

## **Clay County Health Department Health Happenings**

### **Special Clay County Sesquicentennial Celebration Edition**

**PUBLIC HEALTH WEEK – April 7 – 13, 2008**

#### **Clay County Leader “created” Public Health in Florida**

**“Nasty, brutish and short”.** That is how life was in Clay County before the development of public health. Poor sanitation, unregulated food processing, lack of control of mosquitoes, inadequate prenatal care, and other poor health conditions led to unnecessary illnesses and deaths. A Clay County leader laid the foundation for public health in Florida. While the 1885 Constitution provided for a State Board of Health, the Board was not established until 1889 when a member of one of Clay County’s founding families, Governor Francis Fleming called for a special session of the Legislature. He wanted the Board of Health established to address the yellow fever epidemic that plagued our area in 1887 and returned with a vengeance in 1888. In that year, about 40 percent of the population fled the Jacksonville area due to a yellow fever epidemic that sickened a third of those who stayed and killed over 400. Governor Fleming had lost several family members to the disease. Florida’s State Health Department was created in 1889, under the administration of the State Board of Health. The Board was empowered to investigate and prevent yellow fever, smallpox, and cholera and to impose coastal and city quarantines. The State Health Officer led the Board headquartered in Jacksonville. The Board studied health problems, administered health services programs, disseminated health information, enforced rules concerning sanitation and communicable diseases. It could also impose coastal and city quarantines. It controlled the Bureau of Vital Statistics, the bacteriological laboratories, the veterinary department with a State Veterinarian, and tuberculosis sanitariums. The Board became the Division of Health under the Department of Health and Rehabilitative Services (HRS) in 1969. It became a separate Department of Health in 1996.

#### **Clay County Health Department Formed in 1941**

Clay County Health Department was officially organized on April 15, 1941 as the Clay/Bradford Public Health Unit. Prior to that time, Katherine Canova, RN, a Public Health Nurse, provided services to Clay County citizens and schools. The first Health Department was located in two rented rooms over a bank in downtown Green Cove Springs. The staff consisted of one nurse, one sanitarian, one clerk, a custodian, a clinic aide and a part-time health officer. Tuberculosis was a major concern during the 1930’s and 40’s and screenings for the disease were done throughout the county from a mobile van.

In 1943, the Health Department re-organized into the Clay Bradford Union County Public Health Unit. Dr. I. R. Abrams served as Health Officer. The population of the County at that time was approximately 10,000. In 1946, Dr. A.Y. Covington became Health Officer. The county’s population swelled with the berthing of Navy ships at the

Green Cove Springs base and a case of smallpox was reported. In 1949, the Health Department trained six members of the Keystone Heights PTA to use audiometers and assist the Health Department in screening schoolchildren.

In 1950, the Clay County Health Department and staff of the U.S. Naval base in Green Cove Springs provided food handler schools for people who worked in food establishments and school lunchrooms. In 1954, hookworm was prevalent in the schools and there were five cases of polio in the county. A mass vaccination program of schoolchildren with the Salk vaccine was performed to eliminate the chance of polio disease among the county's children. Myrtie LeClaire, public health nurse, wrote an article called "Road to Normal Weight" for the local paper to fight obesity. Family planning services also started that year. In 1956, the Health Department staff participated in the Civil Defense Project during a hurricane. In 1958, the Clay County Health Council was formed to address the health needs of rural residents. In 1962, The National League of Nursing deemed Health Council's loan closet as a national model, lending necessary medical equipment to the needy.

In the 1970's, Clay County began a trend of unprecedented population growth that continues to today. By that time, the Health Department staff had increased to 30 employees with six full time and four part time Public Health Nurses. In 1973, Dr. Robert Gillespy Jr. became Health Officer. In 1976, the Clay County Crescent reported that the County Commissioners passed an ordinance requiring businessmen to pay fees for inspections by the Health Department that were formerly "absorbed" by the county.

In 1977, Edward Hayward Stansel became the first appointed Administrator of the Clay County Health Department, with Dr. John Malone serving as part-time Health Officer. During his tenure, Mr. Stansel worked diligently and creatively to improve the health department facilities. The Visiting Nurses Association took over home nursing duties from the Health Department in 1979 and the department refocused on population-based health issues. In 1981, the Green Cove Springs facility underwent a major renovation and expansion. This doubled the size of the Health Department. To meet the needs of the county, other clinic facilities were built or leased in various parts of the county.

