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YOUR COMMUNITY'S HEALTH

Annual Report of

The Public Health Federation

Health Division of the

Council of Social Agencies and the Community Chest

Cincinnati and Hamilton County

312 WEST NINTH STREET

CINCINNATI, OHIO

DECEMBER, 1946

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THE PUBLIC HEALTH FEDERATION
(Of Cincinnati and Hamilton County)

All Public and Private Health Agencies in Hamilton County are Represented by Two Delegates Each to

PUBLIC HEALTH FEDERATION
Division of Community Chest

Meets annually to receive reports, discuss work and elect officers

COORDINATING COMMITTEE
Officers, Members at Large, Chairmen of Councils, Health Commissioners, Official Representatives of Professions - Medicine, Dentistry, Nursing, Pharmacy.
Meets Monthly

COUNCILS

- Cancer Council
- Child Hygiene
- Day Nursery Section
- Clinics
- Diabetes
- Health Education
- Heart
- Mental Hygiene
- Nutrition
- Mouth Hygiene
- Housing (Better Housing League)
- Nursing
- Tuberculosis (Anti Tbc. League
- Social Hygiene (Social Hygiene Society

Each Council is made up of the professional and lay people interested and meets on regular dates, usually monthly.

PURPOSE - TO COORDINATE ACTIVITIES OF PUBLIC AND PRIVATE AGENCIES, PREVENT DUPLICATION, PROMOTE SOUND COMMUNITY HEALTH PLANNING, RESEARCH AND EDUCATION.

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This is the Coordinating Committee, the governing Board which directs the affairs of the Federation. Some members were not present at this monthly meeting.

THE FEDERATION—ORGANIZATION AND PURPOSES

The Federation is made up of representatives from all local public and private health agencies, hospitals and clinics, from the organized professions of medicine, dentistry, nursing, and pharmacy, and of interested lay persons. Its purpose is effective teamwork for community health planning, elimination of duplication, and meeting new public health needs as they arise.

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Achievements In Improving The Health Of Our People Are Outstanding

In 1900 the life expectancy at birth was 49 years. Now it is 65—a gain of 16 years. No mean achievement!

This increase in the average life span has resulted largely from the spectacular decreases in death rates from communicable diseases shown in the following chart.

These remarkable results are due to many factors, such as:

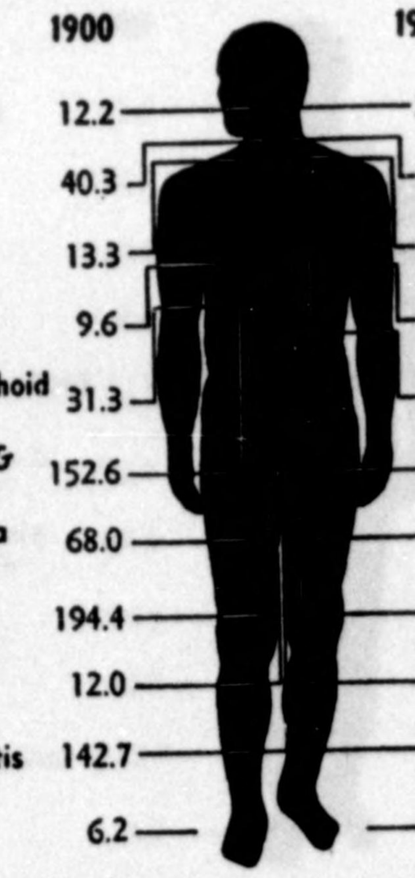
Improvement in sanitation, the standard of living in general and nutrition in particular.

Advancements in medical science and in the practice of medicine, dentistry, nursing, and pharmacy; and more adequate hospital care.

The work of public health departments and private health agencies in putting into effect the knowledge brought to us by the medical sciences.

DEATHS FROM SELECTED CAUSES

U. S. Registration States - per 100,000 Population



Decrease in rate		1900	1940	*Percent decrease*
10.0	Whooping Cough	12.2	2.2	82%
39.2	Diphtheria	40.3	1.1	97%
12.8	Measles	13.3	0.5	96%
9.1	Scarlet Fever	9.6	0.5	95%
30.2	Typhoid & Paratyphoid Fever	31.3	1.1	96%
123.9	Pneumonia (lobar & unspecified)	152.6	28.7	81%
38.8	Broncho-pneumonia & bronchitis	68.0	29.2	57%
148.5	Tuberculosis	194.4	45.9	76%
10.1	Dysentery	12.0	1.9	84%
132.4	Diarrhea & Enteritis	142.7	10.3	93%
5.1	Malaria	6.2	1.1	82%

Our own community has experienced similar improvements in the health of our people.

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LIFE CAN BE MADE STILL SAFER, HEALTHIER, AND HAPPIER BY:

1. *Increased income for unskilled wage earners* so that they can maintain a minimum healthful standard of living.

In March, 1945, the cost of such a standard for a family of four in Cincinnati was approximately $1,700, but an estimated 30% of Cincinnati families had incomes of less than $1,500.

2. *Better nutrition.* Too many families still do not have the foods essential to the achievement of optimum health. This is due in part to insufficient income and in part to indifference, to ignorance of the known facts about diet or to faulty selection of foods and bad food habits. The sharp recent increase in food costs intensifies the problem for families living on marginal budgets.

3. *Making better use of the medical and health knowledge we already have.* More mothers can survive pregnancy, more infants can be saved, the health of children can be improved, the acute contagious diseases can be further checked, tuberculosis and the venereal diseases which still take a heavy toll of health and life can be brought under better control, the havoc of mental and nervous disorders can be reduced—by more adequately financed services of official health departments and private agencies, by better distribution of medical care and by more effective education for mental and physical health.

OUR COMMUNITY NEEDS A MASTER PLAN FOR HEALTH

The Metropolitan Master Plan for the physical and economic development of the community is nearing completion. It is an achievement of large proportions and constitutes a tribute to the vision of our public officials in the metropolitan area—particularly the City Council, the City Manager and the City Planning Commission of Cincinnati.

Now we need a Master Plan for Health. Like the Metropolitan Master Plan, it would not be something fixed or final. It would be, rather, a chart and a guide for future developments in the field of public health—elastic and adjustable to changing knowledge and changing needs. Developed by our leaders in public health, hospitals, and in the medical and allied professions, it would represent their best thinking as to things needed and goals to be sought.

With their approval and cooperation, the Federation proposes to ask the community's health leaders to join in developing a Master Health Plan. It cannot be done hurriedly. It will require careful fact gathering, time, and thought. Such a plan must be comprehensive but at the same time practicable and within the means of the community to finance.

The following illustrate the kinds of problems that would be considered in master planning for health:

1. Provide better distribution of medical care.

2. Complete the State Hospital Survey, supplemented by study of certain local hospital and clinic problems for which the solutions cannot be expected from a state-wide Survey.

3. Make the necessary additions and improvements to the General Hospital for which bond issues have been passed, and secure for the Hospital adequate equipment and staff so that it may be used to capacity.

4. Arrange practical provision for supplying the services of the General Hospital on equal basis without red tape to all the people of Hamilton County.

5. Provide more adequate financial support to the College of Medicine so that the General Hospital may be adequately staffed and Cincinnati maintained as a leading medical center.

6. Improve the facilities for the training of nurses; promote the enrollment of students in nursing schools; establish in the College of Nursing and Health a school of public health nursing.

7. Construct the new County Home and Chronic Disease Hospital for which a bond issue of $3,500,000 was passed in 1941. Secure an additional bond issue, if necessary, in view of existing costs. Give consideration to increasing the capacity of the chronic disease division to 500 beds. Provide adequate equipment and staff.

8. Utilize all suitable space at the Dunham (Tuberculosis) Hospital so that its capacity may be increased to 600. Provide the funds and the staff necessary for the purpose.

9. Increase financial support of our City and County Health Departments to bring the per capita appropriation up to the minimum accepted standard for preventive services.

10. Urge legislation to provide for a single, integrated "City-County" Health Department to serve the entire Hamilton County area uniformly.

11. Intensify "all-out' attacks on two major enemies of health—tuberculosis and the venereal diseases; and on enteritis, especially among white babies.

12. Review school health services and school health education to determine whether the present programs are adequate for City, County and Parochial Schools.

13. Expand the community's program in general health education, including a neighborhood plan for stimulating the interest of citizens in health.

14. Improve sewage disposal and eliminate stream pollution.

15. Provide an effective ordinance for smoke abatement and vigorous enforcement.

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16. Implement a workable program that will rid our community of slums.

17. Develop a centralized safety program to include industrial, traffic and home safety.

18. Expand the program of mental hygiene service.

19. Control the rat problem.

20. Extend the program for the eradication of weeds.

THESE ARE SOME OF THE THINGS DONE DURING THE YEAR BY THE FEDERATION AND ITS COUNCILS

The Federation

1. *Selective Service Medical Histories.* Completed its war services of securing for examining physicians pertinent medical facts, recorded by social and health agencies, bearing upon physical and mental fitness of Selective Service registrants.

2. *State Mental Health Program.* Worked with other organizations, with some success, to secure needed additional funds for the operation of State mental institutions and for the improvement of wage standards and the elimination of the 12-hour day for attendants.

3. *State Hospital Survey.* Aided hospital officials and the State Director of Health in securing appropriation by the Legislature for a State-wide Hospital Survey.

