medical authorities. They are responsible for permanent supervision of the medical situation in schools and the health of schoolchildren, and for the submission of reports to the city medical authorities.
2. The school doctor will notify the pertinent school administration and the town medical authorities of the results of examinations of school buildings during the school year.
3. Children will be examined with the commensurate consideration outside teaching hours at a time agreed with the school administration in a special school room, where possible in the presence of a teacher, in the case of girls always in the presence of a female teacher or, if specially requested, in the presence of their parents.  
Detailed examinations will not be performed on children whose parents or guardians have requested of the class teacher that they be excused from such examination and have given proper grounds for this before the time designated for the given examination, unless there is a suspicion of a contagious or infectious illness or disease demanding that special measures be taken (imbecility, etc.).

4. The medical examination of ailing children is not the responsibility of the school doctor.
5. The school doctor should not disturb lessons during his visits, but restrict himself to the quiet observation of the children, with the exception of cases in which a delay may prove dangerous, leaving necessary talks with the teacher, the giving of advice, and the agreement of minor remedies until the end of the lesson.
6. The school doctor is not authorised to interfere with teaching or give orders to the teaching staff or caretakers.  
The school doctor may convey his opinions on the quantity and quality of the subject matter taught to the pertinent authority.
7. The school doctor should act in agreement with the school administration while at the school.  
Should the doctor and teacher be in disagreement, either may turn to their superiors.
8. The valid regulations on the official competence of official doctors must be observed in relation to medical measures.

## NĚKOLIK ÚVAH O ŠKOLNÍ HYGIENĚ NA PŘELOMU 19. A 20. STOLETÍ

**Abstrakt:** V posledních desetiletích 19. století se mezi pedagogy i lékaři v českých zemích zvýšil zájem o otázky školní hygieny. Tribunou úvah a zamyšlení tímto směrem se stávaly zejména lékařské a pedagogické časopisy. Z diskuse vyplynul jednoznačný závěr – potřeba vytvoření instituce školních lékařů. V krátkém přehledu je přiblížena situace v jiných zemích, zejména pak v rámci tehdejšího Rakouska-Uherska. České země patřily k těm, které sice potřebnost školních lékařů nijak nezpochybňovaly, avšak jejich zavádění postupovalo dosti pozvolna. Nejdříve se s nimi setkáváme ve větších městských lokalitách (zejména v Praze, Brně, Karlových Varech, Opavě atd.), a to ještě zlomkovitě. V příspěvku je pozornost věnována situaci v Praze, která je přiblížena i dvěma přílohami.

**Klíčová slova:** školní hygiena, dějiny zdravotnictví