Under date of December 20, 1913, the Rockefeller Foundation requested the General Education Board to "consider the desirability of improving medical education in the United States in respect to the training of men for public health service." In compliance with this request, an investigation of the present status of training in public health in the United States was made and subsequently a conference of scientists and administrators interested in the problem was held in the office of the General Education Board. At its close Dr. William H. Welch and Dr. Wickliffe Rose were invited to prepare a memorandum on the subject of an Institute of Public Health. This memorandum was read to the General Education Board by Dr. Welch at its meeting, May 27, 1915, whereupon the executive officers of the Board were authorized to pursue their investigations further and for that purpose to invite the cooperation of the Rockefeller Foundation and the International Health Commission.

Pursuant to this resolution, Messrs. Greene, Rose and Flexner, visited Harvard University, Columbia University, the University of Pennsylvania and the Johns Hopkins University, for the purpose of ascertaining what advantages and disadvantages each presents, should it be decided to establish an Institute of Public Health.

The four institutions above mentioned were selected in the first instance because the Welch-Rose memorandum held that the Institute of Public Health should be established in connection with a university which
already possesses a medical school, a school of engineering and departments of social and general science. Cooperation with city and state departments of health was also stated to be essential. In respect to these criteria, the situation at each of the four institutions mentioned is as follows:

**Harvard University**

An institute of public health connected with Harvard University would be in position to cooperate with the Harvard Medical School, the Faculty of Arts and Sciences of Harvard University, the Massachusetts Institute of Technology, the City and State Departments of Health, a large number of supplementary hospitals, general and special, and other well developed social and sanitary agencies.

The facilities offered by the University through the Faculty of Arts and Sciences in sociology and the general sciences, more or less closely related to the special sciences with which the proposed institute would deal, are more than ample; and the attitude of the faculty in question in the matter of cooperation leaves absolutely nothing to be desired.

Engineering facilities of the same high quality and in the same abundance would be furnished by the Massachusetts Institute of Technology. The alliance already formed between Harvard University and the Massachusetts Institute of Technology, and the working agreement between certain professors in both institutions under which some instruction in public health is now given prove that no friction or difficulty is to be apprehended merely because the two institutions are distinct. The physical separation of the two plants does not constitute a serious obstacle to the full utilization by an institute located near the Medical School of the unsurpassed facilities of the Massachusetts Institute of Technology.
The City and State Departments of Health are well-disposed towards an enterprise of the kind proposed. The City Department, although its head is a political appointee, unquestionably ranks among the best city health departments of the country; the State Department is in vigorous hands and could be confidently counted on for intelligent cooperation. There is no doubt that all the other agencies above mentioned would place their facilities at the service of any institute of public health enjoying the prestige of Harvard University. Thus far, the resources which Harvard commands are in the highest degree satisfactory.

The one serious difficulty arises in connection with the department which is perhaps most necessary to an institute of public health -- the Medical School. The Harvard Medical School has made enormous progress in the last fifteen years. It has procured a splendid set of laboratories for teaching and research in the fundamental sciences, at the head of which have been placed competent, young and progressive medical scientists; it has succeeded in bringing to the same site general and special hospitals of modern construction and equipment in which the Medical School enjoys exclusive teaching and research privileges; unquestionably in the near future other special hospitals needed to complete the plant will be built as part of the same group.

The defects are as follows:

(1) The faculty of the School is not of the same texture throughout. It includes the able and progressive medical scientists above mentioned and a small number of clinical men in hearty sympathy with them. But numerical superiority belongs to the other wing -- to men, mostly clinicians -- who, though locally prominent, ought not to be in position to make or greatly influence the policy of a modern medical school. Appointments of the very first importance continue to go to men of this type.
(2) The faculty organization is not efficient, though, be it said, the question of its reconstruction is now under consideration. Partly in consequence of the type of faculty organization, partly in consequence of the present make-up of the faculty, the school has not succeeded in consistently following a modern policy on the clinical side. The calling of Dr. Cushing and later of Dr. Edsall gave promise of a development which later appointments have not fully sustained.

(3) The two considerations just mentioned render the hospital situation even more serious than it would otherwise be. Harvard has no university hospital. It possesses, however, complete or university rights in certain special hospitals, and privileges, some recently acquired and some sanctioned by tradition, in other institutions. Of the rights which the University possesses in some hospitals the most has not been made. Of the hospitals in which it enjoys privileges, the most important are the Massachusetts General and the Peter Bent Brigham. At the former, the situation from a modern standpoint, is defective. The institution welcomes teaching and research; it is proud of its close affiliation with Harvard; still -- for reasons legal or traditional -- it is not likely to surrender itself to Harvard University, in a way that will enable the University to appoint its staff and to make its medical, surgical and educational policy; that is, it will probably not become an organic part of the Harvard Medical School. The situation at the Peter Bent Brigham Hospital is much better and the outlook more promising, and this is important, because geographically the Brigham is capable of being more useful than the Massachusetts General. The difficulty is that the implications of university relationship do not appear to be as yet fully
grasped. It is not only that a properly conceived relationship has not been formulated in legal terms. It is rather that a certain reserve hampers whole-hearted dedication of the hospital to educational and scientific purposes. To what extent this might be overcome, if the faculty organization of the Medical School were improved and efficient leadership secured, cannot be prophesied. But in any event, as far as the Brigham Hospital is concerned, a good start was made and progress has since then taken place in the right direction.