4. *Housing and Health.* Published a report on housing and health with recommendation for federal and State action on housing.

5. *Home Accidents.* Organized Joint Committee to initiate campaign against home accidents, which are responsible for more than half of all the deaths from accidental causes. Participating organizations—the Safety Department and the Health Department of Cincinnati, the Traffic Safety Council, the American Red Cross, the Academy of Medicine, and the Federation.

6. *Mortality Studies.* As one part of its varied activities, the Public Health Federation has given much study to community health problems which are reflected by mortality experience. The Federation's interest in mortality research was prompted 15 years ago by the challenge of Cincinnati's high death rate among large American cities. The rate of dying has been carefully explored in two directions: By comparing data (1) for Cincinnati and 12 other selected United States' cities and (2) for census tracts in Cincinnati.

The first studies were for the 3 year period, 1929-31. The second studies here referred to were for the 3 year period, 1939-41.

The Report on Comparative Study of Mortality in 13 Cities (1939-41) by Williams S. Groom was completed during the year and distributed by the Federation.

Highlights of Findings of Mr. Groom's Studies

Appendicitis

In the 10 years from 1934 to 1943, the resident death rate from appendicitis in Cincinnati dropped from 17.6 to 4.9 per 100,000 population. This decrease of 72% followed a joint educational campaign by the Academy of Medicine and the Federation.

Gastro-Enteritis

In 1929-1931, Cincinnati's death rate from this cause was higher than the average of 13 large American cities by 56% for Whites and 51% for Negroes. By 1939-1941, our death rate had decreased substantially so that for Negroes our rate fell below average, but despite persistent efforts by the Cincinnati Department of Health and by private health agencies our White rate for the more recent 3 year period was still 50% above the average.

Tuberculosis

From 1929-1931 to 1939-1941, our resident death rate decreased 35% for Whites and 34% for Negroes. Our White death rate is now down to the average of the 13 cities included in our mortality studies, but our Negro death rate is still 30% above average and is nearly six times as high as our White death rate.

The problem of tuberculosis among Negroes is particularly acute at ages 15 to 30 where their death rate is about 18 times as high as that of White persons in Cincinnati.

Fatal Accidents

Accidental deaths in industry and traffic in Cincinnati are not significantly different from the average for other cities, but our home accident death rate is excessive. This appears to be caused partly by the higher than average proportion of older persons in Cincinnati's population. But even after adjustment for differences in age distribution, our abnormally high home accident death rate among persons over 65 is challenging, especially so from falls which caused half of all our accidental deaths in 1945.

Total Deaths from All Causes Are Average

While Cincinnati appears to have higher than average death rates from some causes, we have lower than average

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rates from other causes so that when our total resident death rates for all these causes were combined they were practically the same as the averages of the 13 cities for both Whites and Negroes in the 1939-1941 period studied.

The Report on Mortality by Geographical and Economic Areas of Cincinnati (1939-1941) by Dr. Floyd P. Allen has now been completed and is being prepared for publication.

Significance of Dr. Allen's Studies

When published, the results of these studies by census tracts will set forth not only the changes which have taken place in local rates from the leading causes of death, but also the significant implications of economic and social conditions affecting illnessand mortality in the community.

7. *Smoke and Health.* Published report on relation of smoke to health, with recommendation for smoke control ordinance that will accomplish results similar to those achieved in St. Louis.

8. *Health Education.* Continued community education for health through:

Bi-Monthly Car Cards.

Monthly posters to factories.

Weekly radio program consisting of music and brief health messages.

Daily Save-A-Life article in Times-Star.

Weekly Health-O-Gram in Post.

Weekly "Grandma Wise" health message in suburban papers.

Monthly Health Bulletin read by Parent-Teacher Association Health Chairmen to their Clubs.

Bi-Monthly Family Cupboard leaflet to families of low income.

Monthly Health Leaflet to Negro Health Clubs.

9. *Chronic Disease.* Preliminary report of study made by Dr. Floyd P. Allen and Mrs. Joseph M. Gantz was issued. Final report and recommendations in process of completion.

10. *Tax Levies.* Assisted in the campaign for the levies voted on in the November election, particularly for those involving health or hospital services.

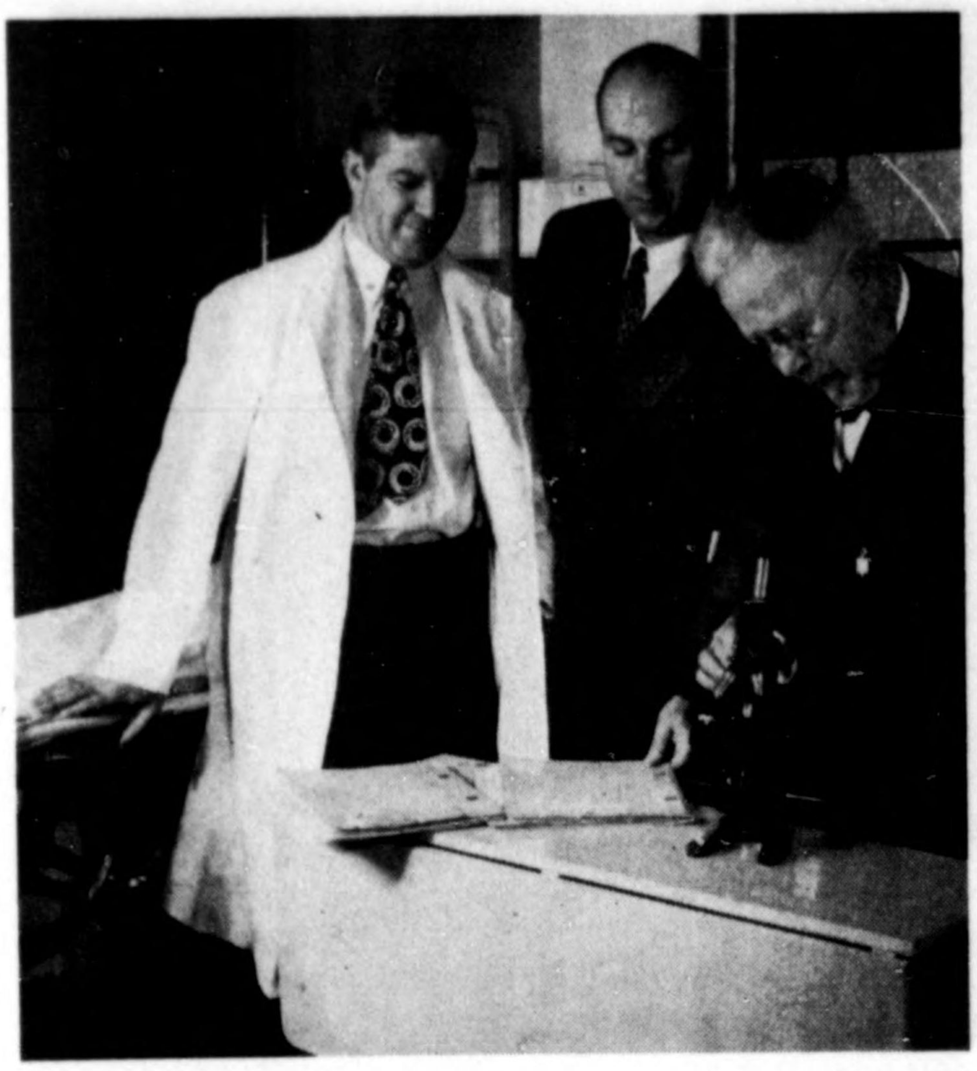
Failure of the City tax levy poses a serious situation involving all City functions. Those of greatest import to health are the General Hospital and its Out-Patient Department, the College of Medicine and the Health Department.

THE COUNCILS—Highlights of Their Activities

Cancer Control

***Chairman*—JOHN B. HOLLISTER**
***Secretary*—FLOYD P. ALLEN, M.D.**

In cooperation with the Tumor Clinic Staff of the College of Medicine and with the local unit of the American Cancer Society organized a Detection Clinic for the examination of patients.

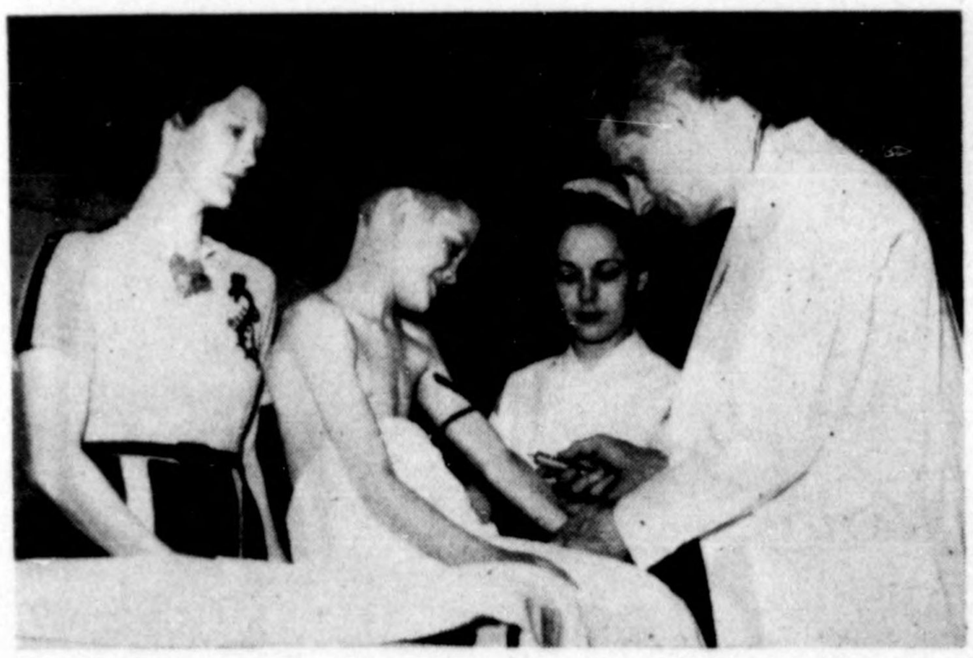


Dr. Benjamin Felson and Dr. Charles Barrett, Director of Tumor Clinic at General Hospital, and Dr. David Philipson, Vice Chairman of the Cancer Council.

