The Early History of the Arlington County Department of Health

By R. G. Beachley, M.D.*

In 1919 when a health department was first established in Arlington as an arm of the County government, the profession of public health was still in its infancy. Moreover, the idea that protection of the health of the public, let alone its improvement, was a proper function of government was only beginning to make headway in rural areas although generally accepted in cities.

And four decades ago, Arlington was a rural area. The 1920 U.S. census gave the County a population of 16,000. (The 1960 figure was 163,400.) Settlements clustered in a few scattered locations. Government was of the type common to other Virginia counties. A supervisor from each of the three Magisterial Districts (Jefferson, Arlington, and Washington) into which the County was divided joined to form a Board of Supervisors which was the governing body. Constitutional officers performed the major functions of carrying on the business of the County. There were no governmental departments as such, although activities in a limited area had been centralized under a County Engineer who had responsibility for supervision of road construction and maintenance in each of the three Districts. Responsibility for the health of the community rested with a three-member Board of Health: the chairman of the Board of Supervisors, ex-officio, and two physician members.

The chief concern in those days was with the control of a few communicable diseases, primarily smallpox and typhoid, and to a limited degree enforcement of rudimentary environmental sanitation.

The records of the Board of Supervisors give some clues as to how public-health matters were handled in Arlington County prior to the establishment of a Department of Health in 1919. In July 1909, Dr. H. C. Corbett was allowed an annual salary of $350 for his services as secretary of the Board of Health and as sanitary inspector for the County. In April 1910 there was fear that the number of cases of smallpox might reach epidemic proportions, and the Board of Supervisors took steps to institute quarantine measures and directed the sheriff to put the poorhouse into condition to be used as a pest house for cases in which quarantine could not be enforced.

The next year several sanitary inspectors were appointed to serve at

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$3 a day, but they could not have been very effective since in June 1912 the Board of Supervisors ordered the constable of each Magisterial District to inspect all privies within the next ten days and report those which were not properly cared for to the secretary of the Board of Health or the Commonwealth’s Attorney.

In March 1913, the Board of Supervisors, acting under enlarged powers granted by the General Assembly in 1912, adopted the first sanitation ordinance. It provided that: “No privy, vault, sink, cesspool or septic tank shall hereafter be made or rebuilt except in accordance with the regulations adopted by the Board of Health and pursuant to a permit issued by it through the Secretary of the Board of Health.” This was the first move to prevent conditions which might menace the health of the public in contrast to previous actions which had been designed only to correct already existing conditions.

Increasing importance began to be attached to public-health work, but some time was to pass before interest was translated into action. In February 1919 a representative of the Arlington County Civic Federation appeared before the Board of Supervisors to urge the employment of a full-time sanitary inspector. A month later the Board established this position, setting the term of office at four years and the salary at $2,000 a year. The duties set forth by the Board ended with the sweeping statement: “and in general to do all things necessary and lawful in order to keep the said county in a proper sanitary condition.” Robert L. Walker resigned as chairman of the Board of Supervisors to take the job.

Arlington was moving in the direction of a full-time public-health service. The final impetus came from the U.S. Public Health Service.

L. L. Lumsden, M.D., of that service, “the father of full-time public-health service in the United States,” as he is known, and Dr. Ennion G. Williams, Virginia Commissioner of Health, both contributed much to getting this work started here. Dr. Warren F. Draper, on loan from the U.S. Public Health Service to the Virginia State Department of Health, appeared before the Arlington County Board of Supervisors to urge the initiation of the program in the County. By a vote of 2-1, the Board on May 13, 1919, appropriated $750 annually to match Federal funds so that a full-time health officer, “who is to be a regularly practicing physician,” and a nurse might be employed.

J. W. Cox, M.D., USPHS, became health officer for Arlington County on July 1, 1919. He laid the ground work for the development of the Health Department into the active branch of County government which it is today. When he became health officer there was no municipal water supply or sewage disposal system; each house was served by its own individual well and, in many cases, by the most rudimentary type of pit privy. Trash disposal was up to each individual householder. Clinical medical services were nonexistent.
The new health officer began to get his program into operation at once. He was authorized to have a room in the "attic" of the court house equipped for an office and laboratory, and he employed a nurse, Mrs. Minnie A. Rudasill, and a clerk, Mrs. C. W. Lewis. He launched a sanitary campaign and developed a scavenger service. It is said that when the driver for the "honey wagon" failed to show up, Dr. Cox would hitch up the mules and go the rounds collecting night soil himself.