1991 saw the retirement of Ed Stansel and the appointment of Nick Chapman as Administrator of the Health Department. The Health Department sent staff to help in the areas of Florida decimated by hurricane Andrew in 1992. When the State Department of Health separated from HRS in 1996, area county health departments formed the Northeast Florida Consortium of County Health Departments. The consortium allowed neighboring health departments to maximize efficiencies and share some administrative services. On April 15, 2004, Nancy Mills became the current Administrator, 63 years to the day from the original initiation of the Clay County Health Department. In 2004, the department opened a special needs shelter for 3 hurricanes; and in 2005 sent staff to assist in areas affected by hurricanes Katrina and Wilma. In 2005, the Health Department led the county through its first comprehensive County Health Needs Assessment. Orange Park Medical Center, the Clay Chamber of Commerce, and the Health Planning Council of North East Florida supported the Health Department in this effort. Upon her retirement

in 2012, Winifred Holland took over as Administrator of the Department. While continuing the ongoing work of the Department of Health, Ms. Holland established teen health centers in two locations for afterschool activities, partnered with local community partners on the Healthiest Weight initiative including the Million Pound Challenge and participated in the statewide initiative for public health accreditation. In 2015, the community health assessment will be conducted to determine the latest data in Clay County and will re-evaluate the Community Health Improvement Plan (CHIP) to continue to move Clay County in a positive and healthy direction.

The Clay County Health Department is an official tax supported agency, receiving funding from both the State and the County. The State of Florida and The Clay County Board of County Commissioners jointly supervise the department and both provide funding. Additional funding comes from State and local fees, grants and medical reimbursement. There are now more than professional and support staff. Additionally there are resources available through contractual agreements (such as Healthy Start) and a corps of "We Care" volunteers. Like other Health Departments in Florida and throughout the nation, Clay clearly recognizes its inability to meet all the needs of the community, due to limitations of staff and financial resources. In response to community needs, the department proactively works on establishing linkages and appropriate outside resources through collaborative efforts, coalitions, agreements, and contracts to either provide or receive services. The Clay County Health Department currently works with more than 85 agencies or organizations in its efforts to address community concerns.

### **What is Public Health and why is it important?**

Modern Public Health (Community or population-based health) can most easily be distinguished from health care provided by private practitioners, walk-in clinics, emergency departments, hospitals, diagnostic centers and specialty clinics by their focus and approach. Public Health prioritizes prevention and wellness while private practitioners, hospitals, etc. are typically concerned with "sickness" and pre-existing conditions in individuals.

This is a concept that sometimes confuses to people today as it has been in the past. In an opening statement of the 1954 Clay County Health Division annual report, Dr. A Y. Covington, County Health Officer wrote, *"Individuals occasionally state that they do not need the services of the Health Department as they are financially able to protect their own families. To those I would as the questions: Do they drink water or milk or do they ever eat out in food establishments? Do they visit public swimming pools? Do they have children attending school? Do they employ maids or cooks? Do they ever attend public gatherings, etc.? Your Health Department, by authority of the State of Florida, is a constant watch dog and through its continued surveillance and inspections eliminated a high percentage of potential dangers noted in the above situations."*

Control of infectious diseases was the major reason for the establishment of public health services and remains a major focus today. Throughout history, as one communicable

disease has been eradicated, another evolves to take its place. Early settlers battled animal-borne diseases such as malaria, dengue fever, and yellow fever.

Each new threat has been matched by a public health response. Through the years, arthropod-borne diseases such as yellow fever, malaria, and dengue fever were reduced through mosquito control programs and quarantines. Hookworm, once estimated to infect 60 percent of the population has almost disappeared through clinic treatment and improvements in public sanitation. Inspection and treatment programs for food, water, and milk plus effective sewage and solid waste disposal programs have cut incidence and death rates for enteric diseases.

Diphtheria and smallpox were the deadliest of the early childhood diseases. Once controlled, polio took their place. Immunization programs eliminated or reduced cases of diphtheria and polio. Most recently, haemophilus influenza type B meningitis became the most deadly childhood killer before immunizations once again stopped its expansion. In 1978, Ed Stansel reported 55-65% of Clay's school aged children were fully immunized against infectious diseases. Today, over 90% of Clay's school aged children were fully immunized.

Syphilis and gonorrhea were once widespread, with syphilis infecting one of every six men tested in the 1940s and over 60,000 gonorrhea cases annually in the 1970s. Both have been reduced substantially, but thousands have contracted AIDS, human papilloma virus and chlamydia.

Public health is now battling new scourges such as penicillin-resistant gonorrhea and other infectious diseases that have mutated to become immune to most antibiotics, such as MRSA (an antibiotic-resistant form of Staph infection). Recent vaccines for herpes zoster and AZT for HIV-positive pregnant women are being administered to curb these diseases. A vaccine to prevent a cervical cancer-causing virus called HPV (Human papillomavirus) is now recommended for children prior to becoming sexually active. Each year brings new diseases, new chronic disease risks, and more natural disasters, like hurricanes and floods. Along with those, preparedness to meet the threat of accidental and intentional disasters has also become a core public health function.

As the risks of death from infectious disease early in life declined, control of chronic diseases has become more important. Public health has focused on the reduction of risks associated with chronic disease (poor nutrition, obesity, substance abuse, tobacco use, and exposure to cancer causing agents in the environment) to help residents live longer, more productive lives. Currently childhood obesity is a major concern. It is the cause for increased numbers of children with diabetes and cardiovascular problems. Public health

forces must be prepared to fight each new threat or new epidemics will spread.



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