Child Hygiene

***Chairman*—ROBERT A. LYON, M.D.**
***Secretary*—MRS. JEANNETTE JACOBS**

Review of the community's program for child health, including a special study of trends in the incidence of diphtheria and suggestions for the most effective possible control of this disease.



Dr. Robert Lyon, Chairman of Child Hygiene Council, immunizing child against diphtheria.

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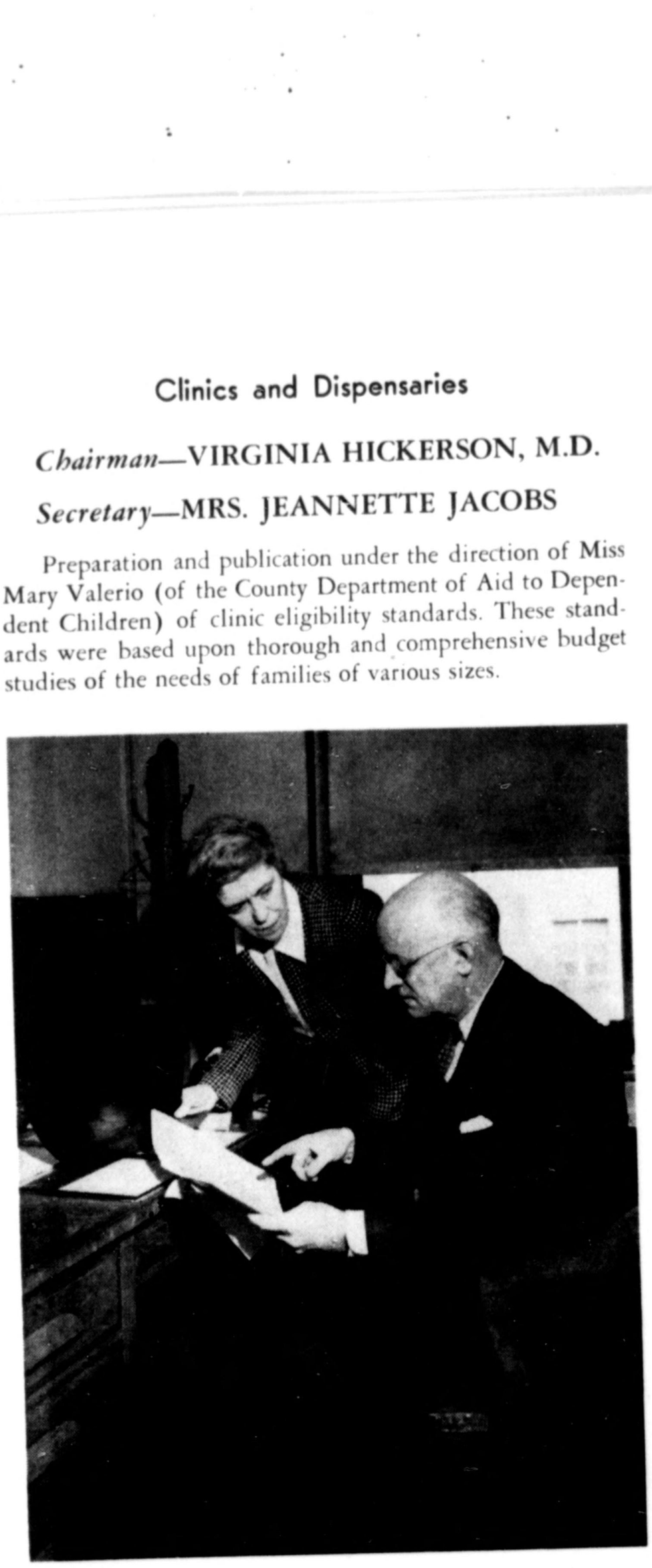
Clinics and Dispensaries

Chairman—VIRGINIA HICKERSON, M.D.

Secretary—MRS. JEANNETTE JACOBS

Preparation and publication under the direction of Miss Mary Valerio (of the County Department of Aid to Dependent Children) of clinic eligibility standards. These standards were based upon thorough and comprehensive budget studies of the needs of families of various sizes.



Dr. Virginia Hickerson, Chairman of Council on Clinics and Dispensaries, in consultation with Dr. Jerome Zeigler, Director of the Shoemaker Clinic.

Diabetes

Chairman—GEORGE M. GUEST, M.D.

Secretary—MRS. JEANNETTE JACOBS

Cooperation in the organization of a lay association known as the Cincinnati Diabetics' Association; and in the reëstablishment at the General Hospital of a Diabetes Instruction Service.

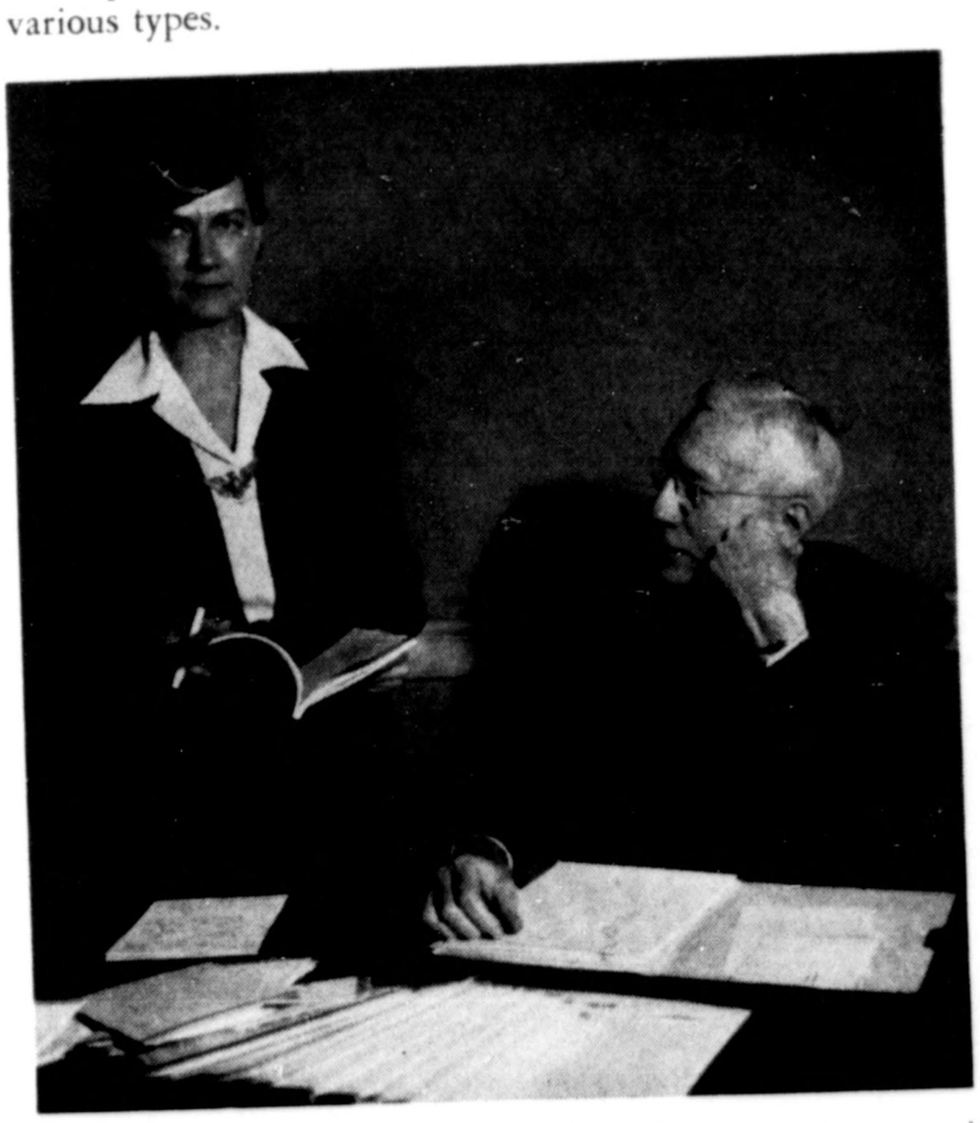
Dr. George Guest, Chairman of Council on Diabetes, at meeting of Cincinnati Diabetics Association with Eldon Park, Association President, Dr. Elliott P. Joslin, noted diabetes authority of Boston, Dr. William Muhlberg, President of Cincinnati Board of Health, Dr. Cecil Striker, Past President of American Diabetes Association, and child patient.

Health Education

Chairman—HELEN COOPS, Ph.D.

