“The Rest Haven Preventorium”

*Sick children need to be made well. That is our job. In our 30 years, we never have turned away a child in need of medical attention, regardless of the amount of support his family could afford.*

--Gladys Worden, superintendent, Rest Haven Preventorium

Since 1920, San Diego’s Rest Haven Preventorium had cared for children whose health was at risk. On a twelve-acre lot in the “Lemon Villa” tract of East San Diego, a hospital campus provided rest and nourishment for the “up-building of anemic and debilitated children” thought to be in imminent danger of developing tuberculosis.

Pulmonary tuberculosis, caused by the contagious germ “tubercle bacillus,” killed an estimated 110,000 Americans annually in the early 1900s. Without modern antibiotics, TB killed two out of three people infected. Adult victims were often secluded from society in “sanitariums”—self-contained communities known as “waiting rooms for death.”

For children exposed to TB there was a better option. The “preventorium” movement advocated special hospitals where sickly children were given a carefully prescribed diet of healthy foods, exercise, hygiene, and fresh air—all thought to prevent the onset of the dreaded disease. Nathan Strauss—the owner of Macy’s department store and preventorium advocate—claimed that the new institutions would “snatch children from the certain doom of tuberculosis.”

In October 1920 the San Diego Tuberculosis Association opened the Rest Haven Preventorium at the site of a recently closed colony for tubercular adults. The adult program had failed after financial and political difficulties. The TB Association was anxious to try again with “pre-tubercular” children. Dormitories and nursing facilities were renovated to care for at least twenty children at a time.

Rest Haven’s director was Florence H. “Ma” Mead, the wife of Dr. Frances Mead, who was a member of the San Diego Board of Health. Mrs. Mead hired nurses and staff and devised the admission policy for the new facility. Children aged three to twelve years in anemic condition or those who had been exposed to TB were considered for admission. Patient referrals from physicians were encouraged.

For parents who could afford it, $45 as month was charged; in practice, most children received free care. The newly admitted patients were segregated for two weeks from other children while the nurses watched for symptoms of measles, whooping cough, or other infectious diseases.
Despite the precautions, occasional outbreaks of contagion led to quarantine of the entire facility for weeks at a time.

The children of Rest Haven followed a rigidly-controlled program. Proper nourishment required at least one egg daily, 1 ½ to 2 quarts of milk daily, 11 servings of fish or meat weekly, cottage cheese twice a week, and twice daily servings of fresh fruit and vegetables. Weight gain was considered a critical monitor of health.

The children stayed at the preventorium for several months or up to one year. Their families were rarely seen; Rest Haven rules permitted parental visitation every other Sunday from 3:00 to 5:00 in the afternoon. Mandatory child-rearing education for the parents accompanied the two-hour visits.

When the children returned to their homes, follow-up visits from a Rest Haven nurse would check the patient’s progress. Occasionally, when an under-weight child returned to Rest Haven, nurses would blame the parents, charging that “ignorance, carelessness or poverty” had led the children to “slide downhill again” and all the work at the preventorium had become “love’s labors lost.”

Financial difficulties plagued Rest Haven at the start. Mrs. Mead fought the money problem aggressively by initiating a charity ball to create an endowment fund and to raise the institution’s visibility in the community. The Rest Haven Ball, held at the Hotel del Coronado around St. Patrick’s Day, became a major social event for San Diego and continued annually until World War II. The institution also received major funding from the Community Chest (precursor to the United Way) and California Christmas Seal program.

In 1938, with the financial difficulties temporarily at bay, Rest Haven opened an isolation hospital at its campus, intended to prevent unexpected outbreaks of infectious disease. Designed by noted local architect Frank W. Stevenson, the Spanish Colonial facility had space for 25 young patients with separate wards for boys and girls. Plate glass partitions permitted nurses to view each room and terraces provided ample opportunity for “health-giving sun baths” and supervised recreation.”

While Rest Haven thrived, the concepts of tuberculosis “prevention” had begun to fall from favor. By the 1940s, the National Tuberculosis Association had adopted the position that no form of holistic care could prevent on the onset of TB once infection had taken place. At the same time, the rapid development of antibiotics after World War II, led to a marked decline in the disease, particularly among children.

As medicine superseded prevention, the national preventorium movement also declined. San Diego’s Rest Haven would be the last survivor of eight preventoriums in California. With fewer children exposed to TB, Rest Haven began admitting young victims of asthma, rheumatic fever, or simple undernourishment. But after the death of president Florence Mead in 1949, the end of the institution was in sight.

In January 1951, the San Diego Community Chest dropped its funding of Rest Haven, explaining that “social needs change” and that Rest Haven had operated at 50 percent capacity for several years. A few months later the directors of the institution now known as the Rest Haven Convalescent Home, voted to close its doors at 4000 54th Street. The physical assets were sold and a foundation established in its place.
The spirit of the preventorium survives today in the Rest Haven Children’s Health Fund. Still headquartered locally, the fund provides resources for health related services for children in San Diego and Imperial counties.