

Mississippi Public Health Timeline

Public health programs have changed considerably since the Mississippi Legislature established the State Board of Health in 1877. Shifts in health problems that affect the state's population have caused the changes.

Around the turn of the 20th century, Mississippians had little protection against disease other than to be vaccinated against smallpox or flee to a safer place when an epidemic, such as yellow fever, appeared in the community. Leading causes of death for the nation in 1900 were influenza, pneumonia, diphtheria, tuberculosis, and gastrointestinal infections. Public health practitioners employed sanitation, hygiene, and isolation as measures to help curb disease and death.

Public Health Programs

While emphasis on communicable disease control continued throughout the first half of the century, attention soon turned to the state's high maternal and infant mortality rates. In 1935, the passage of the Social Security Act enabled the state to expand services to mothers and children. These services included prenatal clinics, education of granny midwives, immunization programs, and treatment for children with handicapping conditions. As funding resources became available, the Department of Health initiated services such as family planning and fluoridation of water supplies.

Because of improved sanitation, better nutrition, improvements in prenatal care, the availability of new vaccines, and the development of drugs for the treatment of communicable diseases such as tuberculosis, Mississippi began to see a dramatic shift in the leading causes of death. Mississippi's overall death rate dropped dramatically from 15.2 per 1,000 populations in 1918 to 9.7 in 1990. Infant mortality rates decreased from 99.3 per 1,000 live births in 1917 to 11.9 in 1992. Leading causes of death in 1992 were heart disease, cancer, stroke and cerebrovascular diseases, accidents, emphysema and other chronic obstructive pulmonary diseases, pneumonia and influenza, diabetes, homicide, kidney disease, and suicide.

Today's public health challenge lies in maintaining the advances made in communicable disease control and infant mortality reduction while developing strategies to address contemporary killers such as heart disease, cancer, stroke, and AIDS.

Timeline

1799 First public health law enacted.

1818 Health department established for City of Natchez

1846 Smallpox vaccine depot established in Jackson.

1857 Towns empowered to pass sanitary regulations.

1876 Health department created for coast counties.

1877 Mississippi State Board of Health organized.

1882 Law passed requiring medical license.

1888 Free vaccine distributed for use by physicians.

1896 Compulsory smallpox vaccination legislation passed.

1908 State lecturer on hygiene and sanitation employed.

1910 Rockefeller Foundation gave aid for expansion of state health program; this grant was the first of many given over a 25-year period.

Dr. W.S. Leathers appointed State Director of Public Health.

State Hygienic Laboratory established.

Field workers appointed to assist in hookworm and sanitation campaign.

1912 State Sanitary Inspector employed. Bureau of Vital Statistics established.

1916 State Tuberculosis Sanatorium established. Malaria eradication project demonstrated.

1918 Bureau of Venereal Disease organized; this bureau functioned until 1925, when it became part of the epidemiological program.

1920 Bureau of Child Hygiene established; this bureau became Division of Maternal and Child Health in 1938.

Bureau of Public Health Nursing established; it combined with Child Hygiene in 1924 and became a division in 1946.

1921 Supervision of midwives instituted.

1922 State Epidemiologist employed.

1924 Dr. Felix J. Underwood became the first full-time Executive officer of the State Board of Health.

1926 Marriage and divorce registration started.

1929 Preventorium for children replaced the Children's Health Camp as part of the State Tuberculosis Sanatorium.

Industrial hygiene program inaugurated. Division of Industrial Hygiene and Factory Inspection created, and State Factory Inspector employed.

1938 First health department building in state erected in Pike County by the Commonwealth Fund. This marked the beginning of a program which resulted in more than 55 modern health department buildings constructed with the aid of WPA, NYA, federal funds under the Lanham and Hill-Burton Acts, and state and local funds.

1944 Malaria Control Program supplemented with DDT house spraying program.

1946 Additional federal appropriations funded intensified Tuberculosis Control Program.

Cancer Control Program inaugurated in cooperation with American Society for Control of Cancer.

1950 Heart Disease Control Program established.

Health education programs in public schools authorized.

State Board of Health approved fluoridation of water supplies and adopted regulations controlling addition of fluorides to public water supplies as a means of mass prevention of tooth decay.

1954 Walthall County Health Department organized April 1; all 82 counties now had full-time public health departments.

1955 Polio vaccination program inaugurated with the advent of Salk Vaccine.

1957 Law requiring medical certificate for application for marriage license passed.

1958 Dr. Archie Lee Gray became Executive Officer July 1, on the retirement of Dr. Felix J. Underwood.

Public Health Statistical Service and the Division of Vital Statistics combined into Division of Public Health Statistics.

State Board of Health accepted mental health as a responsibility of the total public health organization.

1959 Felix J. Underwood State Board of Health Building, a modern structure costing approximately \$1.5 million, which provided the first accommodations specially designed for housing the state health department was dedicated on April 17.