Secretary—MRS. JEANNETTE JACOBS

Inauguration of a study in cooperation with the school systems and the College of Education (University of Cincinnati) to learn what is being done in school health education; prize contest for best health education material of various types.



Chairman of Health Education Council, Dr. Helen Coops, and William S. Groom, Federation's volunteer Director of Health Education.

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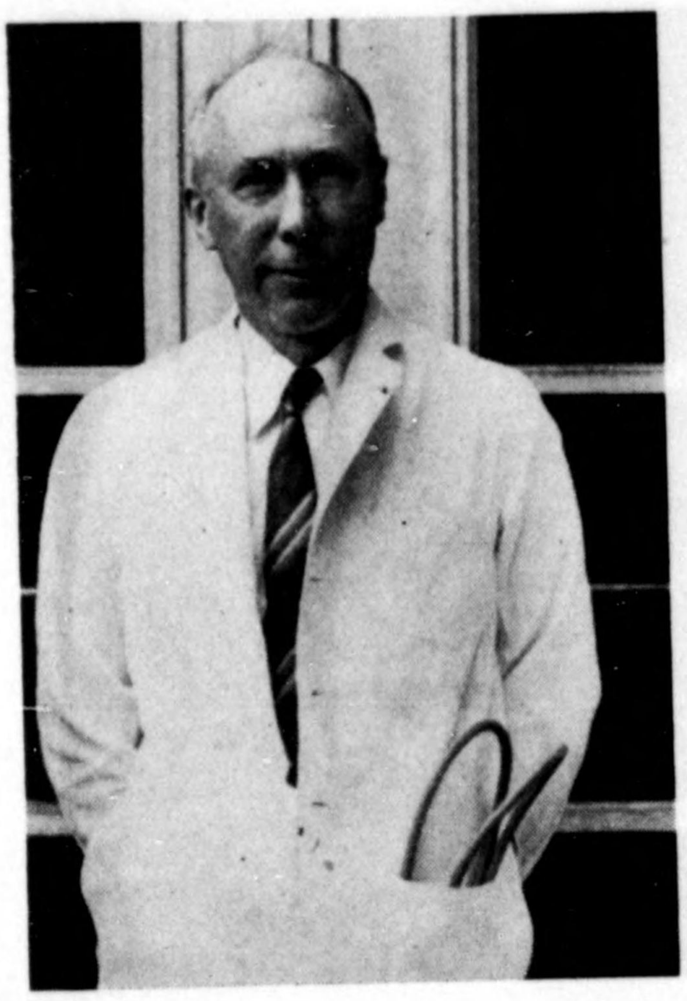
Heart

President—M. A. BLANKENHORN, M.D.
Secretary—FLOYD P. ALLEN, M.D.

Aside from its usual activities in clinical service, the Heart Council has been laying the ground work for a stronger lay education program on heart disease of middle life and older ages. The effort to develop a body of material that will be informative and at the same time promote greater individual participation in alleviating the serious effects of cardiovascular impairments in later adult life is one of the greatest tasks ever to be undertaken by this Council.



Dr. Marion A. Blankenhorn (Professor of Medicine, College of Medicine, University of Cincinnati), Chairman of Heart Council.

Housing (The Better Housing League)

President—THOMAS M. GEOGHEGAN
Exec. Secretary—BLEEKER MARQUETTE

Presentation of a plan to meet the housing emergency, especially as it affects veterans. Action that followed: The City's temporary housing program (620 units being built in Cincinnati by the Cincinnati Metropolitan Housing Authority), establishment of the Emergency Housing Bureau to register and place applicants, appointment of the Cincinnati Committee to Expedite Housing. The County's plan for veterans' housing came about through an appropriation by the Ohio General Assembly.

Efforts to bring about national and State legislation essential to an effective local program.

Thomas Geoghegan, President, discusses phases of the League's work with Mrs. Ruth Stant, Home Advisor of the Better Housing League.

Mental Hygiene

Chairman—HENRY LEDERER, M.D.
Secretary—MRS. JEANNETTE JACOBS

Continued programs of education; worked in cooperation with the Federation Staff on efforts to improve the State mental hygiene program.

Dr. Henry Lederer (standing), Chairman of Mental Hygiene Council, and Dr. Milton Rosenbaum, Acting Director of the Central Clinic (organized by the Federation in 1923) at the General Hospital—and patient.

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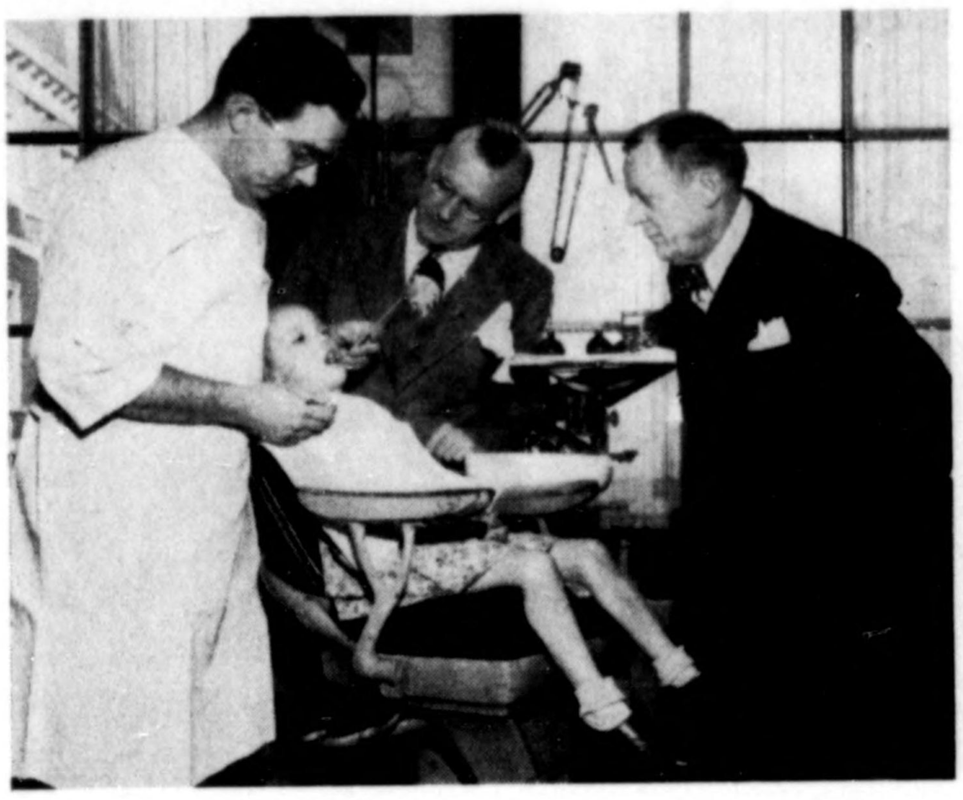
Mouth Hygiene

Chairman—J. A. STUNTEBECK, D.D.S.
Secrettary—MRS. JOSEPH M. GANTZ

Cooperated actively in the Summer Round-Up examinations and the Children's Dental Health Day activities, for which it arranged an exhibit. The Council continued to be much concerned as to the inadequacy of dental services to the low income group in the free and part-pay category



Dental operator, Dr. W. J. Johansmann, examining child in school clinic; Dr. E. Horace Jones, Director of School Dental Clinics, and Dr. J. A. Stuntebeck, Chairman of Mouth Hygiene Council.

Nutrition

Chairman—ELEANOR R. MACLAY, M.S.
Secretary—RUTH ROTH

A well trained nutritionist, Miss Ruth Roth, has been added to the Staff of the Federation—thanks to the generous cooperation of the Anti-Tuberculosis League. Her function is to direct the nutrition program under the supervision of the Council.

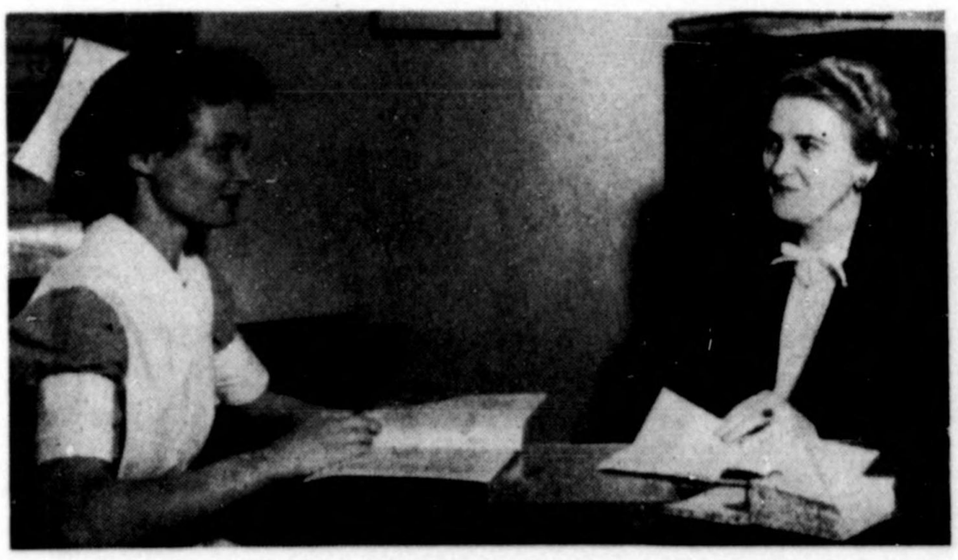
Conducted a vigorous Better Breakfast Campaign, report of which was published by the Cereal Institute and about 800 copies given nationwide distribution; study made of a local institution for the aged with recommendations resulting in better feeding program; began sampling study of low income families to determine effect of rising food costs on family diets.

