program. Through funding of a limited number of carefully
selected projects, information on utilization, enrollment
techniques, capitation rates, and satisfaction levels, among
others, will be gained for populations eligible for the
proposed Family Health Insurance Plan.

4. Venture Capital

Support of promising projects for an initial period
which are applying newly discovered technology, adminis-
trative procedures, or patient care techniques is another
recommended use of project grant funds. Some people
might term this classification as "mad money." In the case
of applying new methods or techniques, selected projects
concerned with operationally testing research findings or
new concepts in inpatient care utilization, paying for
insurance premiums, or supporting a voucher system should
be funded so that experience in these areas is available to
guide current policies and procedures.

5. Preventing or Meeting Health Crises

Support of a rubella immunization program to avert a
nationwide crisis, or the increased supplemental funding of
venereal disease control programs, are recent examples of
how the 314(e) project grant has been deployed to handle
problems of crisis, or near-crisis, proportions. Project grants
have the flexibility to permit swift action to prevent or
meet unusual situations, and this flexibility should be
maintained.

These recommendations represent a call for a planned,
short term, considered use of project grant dollars. To be
most effective, these suggested uses for project grant
programs similar to 314(e) should be a part of a broader
national strategy that encompasses financing systems and
manpower and organizational development programs. When
placed in this framework, relative priorities among the five
proposed uses will become evident, and the benefits of
supportive and complementary decision-making will be
reaped.

NOMINATIONS SOUGHT FOR APHA 1975 AWARDS

The American Public Health Association is seeking nominations for the following APHA Awards
for 1975:
- The Sedgwick Memorial Medal Award for Distinguished Service and the Advancement of
  Public Health Knowledge and Practice—deadline March 1, 1975;
- APHA Awards for Excellence in Promoting and Protecting the Health of People—International
  Field, Domestic Field, and Lecturer. All nominations for the APHA Awards for Excellence
  should be submitted on the prescribed form which appears on p. 323 of this Journal—deadline
  May 1, 1975;
- Edward W. Browning Achievement Award for Prevention of Disease—deadline May 1, 1975.

For complete information concerning these awards, see p. 206, AJPH, February, 1975, issue, or
contact Mrs. Ceci Raslavsky, Associate Convention Manager, APHA, 1015 Eighteenth Street, NW,
Washington, DC 20036, (202) 467-5017.

UNIVERSITY ASSOCIATION FOR EMERGENCY MEDICAL
SERVICES TO HOLD ANNUAL MEETING IN MAY

The 1975 Annual Meeting of the University Association for Emergency Medical Services will
hold its 1975 Annual Meeting May 20—24 at the Bayshore Inn, Vancouver, British Columbia, Canada.
Additional information concerning the meeting may be obtained from: Arthur E. Auer, Executive
Secretary, P.O. Box 1241, East Lansing, MI 48823.
control are analytically extensible to the national level. There seems to be a real debate about desirability of “community control” of health service facilities.\(^5\)\(^-\)\(^10\) Nationally, as well as in Alachua County, local governments have begun to feel responsible for community health.\(^11\) This may be the result of a general public demand for more control over health care,\(^12\) but nationally, as well as locally, consumer participation has had questionable impact. It may also be true that politicians on the local level sense the power that comes with allocation and control of federal money, the scope and magnitude of which has increased with enacted legislation,\(^13\) and recognize future health expenditures as a large pool from which they can draw. In addition, voluntary agencies continue to play an important role in health planning,\(^14\) such as the activities of the Junior Welfare League on the local level, and the American Cancer Society on the national level.

In any event, it is clear that politics and personality today play a major role in medicine and this trend will likely continue as community systems and, concomitantly, medical systems become more complex. All elements of consumer and provider interests need to be taken into account, and it is imperative that consumers develop an awareness of health problems.\(^15\) Such may be the trend with regional health planning. All evidence points to the fact that the key to the future of community health clearly lies in the political sphere: from this perspective, in developing successful and rational health care delivery systems, it is incumbent upon the consumer to develop a higher degree of sophisticated activism; upon the physician to develop a greater sophistication in terms of politicization and the political process; upon the politicians to develop a greater understanding of medicine and medical problems; and upon all to develop a greater understanding of culture and community process.

References


20TH SUMMER INSTITUTE IN WATER POLLUTION CONTROL TO BE OFFERED BY MANHATTAN COLLEGE

Manhattan College will conduct the 20th Summer Institute in Water Pollution Control May 19–23, 1975. Two 1-week courses will be offered concurrently for advanced study in “Biological Waste Treatment” and Mathematical Modeling of Natural Water Systems.

Enrollment, on a preregistration basis, will be limited. Tuition for each of the 5-day courses is $275.

For further information, contact: Donald J. O’Connor, Environmental Engineering and Science Program, Manhattan College, Bronx, NY 10471.
parametric. The health problem must be cast in a more general social framework;
• Finally, evaluation must in fact take place, i.e., these cannot be abstract or textbook principles.

References


BARNARD COLLEGE WOMEN’S CENTER TO SPONSOR CONFERENCE

The Barnard College Women’s Center will sponsor its second academic conference entitled, “The Scholar and the Feminist II: Toward New Criteria of Relevance,” Saturday, April 12, 1975, at Barnard. The papers to be presented at the conference will provide a critique of the assumption underlying traditional scholarship and an exploration of new directions. The relationships between feminist ideology and the research process will constitute the central focus of the conference.

Historian Joan Kelly Gadol, of CUNY, will discuss the social relations between the sexes as a criterion of historical inquiry, and biologist Helen Lambert, of Northwestern University, will analyze contemporary interpretations of sex differentials during the morning general session. Commentary on the papers will be given by Professor Catherine R. Stimpson, of the Barnard English Department. The panel discussion will be moderated by Professor Annette Baxter, of the Barnard History Department.