1962 An Act required safety belts be standard equipment on all automobile models as of 1963.

1966 Measles vaccine became available through public health channels.

With the advent of Medicare, county health departments began to certify as providers of Home Health Services. By June 1969, every county health department had been certified.

1968 Dr. Hugh B. Cottrell became Executive officer of the State Board of Health of July 1.

1969 State Board of Health added German measles vaccine to its weapons against disease and birth defects.

1970 State Board of Health developed and activated a statewide Disaster Plan when multiple killer tornadoes ripped the Delta.

State Board of Health developed a five-year statewide plan for Family Planning Services.

1972 Licensure of childcare facilities began August 1.

1973 Dr. Alton B. Cobb assumed the State Health Officer's position on July 1.

State Board of Health reorganized statewide public health agency into multi-county districts, with policy administration and guidance from the central office in Jackson.

Bureau of Mental Health separated from the State Board of Health as the new State Department of Mental Health.

1976 "Swine" flu vaccine administered to adults over 18, the chronically ill and aged, and later to those under 18. No cases of swine flu reported in the state.

1978 An Act required 90 percent complete immunization of all persons through 15 years of age who attend school.

1982 The legislature renamed the public health agency the Mississippi State Department of Health.

An Act authorized the State Department of Health to require permits for the operation of food-handling establishments.

1984 The State Department of Health declared AIDS to be a legally reportable disease.

1987 State Health Officer assumed responsibility for the Certificate of Need Program after review by the Office of Health Planning and Resource Development.

1990 Public health nurses and physicians gave over 8,000 doses of meningitis vaccine in a four-day period in March to residents of south Pike County to ward off a meningitis outbreak. No other cases were reported in that area for the remainder of FY 90.

1991 An Act amended the Mississippi Emergency Medical Services Act of 1974 to provide authority to the State Department of Health to implement a statewide trauma care system.

The State Department of Health began fighting a syphilis epidemic in Washington County. Staff from the Office of STD Control coordinated with disease intervention specialists in Delta Hills Public Health District III and others to locate interview, and treat contacts, lowering the rate from 331.2 per 100,00 to 223.7 during FY 1991.

1992 The Office of Health Promotion and Education encouraged all Mississippi restaurants to designate at least one-third of their seating capacity as a no-smoking section.

Alton B. Cobb, MD, MPH, State Health Officer since 1973, received the American Public Health Association's prestigious Award for Excellence. He later announced his December 31 retirement, and the State Board of Health appointed State Epidemiologist and Preventive Health Chief Ed Thompson, MD, MPH, as Interim State Health Officer.

1993 The State Board of Health appointed Ed Thompson, MD, MPH, to a six-year term as Mississippi's State Health Officer. Thompson became the first new State Health Officer in 20 years.

1997 House Bill 913 establishes a registry under the auspices of MSDH to collect and analyze data birth defects as the initial public health effort to reduce birth defects in the state.

1998 The Mississippi Legislature establishes the Mississippi Trauma Care System to be operated by the state Department of Health. Once in operation, time to transport trauma victims to appropriate hospital care, especially from rural areas, declines, and deaths from traumatic injury before reaching care in the state fall sharply.

2001 West Nile virus is identified in Mississippi for the first time, after making its first appearance in New York in 1999 and spreading rapidly. Nine West Nile virus death followed in 2002, along with hundreds of cases and more deaths over the next several years, igniting a major public health response and mosquito control effort. West Nile virus remains seasonal threat through today.

2003 Concerns over biological, chemical and radiation terror threats result in MSDH forming a smallpox response plan and vaccinating healthcare personnel in hospitals statewide as a safeguard.

Mississippi is recognized as national leader in childhood immunization rates by the CDC. Mississippi will continue to be a national leader, eventually reaching 90% coverage for school-aged children in essential vaccination areas.

MSDH announces its Newborn Screening program to detect genetic defects in newborns.

2005 Hurricane Katrina devastates south Mississippi. MSDH becomes the first state to receive and distribute emergency supplies from the CDC's Strategic National Stockpile to Mississippians displaced or affected by the hurricane. Basic health care, infrastructure, food and water supplies in coastal Mississippi all have to be rebuilt or restored while ensuring the health standards are met. MSDH helps coordinate 1,400 non-emergency personnel and materials to aid in the response.

2009 H1N1 influenza spreads worldwide and becomes a global pandemic. Mississippi sees one of its earliest flu seasons, with cases rapidly rising in August and peaking through October. MSDH provides free flu vaccinations and partners with schools to deliver flu vaccinations to 500,000 school-age Mississippi children.

2020 COVID-19, a new coronavirus variant, arrives in Mississippi after causing increasing numbers of illnesses worldwide. MSDH mounts the largest public health response in its history to address vaccine distribution, overwhelmed hospital capacity, and healthcare worker safety. More than 10,000 deaths from COVID-19 will be confirmed in the state by the end of 2021.