Federation's nutritionist, Miss Ruth Roth, and Chairman of Council on Nutrition, Miss Eleanor R. Maclay

Community Nursing

Chairman—LAURA ROSNAGLE, R.N.
Secretary—MRS. JOSEPH M. GANTZ

Devoted considerable attention to a study of an opinion survey relative to nursing in general with a view to developing a continuing public relations program. Cooperative relationships have been established with District No. 8 of the Ohio State Nurses' Association and the League of Nursing Education towards the solution of pressing problems. Lectures on Public Health Nursing to student nurses have continued. The Committee on Enrollment carried on an active campaign to enroll students for Spring and Fall classes. Counseling material on nursing is now in preparation.



Miss Laura Rosnagle, Chairman of Council on Community Nursing, interviewing student nurse.

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Social Hygiene (Social Hygiene Society)

President—CARL A. WILZBACH, M.D.
Executive Secretary—ROY E. DICKERSON

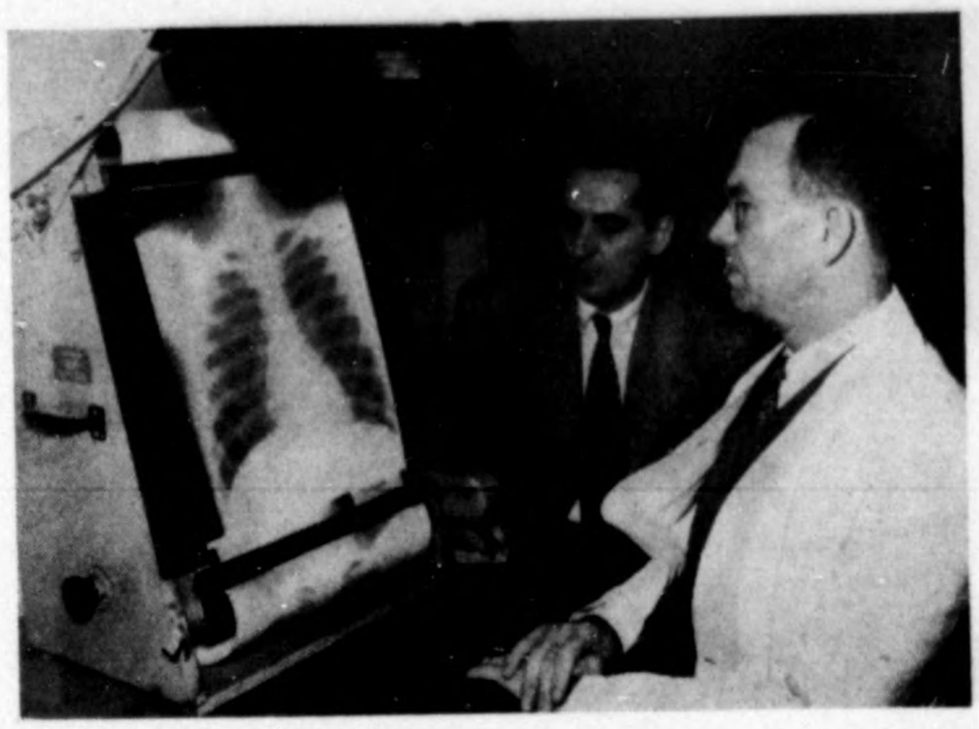
Major activities—parent education, teacher training, sex education, venereal disease control, health education, prevention of juvenile delinquency, and education for marriage and family life, in cooperation with many local agencies. Among the notable programs are: Training Courses at Teachers College; lectures in connection with physical examinations given by school authorities and Cincinnati Health Department to all Juniors in Public and Parochial High Schools; the Home Study Course for parents regarding proper sex guidance for children of all ages; premarital and marital counselling; conferences with boys and girls referred from the Juvenile Court.

Dr. Carl A. Wilzbach, President of the Social Hygiene Society (standing) in consultation with Roy E. Dickerson, Secretary.

Tuberculosis (Anti-Tuberculosis League)

President—DAVID HEUSINKVELD, M.D.
Director—W. K. CURFMAN

Approximately 18,500 x-rays provided for industrial workers, college students, and high school students; cooperative program whereby Council on Nutrition is financially supported; merger of Anti-Tuberculosis League and Christmas Seal Committee; successful campaign on tax levy for support of Dunham Hospital; continuation of health education activities at an accellerated rate; operation of eleven Negro Health Clubs.



Director W. Kenneth Curfman and President, Dr. David W. Heusinkveld of the Anti-Tuberculosis League, viewing a chest X-ray.

OTHER DEVELOPMENTS

1. In addition to its 13 Councils, the Federtaion has 20 committees actively at work on special health problems.

2. The adoption by the Academy of Medicine of its ten-point program marks a notable forward step in public health in our community, as does also the inauguration of the Medical Indemnity Plan providing pre-payment for medical care for obstetrics and surgery.

3. *Exhibits of work of Public Health Education.* The following displays of the Federation's work were presented:

The work of the Council on Nutrition at meeting of American Dietetic Association held in Cincinnati in October.

Health education material of the Public Health Federation and diabetes education material of the Council on Diabetes at meeting of the American Public Health Association held in Cleveland in November.

4. *Legislation.* The Federation worked with other organizations to secure passage of:

The National Hospital Act—to provide federal grants to aid States to meet their hospital needs.

The National Mental Health Act—to provide training for psychiatric personnel and to promote mental health research and education.

5. Assisted in preparation of material for study of the Child Guidance Home, completed during the year.

6. Representatives from various cities (Rochester, N. Y.; Pittsburgh, Pa.; New York City; Honolulu; Washington, D. C.) studied the Federation's work during the year. Inquiries came from many other communities asking about the

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Federation's organization and activities or requesting its various reports.

7. The Federation Staff assisted on these projects:
Rat Control
Negro Health Week
Girls' Health Week
The Famine Emergency
Institutes for Teachers in the Public and Parochial Schools
Grade courses of health instruction in the Public Schools

OUR VOLUNTEERS

The most valuable asset the Federation has is its volunteers. Mrs. Joseph M. Gantz gives full time and Mr. William S. Groom part-time service of the highest quality. Without them our work would suffer irreparably.

Our appreciation to our Coordinating Committee, Council Members, and agency representatives, totalling in all 500 active participants, cannot be too frequently or too earnestly expressed.

OUR AFFILIATED AGENCIES

The Federation could accomplish nothing worth while except through the unparalleled cooperation of its affiliated agencies. The agencies listed below in reality *are* the Federation.

Professional Organizations

Academy of Medicine
Academy of Pharmacy
Cincinnati Dental Society
Dist. No. 8, Ohio State Nurses' Association

Public Health Agencies and Departments

American Red Cross
Anti-Tuberculosis League of Cincinnati
Babies' Milk Fund Association
Better Housing League
Board of Health of Cincinnati
Cancer Control Council
Central Clinic
Children's Heart Association
Cincinnati Association for the Welfare of the Blind
Cincinnati League for Hard of Hearing
Citizens' Anti-Weed Committee, Inc.
College of Medicine
College of Nursing and Health
Disabled American Veterans
Dist. Board of Health, Hamilton Co.
Fresh Air and Convalescent Aid Society
Glendale Community Nurse Association
Health Education Council
Heart Council
Hospital Care Corporation
Infantile Paralysis Com., Hamilton Co.
Longview Social Service League
Lower River Nursing Association
Maternity Society
Norwood Department of Health
Public Dental Service Society
Reading Department of Health
Shoemaker Health and Welfare Center
Smoke Abatement League
Social Hygiene Society
Union Bethel Clinic
United Jewish Social Agencies
Veterans Administration, Regional Office
Visiting Nurse Association
Wyoming Community Nurse Association

Hospitals, Sanatoria, Etc.

Bethesda Hospital
Children's Hospital
Christ Hospital
Children's Convalescent Home
Cincinnati Hospital Superintendents Council
Cincinnati General Hospital
Deaconess Hospital
Dunham Hospital of Hamilton County
Good Samaritan Hospital
Hamilton County Home and Chronic Disease Hospital
Home for Incurables
Jewish Hospital
Longview State Hospital
Maple Knoll Hospital and Home for the Friendless
Our Lady of Mercy Hospital
St. Francis Hospital
St. Mary's Hospital

Social and Civic Agencies and Departments

Boy Scouts
Catholic Big Brothers League
Catholic Big Sisters
Catholic Charities
Catholic Women's Association of Cincinnati
Children's Home
Christ Child Day Nursery
Cincinnati Council of Parent-Teacher Associations
Cincinnati League of Women Voters
Cincinnati Public Schools
Cincinnati Woman's Club
Citizenship Council
Council of Churches
Dept. of Sociology, University of Cincinnati
Dept. of Physical and Health Education, University of Cincinnati
Division of Public Relief
Emanuel Community Center (Day Nursery)
Family Service
Federation of Catholic Parent-Teacher Associations
Girl Scouts
Good Will Industries
Hamilton Co. Council of Parent-Teacher Associations
Juvenile Court
Kiwanis Club
Lions Club
National Council of Jewish Women
Norwood Service League
Ohio Humane Society
Parkway Day Nursery
Public Recreation Commission
Rotary Club
Ruth Lodge No. 18
Santa Maria Institute
Salvation Army
Women's Auxiliary, Academy of Medicine
Woman's City Club
Y. M. C. A.
Y. W. C. A.