With respect to the proposed Institute of Hygiene, it must therefore be said that the hearty and enthusiastic cooperation of individuals in the medical faculty could be counted on; the Medical School as a whole cannot be spoken of with equal assurance, and the hospital situation falls short of what could at the outset be desired.
The situation at Columbia is not radically different from that at Harvard, though distinctly less satisfactory. The department of engineering is part of the university—a simplification as far as it goes. This department, the department of sociology, and the general sciences are in equipment and personnel everything that would be needed. The State Department of Health, recently reorganized under Dr. Biggs, is one of the most advanced and progressive in the country. The City Department of Health, perhaps the very best in the country, is well disposed; but difficulty might arise from the competition of other local medical schools, ever on the alert to divide opportunities. The cooperation of private, civic, social and sanitary agencies could doubtless be counted on, as at Boston. On the whole, therefore, thus far what Columbia has to offer is comparable with what Harvard furnished.

The medical school is again the real difficulty. Not so many years ago, an independent institution, the school is not yet by any means of genuine university quality. Geographically it is scattered, and an effort to obtain funds to bring the parts together on a new site has just failed. At present the laboratory branches are located on 59th Street and 9th Avenue; the main hospital on 70th Street and Madison Avenue; other hospitals, more or less utilized, are located in different parts of the city.

The faculty organization is more compact than that of Harvard, but, as at Harvard, effective modern leadership is lacking. Thus, while recent years have brought substantial improvement, there is no certainty that full advantage will be taken of opportunities as they present themselves. The manner in which the Crocker Cancer Fund has been handled is a case in point.

The laboratories on 59th Street are in charge of men of modern training and interest, who would enter enthusiastically and intelligently into the public health scheme.
The hospitals and the hospital situation, however, present several serious problems. With the Presbyterian Hospital, its main reliance, Columbia has an arrangement that looks like the same arrangement that Harvard has with the Brigham; but, as a matter of fact, the Columbia-Presbyterian arrangement is much inferior, because, aside from physical separation, the traditions and associations of the hospital go far to abridge the freedom of the University in organizing its apparent opportunities. While Columbia has complete control of one special hospital and of a large outpatient clinic, the bulk of its teaching must be carried on in hospitals, in which the University is not really free to make policy and appointments and in which infinite tact is constantly required in order that diversity of interest as between medical school and hospital may not appear. The clinical faculty is constituted on the same basis as that of Harvard. One or two men have been imported on a strict university basis. The rest are locally prominent men, absorbed in practice, from whom little can be expected in aid of the public health undertaking.

The Columbia situation may thus be briefly summarized in these terms: the general resources of the University and of the community are rich and varied; but the Medical School does not measure up to the requirements. While the laboratory branches would be most helpful, the clinical opportunities are distinctly unsatisfactory.
Philadelphia

The situation at the University of Pennsylvania is attractive. The University is concentrated on a single, ample campus; departments of science, sociology, engineering and medicine are thus close together, under a single body of trustees. Part of this group is the University Hospital, the staff of which is appointed by the University, though the hospital is -- as is also the Johns Hopkins Hospital -- administered by a different set of trustees. In addition the University enjoys in municipal hospitals the same sort of supplementary advantages that Harvard and Columbia possess. It has an intimate and excellent relationship with the City Health Department. The State Department of Health is sympathetic, though its situation at Harrisburg constitutes a drawback.

Nevertheless, the University of Pennsylvania is, for two main reasons, a less hopeful opening than either of the two institutions already described. The administration of the Hospital is not entirely sympathetic, closely related though the institution is to the University. More serious still, however, is the fact that within the University conservative traditions and influences nullify the opportunities afforded by organization and facilities. The Medical School is, therefore, except in one or two departments, a stagnant undergraduate institution. An effort to break through was made a few years ago, and for a few months it looked as if a group of progressive younger men might gain a position of leadership; but the revolt was soon suppressed, and the old-time line has been restored. An Institute of Public Health, devoted to advanced training and research, would not be congenially located in the University of Pennsylvania.
The Johns Hopkins University

With most of the facilities enumerated in the Welch-Rose memorandum, the Johns Hopkins University is much less well supplied than the three universities already described. Its department of sociology is slight and would have to be supplemented; the general sciences and engineering are modestly developed, but, as they are modern in spirit and up-to-date in equipment, they are perhaps adequate to the main demands that an Institute of Public Health would make upon them. The physical separation of the medical school from the University constitutes a disadvantage, analogous to that presented at Harvard.

The City Department of Health is far inferior to that of Boston, New York or Philadelphia; but the attitude of the authorities assures the University a free hand in utilizing its resources and possibilities, whatever they are. The Assistant Commissioner is, fortunately, a Hopkins graduate in Medicine -- formerly Professor of Pathology and Bacteriology in Western Reserve University. The State Department of Health is well-disposed; Dr. Welch is President of the State Board of Health.

The Medical School is the University's greatest asset. It is a genuine University department, on the clinical as well as on the laboratory side. The faculty is a small body, and, since the introduction of the full-time scheme, entirely homogeneous in character, animated by high ideals and very efficiently led. The Johns Hopkins Hospital is the laboratory of the clinical men -- they determine its educational and scientific policy, and are absolutely free in the making of appointments, as they have been from the beginning. The hospital is now fairly complete in scope. At the moment,
however, there is one serious defect of especial concern to an Institute of Public Health, -- the lack of provision for the care and study of infectious diseases. We are informed that money is now being raised to remedy this defect. Aside from this, the Institute of Public Health would find practically ideal conditions as far as the Johns Hopkins Medical School is concerned.

The situation at Baltimore may then be formulated as follows: The general resources of the University and of the community are inferior -- in some respects much inferior -- to those found in New York, Boston and Philadelphia; the Medical School fulfills the requisite conditions in the highest degree anywhere obtainable.