He was granted funds to encourage the replacement of pit type privies with approved structures using cans, and he persuaded the Board of Supervisors to approve formally the regulations regarding the construction and maintenance of sanitary privies which he had prepared. The Board also adopted an ordinance "for the proper control of contagious and communicable diseases." The cause of preventive medicine was further served by the administration of diphtheria antitoxin, and a beginning was made on a rabies-control program with the requirement that all dogs killed by the game warden should be reported to the health officer. By 1923, Pasteur treatments were being given by the Health Department when necessary, and a dog pound had been established under the supervision of the health officer.

In 1920 Dr. Cox employed a school dentist, Dr. J. A. Boston. So far as the records of the U.S. Public Health Service show, this marked the first time in the United States that a full-time school dentist had been appointed for a county.

Before Dr. Cox's first year was out he had won such approval for his work that on May 25, 1920, the clerk to the Board of Supervisors was directed to write to the U.S. Public Health Service urging his return to Arlington for an additional year's service. He actually stayed until December 31, 1923. When he left, progress in public health had been made on many fronts. The need for replacing the scavenger service with a proper system of sewage disposal had been recognized. Construction of some community sewerage systems had begun. A County sewerage system, however, was still a long way off.

Before the end of 1921 a Health Department clinic had been set up in Cherrydale; in 1923 a clinic was constructed in the Del Ray section of Jefferson District, and a clinic was conducted in rented quarters in Clarendon. Infant and maternal health service was thus accessible to each section of the County. In addition to the health ordinances mentioned previously, others had been adopted covering the tuberculin testing of cattle, and for the protection of the water supply. A move had been made to establish a public dump.

These results had not been achieved without opposition: Dr. Cox, whose dedication brought him into frequent conflict with the "unenlightened," was not a wholly popular figure. To some, public-health was still a "new-fangled" notion—a "frill" on which the taxpayer's money should not be
spent. Nonetheless, the Board of Supervisors budgeted $12,000 each year for the Health Department and supplemented this amount from time to time with additional appropriations. One such instance was in 1922 when the Board authorized the expenditure of $500 to match an equal sum from the U.S. Public Health Service for the manufacture of a 2,000-foot film on the health activities of the County. It would be fascinating to see this picture today!

Arlington County's second health officer was Dr. P. M. Chichester, appointed as of February 1, 1924. At almost the same time the County's first health inspector, Norbert Melnick, was employed. This position covered more functions than that of the sanitary inspector: inspections of sources of water and milk supply and enforcement of quarantine regulations were added. Additional health ordinances were adopted by the Board of Supervisors in this year. In 1925 the first plumbing ordinance was adopted requiring inspection of plumbing installations, and the position of plumbing inspector was set up in the Health Department.

The matter of a county-wide water supply was attracting increasing attention as the County became more built up. This dream was finally realized in 1928 when the system designed by and constructed under the supervision of A. L. Phillips went into operation with 36 miles of main and 340 house connections. By the next year the Board of Supervisors was able to order the health officer to close all unsafe wells in the knowledge that an alternative and unpolluted water supply was available.

Sewage disposal remained a major problem in Arlington, growing more aggravated as development became more intense. In 1931, it was still possible for an irate taxpayer to write to Dr. Chichester in these terms:

This letter concerns a ditch that extends between Alexandria and Fort Avenues [7th and 9th Streets, North] and receives drainage from several old septic tanks along the east side of Clarendon Avenue [North Irving Street]. I understand that the attention of the Health Department has been called to it many times before, but nothing seems to have been done about it, beyond a possible "investigation" or two.

So it is still there—open and full of muddy filth. Dogs nose around in it, and our children sometimes fall into it. Rats climb up and down its banks and make slimy trails between it and any accessible cellars. The ditch is about 50 feet from my house. Several houses are much closer to it. In warm weather it pollutes the air with its stench and breeds thousands of mosquitoes. It could easily be the source of disease...

I am one of the property owners in this neighborhood who are ready to take drastic means, if necessary, to get this ditch done away with before summer.

In Dr. Chichester's defense it must be said that he had done yeoman work in correcting many such conditions as this and was in the forefront of the battle to get a proper sewerage system constructed. The voters, however, had turned down a bond issue for this purpose put to referendum in the spring of 1930, and it was not until 1933 when the County took advantage of a State law authorizing participation in the Federal Public Works program that a bond issue of $2,500,000 was approved. Construction of
mains and a treatment plant was then begun. In 1935 there were 139 miles of sanitary sewer with 1,500 connections serving 5,700 people. In 1933 Dr. Chichester had reported that scavenger service was rendered to 2,000 locations (in addition to septic-tank cleaning); in 1962, the last eight privies in the County were done away with through connections to the sewer.