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

COORDINATING COMMITTEE

This is the active governing body of the Federation. During the past year it had the following membership:

Officers

WILLIAM J. GRAF, M. D.
President

CECIL STRIKER, M. D.
First Vice-President

CARLOS SCHOTT, D. D. S.
Second Vice-President

WILLIAM S. GROOM
Honorary Secretary

MRS. MAUDE NEELY ROSS
Treasurer

Members at Large

Richard S. Austin, M. D.
Ann Buntin-Becker, D. D. S.
Julien E. Benjamin, M. D.
William Z. Burkhart
Omar H. Caswell
R. E. Clarke, M. D.
John Cronin
John W. Dalzell
Stanley E. Dorst, M. D.
Sol. H. Freiberg
Harold C. Freking
Lester S. French
Mrs. Joseph M. Gantz
Otto P. Geier, M. D.
Carl D. Groat
Henry Hooper
Very Rev. Msgr. August Kramer
Rev. Robert S. Lambert
T. J. LeBlanc, Sc. D.
Neil H. McElroy
Leonard R. Minster
William Muhlberg, M. D.
Herman J. Nimitz, M. D.
Mrs. John B. F. Randolph
T. A. Ratliff, M. D.
Mrs. Elizabeth C. Reid
Robert Rothenberg, M. D.
Judge Louis J. Schneider
L. Howard Schriver, M. D.
Murray M. Shoemaker
Merrill F. Steele, M. D.
J. D. Stover
E. O. Swartz, M. D.
Charles H. Urban
Mrs. Joseph T. Ware

Ex-Officio Members

Carl A. Wilzbach, M. D.
Health Commissioner, Cincinnati

E. H. Schoenling, M. D.
Health Commissioner, Hamilton County

Honorary Member

A. C. Bachmeyer, M. D.

Divisional Councils

Cancer Control
Chairman, John B. Hollister

Child Hygiene
Chairman, Robert A. Lyon, M. D.

Clinics and Dispensaries
Chairman, Virginia Hickerson, M. D.

Diabetes
Chairman, George M. Guest, M. D.

Health Education
Chairman, Helen Coops, Ph. D.

Heart
M. A. Blankenhorn, M. D.

Housing (Better Housing League)
Chairman, Thomas M. Geoghegan

Mental Hygiene
Chairman, Henry Lederer, M. D.

Mouth Hygiene
Chairman, J. A. Stuntebeck, D. D. S.

Community Nursing
Chairman, Laura Rosnagle, R. N.

Nutrition
Chairman, Eleanor R. Maclay, M. S.

Social Hygiene
(Social Hygiene Society)
Chairman, Carl A. Wilzbach, M. D.

Tuberculosis
(Anti-Tuberculosis League)
Chairman, David Heusinkveld, M. D.

Special Delegates

Academy of Medicine
William O. Ramey, M. D.

Cincinnati Dental Society
J. J. Wittenberg, D. D. S.

Cincinnati Academy of Pharmacy
Howard J. Lawson

District No. 8 Ohio State Nurses' Association
Mrs. Josepha K. Lott, R. N.

FEDERATION STAFF

Executives

BLEEKER MARQUETTE, Executive Secretary
WILLIAM S. GROOM, Director of Health Education (Volunteer)
FLOYD P. ALLEN, M.D., Associate Sec. and Director of Research
MRS. JOSEPH M. GANTZ, Associate Secretary (Volunteer)
MRS. JEANNETTE JACOBS, Assistant Secretary
RUTH NEELY, Assistant Director of Health Education
RUTH ROTH, Secretary, Council on Nutrition
EVA STEPHENSON, Research Assistant

Secretaries

ELEANOR L. FEHL
VERONICA WARD-SNYDER
FANNY SACHS
GLENDEENE KLING

Prepared by Bleecker Marquette
Publication of Report paid for by special contributions

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FINANCIAL STATEMENT
PUBLIC HEALTH FEDERATION

For Year Ended May 31, 1946

Balance May 1, 1946		$ 604.43
Receipts		
From Chest	$26,076.00	
Other Income	2,011.16	28,087.16
TOTAL RECEIPTS		$28,691.59
Disbursements		
Executive and staff salaries	$18,629.61	
Communication and transportation	443.95	
Street car fare	3.10	
Travel	60.93	
Telephone and telegraph	372.30	
Express, freight, storage, etc.	7.62	
General Administration	4,758.46	
Books, periodicals, etc.	206.26	
Dues, memberships and assessments	45.00	
Postage	572.31	
Mimeo	468.95	
Stationery	288.45	
Health Education	835.10	
Monthly Bulletin	341.28	
Annual Meeting	288.33	
Car Cards	1,712.78	
Property charges	451.22	
Insurance	39.12	
Furniture and Fixtures—Repairs	46.70	
Furniture and Fixtures (new)	365.40	
Miscellaneous	4,079.19	
Council on Diabetes	992.91	
Medical Survey Program	1,215.51	
Cancer Council	519.34	
Nutrition Council	951.61	
General miscellaneous	399.82	28,362.43
Balance, May 31, 1946		$ 329.16

Acknowledgment of Gifts

We express our gratitude to the Union Central Life Insurance Company for substantial contributions to our Heart Council and to our Diabetes Council, and to the Ohio National Life Insurance Company for contribution to our health education work.

DESIGNATORS

Atkins, C. H. M. and Warner L.
Atkins Realty Co.
Austin, Dr. and Mrs. Richard S.
Bartlet, Ralph H.
Benjamin, Dr. and Mrs. Julien E.
Bradford, Granville M.
Brestel, Carol
Brown, Mrs. Frances Isham
Brown, Karline
Caldwell, Genevieve
Cincinnati Bickford Tool Co.
Dill, Mr. and Mrs. Malcolm H.
Dunie Printing Co.
Dunie, Robert L.
Etienne, L. A.
Floyd, Mr. and Mrs. F. E.
Freiberg, Mr.* and Mrs. Sigmund
Freiberg, Mr. and Mrs. Sol. H.
Gantz, Mr. and Mrs. Joseph M.
Gardner Publications
George, John
Gore, Mr. and Mrs. Frederick E.
Gray, Co. The G. A.
Greenebaum, Dr. and Mrs. J. Victor
Harper, Miss Lolita
Heinsheimer, Mrs. E. L.
Hernett, Arlipp E.
Holmes, Eleanor A.
Huttenbauer, Mr. and Mrs. S.
Jacobs, Mr. and Mrs. S.
King, Miss Elizabeth
Krolfifer, Rev. Julius F.
Kuhn, Mrs. Simon
Locke, Jean
Maclay, Eleanor R.
Martin, W. S.
Marx, Werna
Meacham, Mr. and Mrs. Standish
Mitman, & Sons, Harry
Monesmith, Helen
Penn, Clara L.
Ragland, Fannie L.
Ravine, Dr. and Mrs. Wm.
Rawson, Marjorie
Root, June A.
Rowe, Mrs. Casper H.
Schroeder, Irene
Semmons, Mr. and Mrs. Herman
Schroder, Mr. and Mrs. Wm. J.
Shulofer, Mrs. Mae S.
Strauss, Louise W.
Streit, W. K.
Taylor, Mr. and Mrs. Guy B.
Taylor, Mary E.
Titus, Mary S.
Tooker, Louise K.
Upson, Mark
Wagner, A. H.
Ware, Anna Budd
Warner Elevator Mfg. Co., The
Westheimer, Mr. and Mrs. Irvin F.
Wilzbach, Carl A., M. D.
Wise, Isaac M.
Wulfekoetter, Lillie
Zenner, Dr. Philip
*Deceased

The above persons designated the Federation in contributing to the 1945 Community Chest Campaign.

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A7

PUBLICITY AIDS

Social Hygiene Day is NEWS.

You will find the editors of your community newspapers and the local radio stations and commentators receptive to your material.

The purpose of this memorandum is to help you take maximum advantage of their cooperation by making it easy for newspapers and radio stations to get the news from you.

While you will probably get the best coverage through the services of a professional publicity person, good results can be obtained without such help. If you can enlist the voluntary services of a publicity director from one of your participating agencies or a friendly reporter, so much the better. However, the enclosed material was prepared primarily for committees without professional services.

Well in advance of your meeting, work out a complete publicity schedule of news stories, feature stories, editorial comment and so on. Prepare a release date for each.

Personal contact with managing and city editors, reporters and departmental editors is helpful. If possible, make an appointment with the editor, tell him about your plans, suggest specific features and offer background material for editorial comment. Let him know about the features you have in mind and their probable release dates so that space can be allocated in advance where necessary.

Don't forget that the editor will consider not only the importance of your activities, but also of the persons who will speak at your meetings and endorse your program. An impressive sponsor list will facilitate newspaper cooperation. Use local names, especially of leading people, liberally in all your releases, including those you adapt from samples in the kit.

NEWS STORIES

The advances and spot news releases contained in this kit are necessarily only skeleton outlines, since we do not know the actual names, titles, places and program content of your meeting. They are to be retyped, following the sample release form in the kit with details filled in, further local facts added and sent to each paper in your community. Start the releases about half the way down on the first page. Use only one side of the paper, double-space throughout.

