

To combat goiter, which is now common in a large area of the country, the Government plans to establish a salt monopoly to insure the necessary iodine content in all table salt.

From 98% to 100% of the Bolivian population, including children, suffer from intestinal parasites—hookworm being the most common. Joint commissions of doctors and constructors are being planned, to supervise the provision of latrines for all houses in the affected regions.

A large scale vaccination program is being tried in an effort to conquer typhus, which causes thousands of deaths every year. The establishment of compulsory vaccination against typhoid fever has resulted in a marked decrease in this disease. Smallpox has disappeared almost entirely from urban communities.

It is estimated that 90% of the people suffer from malnutrition. The nucleus of a National Institute of Nutrition has been created, and plans are being made to establish facilities for feeding expectant mothers and children, and also a system of popular restaurants.

A four year public health plan has been formulated calling for the allocation of 12% of the national budget to health purposes. The proportion is to be increased to 20% by the fourth year. A national orphanage-school with a capacity for 700 to 800 children, including war orphans, was opened in May, 1941. In Sucre, 150 abandoned children and war orphans are being cared for; in Oruro, 250, in Cochabamba, 400; and there are National Child Welfare units in Potosi, Santa Cruz, Tarija, Trinidad, Tupiza, Uyuni, Vallegrande, Camargo and Roboré.

To relieve the acute housing crisis, the Department of Public Welfare will soon begin the construction of 150 houses in La Paz, and 50 in Oruro. These projects are only the beginning of a national housing program.

PUBLIC HEALTH PROGRESS IN COLOMBIA

Official Report from the Ministry of Labor, Health and Social Welfare

Colombia has not lagged behind in the steady march of public health progress. The different administrative systems which she has adopted, each seeking to outdo the other, have placed her on an equal position with the rest of the American republics, particularly since the beginning of the Pan American Sanitary Conferences.

At first (some 50 years ago), there existed a central office called the Superior Board of Health, which limited its activities to the distribution of smallpox vaccine and consideration of the public health problems of the Capital. These problems were solved in an empirical or romantic fashion, in spite of the scientific reputation of the members of the Board. This board was followed by a Central Board of Hygiene, and then by the present National Department of Health, which gained in prestige through its increased range of action although as a dependency of various ministries.

After having been a part of the Ministries of Government and Education and Public Health, it became autonomous in 1932 as the National Department of Health. There then began an era of health commissions and units which have brought the benefits of public health to all parts of the country. It is only just to recall, however, that already when the National Public Health Department was a part of the Ministry of Agriculture and Commerce, the Minister at that time, Señor Dn. Jesús del Corral, a man of energy and understanding, had secured the cooperation of the Rockefeller Foundation for a campaign against hook-worm.

When the Ministry of Labor, Health and Social Welfare was created, public health attained its due recognition. The present organization has cooperative relations with such organizations as the Fomento Municipal (Municipal Improvement Fund), which is providing a large number of cities with water supply and sewage systems, and slaughterhouses; the Department of Social Welfare, which exercises supervision over charitable bequests, which in this traditionally generous country reach a considerable amount; the Child and Maternal Welfare Department, which is a model of its kind; and an effective tuberculosis control campaign. It is furthermore well known that Colombia's anti-leprosy campaign is a model from various points of view including treatment, cure, and research, for which it has excellent facilities.

Research.—Colombia has a number of research institutions which place it on a high level in this field. Thanks to the general organization of the Ministry, social problems and those of preventive medicine always find prompt consideration and solution.

Tuberculosis.—The increased range and diversity of activities in tuberculosis control are shown by the statistics. Thus, the number of dispensaries has increased from 3 in 1936 to 4 in 1937 and to 27 in 1940; the number of persons attending the dispensaries has grown from 10,000 in 1936 to 139,854 in 1940. In 1941 an admirably equipped sanatorium was completed in Bogotá, which will be opened in January, 1942. The "La Maria" sanatorium in Medellín is being enlarged.

Yellow Fever.—In yellow fever research notable progress has been made. In 1939 a laboratory was built and fully equipped. The vaccine produced by this laboratory has been requested by a number of foreign countries.

Leprosy.—Much progress has been made in the campaign against leprosy and the National Health Laboratory is producing high quality esters, so that Colombia has an excellent supply of these materials. In fact a number of Central and South American countries have ordered the products of this Laboratory. The welfare of the healthy children of lepers has received attention through the construction of several homes for them, and the three leprosaria of the country have been considerably improved in recent years.

Child and maternal welfare.—The Child and Maternal Welfare Services have been considerably extended, and include *gotas de leche* (milk stations) nursery homes, nursing rooms, kindergartens, children's hospitals, healthy children clinics, school dental services, pre-natal and maternity services. There were more than 800 such institutions in operation in 1940 with a total of 612,492 persons in attendance.

Sanitary commissions.—The local sanitary commissions and units, numbering more than 100, actively carry on two kinds of services, 1, preventive, designed to insure the sanitation of the environment and 2, curative, through the furnishing of medical and social care on a limited basis.

Rural sanitation.—In recent years rural hygiene work has been intensified, especially among coffee plantation workers, and several excellent health centers have been established in the coffee regions.

General health.—Energetic scientific campaigns are being carried on against malaria, yaws, bartonellosis, and venereal diseases. As a further means of improving the general health, the Government is undertaking an active campaign to provide sanitary water and sewage systems in the different cities of the country, and more than 200 such systems are already being installed.

Narcotic control.—An appreciable degree of success has been obtained in the narcotic control campaign, and the Secretary of State of the United States has sent Colombia congratulations for her work in this field.