The afternoon segment will be devoted to seminars organized primarily along disciplinary lines. Each seminar leader will present a short paper designed to elicit group discussion of the problems raised by feminist investigation within a given field.

The conference will be limited to 250 people. Further information is available from the Women’s Center, 100 Barnard Hall, Barnard College, New York, NY 10027. Phone: (212) 280-2067.
Despite this hostility and opposition, the Health Care Association remained effective, providing services and operating under an autonomous administration of workers, consumers, and physicians until 1853. In March, 1853, as part of the wave of reaction in Prussia which followed the uprisings of 1848–1849, an indictment for high treason was lodged against a number of leftist democrats, one of whom was the administrator of the Association. Thereupon the Police President of Berlin, von Hinckeldey, dissolved the Association for “criminal tendencies.” This measure was taken at a time when some 20,000 members were being served by the organization, and the municipal authorities had admitted that its activities were of great benefit to the poor. But the officers of the Association and most of the physicians connected with it were democrats and so politically suspect.10,13

The liquidation of the Association was undertaken by a group of manufacturers, and on April 7, 1853, a local statute was enacted setting up new sickness funds for factory workers. To obtain medical care, members of these funds also had to join the Workers’ Sickness Association sponsored by the municipality. This organization, which at the beginning of 1853 had only 15,000 members, now began to grow. In 1854 its membership rose to 30,896 and by 1863 it had 69,385 members.14

The short lived Health Care Association in Berlin was a casualty of political developments, but even during the 4 years of its existence it demonstrated that a medical care scheme organized cooperatively by workers and administered in terms of their sociomedical needs could provide health services successfully. Both the New York plan and the Berlin Association indicate how deeply the health problems of low income groups are rooted in the structure of their societies, and how the response to these problems tended even then to take forms not dissimilar from those still being proposed and discussed at present.

References
6. A Plan for the Better Distribution of Medical Attendance and Medicines for the Indigent Sick by the Public Dispensaries in the City of New York: Recommended by the Association for the Improvement of the Condition of the Poor. New York, October, 1845. (Available in the Library of the New York Academy of Medicine).

NEW HAMPSHIRE HISTORICAL SOCIETY SEeks INFORMATION ON JOSIAH BARTLETT

The New Hampshire Historical Society is currently sponsoring a project to edit the papers of Josiah Bartlett (1729–1795)—a signer of the Declaration of Independence and a prominent physician in New England. Founder of the New Hampshire Medical Society, Bartlett served as a justice of the peace, a delegate to the Continental Congress, a militia colonel during the Revolution, a justice on the state superior court, and the last president and first governor of New Hampshire.

Supported by the New Hampshire American Revolution Bicentennial Commission and the National Historical Publications Commission, the project will result in a comprehensive microfilm edition followed by a letterpress edition of selected documents. Frank C. Meyers is serving as editor. Persons having knowledge of the existence of correspondence to or from Bartlett or of other papers written or signed by him are requested to contact the Historical Society, 30 Park St., Concord, NH 03301.
outlined in the section, Characteristics of a School of Public Health, and in standards A–F above;  
b. A description and analysis of the decisional processes within the school and the university, including the role of the faculty, students, administration, and other groups in the development, establishment, and evaluation of educational policies and programs and in the selection, retention, and promotion of academic staff;  
c. A description of the methods by which the school maintains a continual self-assessment and monitoring process toward improvements in its educational programs.  

2. For the instructional program,  
a. Explicit statements of educational objectives in relation to the teaching mission of the school, and consonant with standards A and B above. Emphasis at both the program and course levels should be on statements of the outcomes expected, such as student competencies, behavior, and learning;  
b. A description and measures of the quality and quantity of the resources and means by which these objectives are to be achieved, including specification of evaluative criteria, techniques, or procedures;  
c. Evidence of achievement of these objectives including a description and measures of the quantity and quality of results as defined in terms of these objectives. Competencies in both the breadth and depth components of the educational program which are to be measured prior to completion of degree requirements and the evaluation methods employed in such measure-  
ment should be stated;  
d. The manner in which the school seeks to achieve its purposes in the recruitment, admission, counseling, and placement of students and in the provision of specialized activities to meet defined and articulated student needs, such as opportunities for new or modified programs of study.  

3. For the research program,  
a. Statements of the research objectives of the school, including the relationship of research activities to the overall missions of the school and to its educational objectives, with a description of opportunities for student involvement in research endeavors;  
b. A description of the quality and quantity of resources and means by which the research program reaches its objectives;  
c. Evidence of achievement of these objectives.  

4. For the service program,  
a. Statements of the community service objectives of the school;  
b. The means by which these objectives are achieved, as in providing faculty consultation, continuing education, or activities and appropriate functions designed to meet specific constituency needs;  
c. The means of evaluation and the outcomes or results of the service program.  

5. In a summary,  
A statement of strengths, weaknesses, problems, needs, and opportunities, including the school’s recommendations for change to meet presently stated and new objectives, as well as program revisions or innovations under consideration.  

NATIONAL CONFERENCE ON GYNECOLOGICAL CANCER SCHEDULED  

A national conference on gynecological cancer will be sponsored by the American Cancer Society, September 18–20, 1975, in Philadelphia. Sessions are open to all members and students of the medical profession. Advance registration is requested; there is no registration fee.  
The Conference will include discussions of the changing patterns of cancers of the female genital tract and new developments in techniques for its diagnosis and treatment.  
Additional information on the Conference can be obtained by writing: Sidney L. Arje, MD, American Cancer Society, 219 East 42nd St., New York, NY 10017.