The first advance release should go out about four weeks before Social Hygiene Day. Further short advance stories, announcing program developments, committee assignments, new sponsors, etc., sent periodically according to your schedule, will help build up your meeting.

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The spot news story on the meeting itself should reach the papers, together with texts of the most important speeches, the day before the meeting. Best coverage will result if this meeting is covered by reporters. Make sure that an invitation and press tickets are sent to all papers. Have someone present to meet the press. Give reporters the text of all speeches, the names of speakers and their titles and affiliations and a summary of the purpose of the observance.

FEATURE STORIES

You will probably be able to place at least one feature story during the weeks preceding February 5. Unlike spot news stories, released by you to all papers, each feature idea should be offered exclusively to one paper. If there are several papers in town, suggest different features to each. In most cases, the editor will assign a reporter to write such a story. Arrange this by calling on the editor or by writing to him to suggest a specific feature. Help the reporter assigned to the story to gather material. Enlist the cooperation of sponsors to get him access to facts. Make sure that the Social Hygiene Day angle is included, along with a build-up for your meeting.

Here are some feature possibilities:

AN INTERVIEW with a leading health officer on your community's VD control program. Is VD prevalence rising? Are more cases being reported in the early infectious stages? How are young people affected? How do statistics compare with pre-war years? With 1944, when U.S. achieved its lowest all-time rate?

A STORY on your Health Department's epidemiological (case-finding) investigators, who trace the sources of infection. How do they operate? How do they protect the city's health?

AN INTERVIEW with the Health Officer or head of the local Medical Society on the question: Does the very speed of penicillin cure lead to recklessness about reinfection? How has rapid treatment operated in the drive for VD control?

A REVIEW of the findings of the rapid treatment center in your community. Is there a "revolving door" operating under which those cured leave only to be reinfected? Contrast rapid treatment with older sulpha and arsenical methods.

A STORY on how your community's VD program is conducted--including clinics, follow-up, tracing sources of infection, blood tests, legal aspects.

A STORY on the role of the home, the church and the school in combating sexual promiscuity--perhaps a roundup based on interviews with a leading clergyman, a noted educator and a parents' association leader.

Before proposing such feature stories to the editor, be sure the officials or other individuals involved agree to the story and will cooperate.

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15-Minute Radio Script

(INTEREST A LOCAL RADIO STATION TO LET YOU PRESENT THIS PROGRAM. GET AS GOOD AN HOUR AS POSSIBLE, A WEEK OR SO BEFORE SOCIAL HYGIENE DAY. INVITE A PROMINENT EDUCATOR AND A LEADER OF A PARENT TEACHER GROUP, OR WOMAN'S CLUB, TO READ THE SCRIPT. BEFORE SUBMITTING SCRIPT TO RADIO STATION, RETYPE IT, DOUBLE SPACE, FILLING IN BLANKS TO MEET LOCAL NEEDS.)

ANNOUNCER: VD means Venereal Disease. It also means Very Dangerous. This is true despite the fact that during wartime, combined efforts brought rates down to an all-time low. It is true, despite the fact that the wonder-drug, penicillin, permits unprecedented rapid treatment. Today VD is counter-attacking. Incidence is rising throughout the country. To alert Americans to the dangers and to enlist their support behind a broad preventive program, Social Hygiene Day, sponsored by the American Social Hygiene Association, will be observed in thousands of cities Wednesday, February 5. Social Hygiene Day will be marked here by a rally at ---(time and place) sponsored by (list local sponsors). This is a movement in the interest of public health and better community living. It commands the support of every forward-looking man and woman in our community. Tonight (adapt to time of broadcast) in connection with preparations for Social Hygiene Day, ---(name of station) is privileged to present two outstanding authorities in a discussion of social hygiene education for our young people. ADD BRIEF BIOGRAPHICAL NOTES ON YOUR LOCAL SPEAKERS). And now here is ---(name of Parent-Teacher Association leader).

PARENT: As an educator, Dr. ---, I'm sure that you are concerned as I am over the alarming increase in venereal disease that has followed the close of war.

EDUCATOR: No one who has the interests of youth close at heart could fail to be shocked by the news that VD is skyrocketing around the country. Most people don't know it but young people are the chief sufferers from VD. More than half of new cases reported affect the age group from 15 to 30, according to the American Social Hygiene Association.

PARENT: That in itself is serious enough to spur immediate action against VD by parents and teachers, Dr. ---.

EDUCATOR: It certainly is, but more than that, VD is not only a threat to health. Its prevalence is a manifestation of other troubles. Unlike other communicable diseases, VD is social in origin. It spreads through promiscuity in sex behavior. When rates rise, it is a signal of restlessness, instability and insecurity in the lives of our people. If we want to get at root causes, we have to get the whole community into action.

(more)

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PARENT: You're absolutely right. That's why we are initiating a special Social Hygiene Day observance here Wednesday, Feb. 5, at ---(date, time, place). Official and voluntary agencies are planning the meeting together. We are going to spotlight public attention on the dangers of VD and enlist citizen support behind a year-round program of action.

EDUCATOR: That is a splendid project. Too many people consider VD just a problem for doctors. Naturally, it's the function of the physicians and health officers to find and treat cases of infection. But it's the job of the whole community to see that there are less cases to find. What kind of a program will be presented at the Social Hygiene meeting for follow-through action in the community?

PARENT: It's our view that the No. I job today is prevention. We're in favor of streamlining our preventive measures to bring them in line with the important achievements already made in diagnosis and treatment.

EDUCATOR: What exactly does the committee mean by prevention. That's such a broad term...

PARENT: Prevention does cover a very broad series of actions. It means provision of safeguards to protect young people from situations leading to promiscuity. That calls for adequate recreational and cultural outlets so that our young people will have opportunities for wholesome activities. It means vigorous support of law enforcement against prostitution. It means knowledge of the need to avoid exposure and it means education to promote sound attitudes toward sex and stable family life.

EDUCATOR: A job that big can only be handled through teamwork. All sections of the community will have to work together, each contributing its part, if we're to reach our goal. Where do you intend to place your major emphasis?

PARENT: While we press forward on every line of attack against VD, we're going to give special attention to educating the younger generation, the citizens of tomorrow. If we can give more and more of them sound preparation, we'll make permanent advances in our fight to Stamp Out VD.

EDUCATOR: Highest medical authorities agree that we must find the way to educate youth to forego temporary physical indulgence in order to attain the future satisfactions to fine family life. But are you talking only about "education" in the schools?

PARENT: No, we think the home, the church and the school all face a challenge in this field and that each has an important role to play. We think that social hygiene education--I prefer to call it education for family life--should literally begin in the cradle and continue step by step from nursery school through the university.

(more)

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EDUCATOR: I quite agree that it should not be restricted to the classroom, although it definitely has a place there, too. But what many parents don't understand is that long before the child goes to school, he is already absorbing behavior attitudes at home, whether the parents know it or not.

PARENT: Certainly the child from infancy responds to his surroundings. He notes his parents' relationships to each other, their social attitudes and their vocabularies. Later on, he asks questions. He draws conclusions from the answers that he gets, the way they are given and, if fear or embarrassment are present, these may be transmitted to the child.

EDUCATOR: We teachers are very conscious of the need for more adequate home training. The Parent-Teacher Associations often say that the parents are the child's first and best teacher in this field. But many mothers and fathers must find it perplexing.

PARENT: Only a mother knows just how perplexing it can be. The questions you get! And even when you know the answers, it isn't always easy to handle the situation. Suddenly you become aware that the mere fact of parenthood doesn't automatically prepare a mother or a father to do a good job on this any more than entering a school of engineering by itself equips men with a knowledge of bridge-building.

EDUCATOR: Then special education for parents must be a basic part of the follow-through program proposed in connection with Social Hygiene Day, Mrs. ---.

PARENT: It certainly is, Dr.---. We intend to increase the opportunities for parent education. The National Congress of Parent and Teachers as you know fosters such specialized training. The American Social Hygiene Association which prepares material for parents' study courses, reports that wherever such programs are offered, parents are eager to take advantage of them.

EDUCATOR: That's a step in the right direction, Mrs. --- and from what I know of parents in this town you're going to have a heavy registration for those classes. But it's obvious that this project can't be a substitute for classroom instruction for children. That's needed too.

PARENT: That goes without saying, Dr. ---. Home, school and church must supplement each other. No one of the three alone can develop the sound character training and correct social attitudes which will give our young people the protection they need.

EDUCATOR: I'm glad to hear you say that. As a teacher, (principal, board of education member) I feel that there is a definite place in the curriculum for social hygiene education. Most principals and superintendents agree. But sometimes they delay initiating such a project for fear that "the public" --and that means parents-- might object.

(more)

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PARENT: Speaking for parents, I can say there is no basis for such fear. Results of public opinion polls, resolutions and declarations from parent' organizations, responses to inquiries, all show that mothers and fathers are looking for help from the schools. They want the schools to play a more positive role.

EDUCATOR: I agree. Opposition is diminishing. Where we still get it, it usually arises from the mistaken idea that by social hygiene education we may mean only narrow sex education, separate and apart from other studies.

