Abstracts of Lectures

He was an Assistant Director of Hygiene, War Office, February 11, 1930 to February 28, 1934, Professor of Hygiene, R.A.M. College August 18, 1935 to February 28, 1938, and Commandant and Director of Studies R.A.M. College March 1, 1938.

He was awarded the O.B.E. in 1923, created Officer of the Order of St. John in 1937, and received the Jubilee Medal in 1935. He was made K.H.S. April 15, 1935. He took the D.P.H. Belfast in 1913.

In his younger days he was an Irish Rugby International, being capped three times. After retirement, he was appointed Medical Superintendent of Queen Mary’s Hospital, Roehampton, and in 1946 was appointed Ulster Agent in London.

He served in France from September 1914 till the end of the war. Three times mentioned, he was awarded the D.S.O. and M.C. and the 1914 Star and Clasp; the British War and Victory Medals.

In the later war he proceeded to France as a D.D.M.S. on June 11, 1940, but unfortunately from force of circumstances he came home in ten days’ time.

“A good sound Ulster man and fine fellow.”

Abstracts of Lectures

Excerpts from a series of Autumn lectures given at the Royal Institute of Public Health and Hygiene in November 1950.

The Contribution of the Blind to the Community

by

W. G. Askew, O.B.E.

People mistakenly think of the blind as being in a special class, or as being all alike, but in fact they fall into many groups. Some have never seen; some who have seen are now totally blind or can see large objects or distinguish between light and dark; and some have never had more than a minimum degree of sight.

The cause of blindness and the age at which it occurs has its personal effect, but the individual still retains his own temperament, his own interests and aptitudes; and it is important to realize that he is, in fact, very much like everyone else except that he does not see.

The Blind Persons Act of 1920 defines a blind person as one who is so blind as to be unable to perform any work for which eyesight is essential, and this definition has since formed the basis on which blind persons are registered by local authorities...

There are many misconceptions about blind persons. It is not true, for instance, that the memory of a blind person is inherently superior, nor that his sense of hearing, touch, taste and smell are more acute. What is true
is that because of the difficulties, or, in a totally blind person, the impossibility of dividing mental impressions from visual observations, these senses are used as much as possible to fill in the gaps, and it is accordingly right to say that blind persons make a better and different use of these other senses. Contrariwise, there is a misconception that blindness of itself impairs either mental or physical fitness, or both. The true fact is that blindness is a handicap, but this handicap can be, and in innumerable cases has been, overcome. But the blind, like sections of the community, possess wide variations in skill, in knowledge, and in ability, and this inevitably means that there are variations in the use to which the remaining degree of vision is put and any compensatory adjustments are utilized. Education, rehabilitation and training all contribute to the conquest of blindness, and employment—which is the natural sequence of this rehabilitation and training—enables blind persons to live happy and cultured lives, and to make their full contribution to the life of the community.

After giving instances of training for the blind at St. Dunstan's, and elsewhere, and also examples of blind people who have made their way in many vocations, Mr. Askew concluded: "I admire more than I can say the guts demonstrated by so many in accepting the onset of blindness, and the courage shown by them in tackling their re-education, their re-training, and the many problems that beset them; and it is because of these things that I again say that they are entitled to command our respect and admiration for the way they have achieved their Victory over Blindness."

THE ROLE OF CHEMISTRY IN RELATION TO PUBLIC HEALTH

BY

C. J. REGAN, B.Sc., F.R.I.C.

The need for the use of chemistry in other sciences is evidenced by the many categories of chemists now working in the various fields; we have, for instance, physical chemists, biological (or bio-) chemists, agricultural chemists, metallurgical chemists, chemical engineers, and so on: and all these types have some influence on my subject today—the role of chemistry in relation to public health.

Nutrition.—Possibly it is in association with the biologist that the chemist has rendered the greatest service to humanity. Together they have shown that life is a series of chemical reactions. The period of the recent world war saw theories and views about human nutritional requirements put to an acid test . . . Until the beginning of this century it was believed sufficient to ensure that man had, for his bodily sustenance and health, only protein, fat, carbohydrate, water, sodium, calcium, iron and chlorine. Whilst, as a generalization, it is still true that the most prominent of the nutritive requirements is the need for energy (i.e. calories), the importance of other aspects, such as protein problems, vitamin problems, and mineral problems, has been increasingly recognized as they have been more intensively investigated. . . .