While coping with such basic public-health problems as a safe water supply and proper sewage disposal, the County Health Department gave attention to other matters affecting the community health as well. Dr. Chichester was a firm believer that resistance to disease in later life could be increased by healthy childhood, and since he was medical director for the public schools as well as health officer, he was able to put an extensive child-health program into effect. In December 1924 he arranged to have Dr. R. N. Sutton and Dr. Boston, the school dentist, make a complete survey of all school children in the County. Preschool clinics were held each year in late spring and early summer to point out remedial defects so that they might be taken care of before the child entered school. Health education was carried on in the schools. Good nutrition as a basis for good teeth and general health was stressed. Antify campaigns were conducted. Awards were given to schools with the highest records in percentage of children immunized against diphtheria.

The attack on contagious and communicable disease broadened. Control of milk- and water-borne diseases was approached through enforcement of ordinances, inspection of sources of supply, and public education. Typhoid fever had not been eradicated from the County and antityphoid inoculations were encouraged. Smallpox and diphtheria were not then the rare diseases they have become, and their control frequently met stubborn resistance from individuals. It was a radical step when, in 1925, the Board of Health proposed that all contacts of smallpox cases be required to be vaccinated. As the value of the immunization procedures promoted by the Department of Health was demonstrated through a reduction of the incidence of these diseases, the public was won over.

By the early 1930's the cause of public-health work in Arlington County had come a long way. The staff of the Department of Health had grown to include two nurses, a clerk, and a stenographer, as well as a manager for the scavenger service and an inspector who bore the titles of sanitary inspector, food and dairy inspector, quarantine officer, and plumbing inspector, depending upon which phase of his job he was engaged in at the moment.

The Health Department offices were still cramped quarters in the court house though now more readily accessible to the public since they were on the first floor instead of on the third. There were well-equipped health centers in operation in each of the Magisterial Districts of the County. The 1929 annexation of a portion of the Jefferson District by Alexandria
had meant that the Del Ray clinic was lost to the County. It was replaced by a more modern building in Virginia Highlands.

Dr. Chichester resigned in 1937 to go to the State Department of Health. Mr. Melnick became acting health officer for a short period until the post was filled by Dr. Earle G. Brown, former commissioner of health for the State of Kansas, on May 17, 1937. He left in March 1938 to become health officer of Nassau County, N.Y., and on May 1, 1938, the present health officer, Dr. R. G. Beachley, took office.

On January 1, 1932, the government of Arlington County had changed from the Board of Supervisor system to a council-manager form under the county manager act. So far as the Health Department was concerned, this meant that the Board of Health was discontinued and all responsibility for health matters in the County rested with the Department and the County Board.

Building on the work of previous years, existing programs were further developed, and before the end of the '30s new ones had been added. The first use of X-ray for the diagnosis of tuberculosis by the Department had been in 1932, although TB clinics were conducted as early as 1925 under the supervision of Dr. H. A. Latane. In 1936, a program of X-ray checking and tuberculin testing had been inaugurated in the junior and senior high schools. In 1938, a fluoroscope and an X-ray machine were purchased by the Tuberculosis Association and placed in the Health Department to permit expansion of the case-finding work. No treatment was undertaken at this time although monthly clinics were held.

The first clinic for the treatment of venereal-disease cases in the County was held in space at the courthouse in August 1938. Sessions were held three times a week. The Arlington County Social Hygiene Board made funds available for a medical consultant, Dr. George Cresswell, who served until 1943.

The assistance of the two private agencies cited here is typical of the help which the County Health Department has received ever since the initial resistance to public-health work was overcome. Members of the Arlington Medical Society also have cooperated wholeheartedly with the Department, many of them serving many hours in the various clinics.

A notable advance was the establishment of a County laboratory in 1938 in quarters at the sewage treatment plant. Prior to that time specimens for laboratory examination were sent either to the State Health Laboratory in Richmond or to the laboratory of the National Institutes of Health in the District of Columbia. Facilities of the new laboratory were made available (as now) to private physicians in the County as well as to the clinics conducted by the Department. A new laboratory was built at the present health center on North Edison Street in 1944.

One indication of the advances which had been scored was that Arlington placed 11th in the Nation in the 1937 Rural Health Conservation Contest of the U.S. Chamber of Commerce and the American Public
Health Association. In 1938 it ranked 6th, and in 1939 it won 3rd place. Each year from 1941 through 1944 it received the highest award. Thereafter, Arlington was no longer considered "rural." The County won an achievement award in the Negro Health Week Contest each year from 1939 through 1944.

The war brought increased demands for the services of the Health Department. Its history since that time has been one of expansion: new buildings, new services, and additional staff. The Arlington County Department of Health today offers a well-rounded program to conserve and improve the health of the individual in the community. With the cooperation and support of the State and of private agencies in several fields, this program covers a wide range.

The concept of public-health work as an effort to combat communicable disease has broadened over the years until it is now generally accepted that it is a proper function of government to endeavor to assure good mental and physical health for the entire community. This seems a far cry indeed from the early days when the inauguration of a scavenger service was considered a signal victory!