PARENT: If that were the kind of teaching that we were proposing there might be a basis for criticism. Let it be said flatly that isolated talks on sex or even pep talks on good morals are poor pedagogy. Birth control, marriage techniques and the clinical aspects of venereal disease have no place in social hygiene teaching either, in my opinion.

EDUCATOR: No, indeed. What we're talking about is the kind of education that fits in naturally with the child's normal growth and development and is combined with other studies in the regular curriculum.

PARENT: That is a good point, Dr. ---. It should be possible, we believe, to deepen and enrich existing school courses with sound ideas of family life that will reenforce the training given by the child's parents.

EDUCATOR: Let's apply the idea concretely. Isn't it clear that questions about human reproduction could first find a natural answer in plant and animal life study and later through biology, botany and other natural science courses.

PARENT: I think all can agree to that. But teachers of other subjects can readily help with such education, too, can't they?

EDUCATOR: Of course, Mrs. ---. The English class could be a "natural." A group studying Louisa May Alcott's immortal LITTLE WOMEN, for example, could also benefit if a teacher would stress the characteristics that made the family life of the beloved March family so strong.

PARENT: What about the venereal diseases?

EDUCATOR: They can be discussed along with the other communicable diseases--without drama or sensation--simply as other ailments that plague humanity. Even mathematics may have phases of education for family living in it. How about family budgeting and the application of statistics to disease rates? Other questions might arise in the study of history, civics or geography.

PARENT: Are many schools already teaching social hygiene this way?

EDUCATOR: Good progress is being made in applying these principles in quite a few of our cities.

(more)

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PARENT: I've heard that in Oregon every public school offers this kind of instruction, Dr. ---.

EDUCATOR: Yes, Oregon is outstanding nationally in this regard. Under a state law, passed in 1945, all Oregon public schools are required to provide public health education for all grades from the first through the junior high schools. This is the first such law passed anywhere in the United States. Human reproduction and the venereal diseases, are included.

PARENT: How did Oregon happen to pass this law? Do you know anything about the movement that brought about its enactment, Dr. ---?

EDUCATOR: Major credit for its adoption goes to the women of Oregon. The Oregon Federation of Women's Clubs did the spadework. Members did the basic planning, then went out and enlisted the support of organized labor, the churches, the parent-teacher associations and other organizations. Then together, they took it to the legislature and got an official stamp of approval.

PARENT: That's an inspiring example of what citizen action can do, Dr. ---. That's real pioneering. We will draw on this and other experiences as we prepare to strengthen our own program of social hygiene education here.

EDUCATOR: But don't forget there's more to it than planning the program and getting approval for it. We also have to organize special training for our teachers. Many teachers, otherwise well prepared, don't feel equipped to handle education for better family living.

PARENT: We realize that and our follow-through plans for Social Hygiene Day make special provision for that too.

EDUCATOR: I know that you'll find teachers responsive to the program. You can count on us.

PARENT: Thank you, Dr. ---. We're counting on the whole community. We hope that you and all our radio listeners will join us in our Social Hygiene Day meeting Wednesday, Feb. 5, at ---(time and place) and that all of us will be working together on our year-round program in the days that follow. With the active cooperation of the official and voluntary agencies and with the support of our parent groups, women's clubs, and other organizations I know that we are going to make our city a better place for our boys and girls to grow up in and to make their homes.

ANNOUNCER: You have just heard Dr. ---(name, title, affiliation) and Mrs.---(name, title, affiliation) discuss social hygiene education for young people. This broadcast was arranged in connection with the national Social Hygiene Day observance here Wednesday, February 5. Social Hygiene Day will be marked here by a meeting at ---(time, place). Do your part to help Stamp Out VD. Attend the rally. Enlist the support of your friends and organizations behind the Social Hygiene Day year-round program.

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NEWS PICTURES

Pictures can dramatize your story.

Local newspapers will gladly reproduce the Social Hygiene Day poster with an explanation or caption announcing your meeting or as a part of a news or feature story. If your newspapers are very friendly they will run the poster daily or frequently for two weeks before your meeting, as a one column box with a different caption at each insertion.

Editors are glad to use photographs of prominent citizens. Propose photos of your Social Hygiene Day chairman and committee, of the speakers for your meeting, of the Mayor issuing a Social Hygiene Day proclamation. See that such photographs are sent to the editors or that newspaper staff photographers take them.

PROCLAMATIONS

Past experience indicates that mayors are glad to issue a proclamation in connection with Social Hygiene Day. A re-typed copy of the enclosed proclamation, can be taken or mailed to your chief executive with a covering letter from your chairman. The mayor's office will give it to the press.

OFFICIAL STATEMENTS

Your Health Commissioner will probably be glad to issue a statement on the importance of full community support.

THE EDITORIAL PAGE

Newspaper letter columns are almost always open for material of this kind. A sample letter is included. Others can be prepared locally.

EDITORIALS

Many newspapers will gladly run editorials in support of Social Hygiene Day. Supply background material on what is being done locally and select from among pamphlets in the kit to give the editor the general picture. Also present the Suggested Editorial and the Background Material for Editorials, contained in the kit. The same method can be used in trying for cartoons on the editorial page.

RADIO

A 15-minute radio script for use by an educator and a parents' association leader is included in the kit. Cast the roles from among the most prominent people available, then approach the radio station to ask for time. A request for radio time by an influential committee member will probably facilitate an acceptance. There are also spot announcements in the kit. Arrange for their use to publicize the meeting. At the same time, undertake to get the radio station to broadcast your Social Hygiene Day program, or at least the principal speeches, direct from the meeting.

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It is important to let the radio station manager know that your program is endorsed by community leaders. Show him the material well in advance of February 5 and determine what part of this will be put on the air, and when. When dates and programs are set, make sure that newspaper radio columns carry advance notices of the broadcast.

FILM SHOWINGS

Use of motion pictures may help give variety to your meeting or serve as a build-up for your observance. The kit includes a descriptive folder on American Social Hygiene Association film and a U.S.Public Health Service film available to you.

POSTERS AND WINDOW DISPLAYS

A special Social Hygiene Day poster, a sample of which is in the kit, has been produced this year. Space is left on the bottom for printing the name of your sponsoring group and when and where your meeting will take place. Order them in sufficient quantity to make an impression in your community - stores will display them in their windows, and they can be placed on bulletin boards of public buildings, union halls, organizations, etc. The posters cost 10 cents each; $1.00 a dozen; $7.50 for 100, $60 per 1,000. Wide distribution and display of this poster is suggested.

Your local druggests, individually or through their local organization, will cooperate by arranging special window displays in drugstore windows and by making distributions of Social Hygiene Day literature direct to the public.

IN CONCLUSION

Press releases for Social Hygiene Day should be centrally supervised to avoid duplication of effort. This is particularly important because this press book may reach other interested groups in your community. Release dates on the enclosed material suggest proper timing for your publicity schedule. You, of course, will insert into the body of the releases the correct date, if your meeting does not fall on February 5, 1947.

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Suggested Form to Follow in Retyping News Releases

(Name of Committee)
(Address)

(Telephone:)

FOR RELEASE (ON RECEIPT) or (DATE)

(START STORY HERE)

(IF RELEASE CONTINUES TO NEXT PAGE TYPE
(more) ON BOTTOM OF FIRST PAGE. USE
ONLY ONE SIDE OF PAPER, AND DOUBLE SPACE.
AT END OF RELEASE TYPE, IN CENTER OF
PAGE - ###)

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DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Advance News Release #1

Suggested Release Date:
24 Days Before Social Hygiene Day

(RETYPE AND SEND TO ALL WEEKLY
AND DAILY NEWSPAPERS IN YOUR AREA)

Community action against VD (venereal Disease) will be stimulated here (date)with a National Social Hygiene Day observance, (name), (title), (affiliation), announced today.

VD, held down to an all-time low during wartime, has been spreading dangerously in the past 12 months, (name) said.

Social Hygiene Day, sponsored nationally by the American Social Hygiene Association, will alert citizens throughout the country to the threat to public health and will urge increased prevention efforts.

(Name) said that a sponsoring committee for the Social Hygiene Day observance was now in formation. Among those being asked to serve are public health and police officials, representatives of youth and welfare agencies, clergymen, parents and teachers and spokesmen for management and labor. (List others as decided in your community.)

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DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Advance News Release #2

Suggested Release Date:
3 Weeks Before Social Hygiene Day

(ADD RELEVANT LOCAL INFORMATION, RETYPE AND SEND
TO ALL DAILY AND WEEKLY NEWSPAPERS IN YOUR AREA)

---(Name)----(title)---(affiliation) has accepted the chairmanship of the committee planning a Social Hygiene Day observance here Wednesday, February 5, it was announced today.

Ceremonies in ----(city) will be part of nationwide observances, initiated by the American Social Hygiene Association to focus public attention on the danger of the venereal diseases and to organize citizen activity and support behind a broad preventive program.

----------(name) (ADD BIOGRAPHICAL MATERIAL) said there had been an alarming increase in VD since the close of war.

"Venereal disease, which dropped to an all-time low in 1944, has increased markedly in the last two years and the most rapid rise is among young people," ----(name) said.

"This furnishes dramatic, though tragic, evidence that VD is much more than a medical problem. Scientifically, we are better equipped today to stamp out VD than ever before in history. But the diseases are spreading. Bringing them under control requires the most serious cooperative efforts of all the contructive forces in the community so that we may extend education and public understanding, develop sound social attitudes in our young people and repress prostitution, which if allowed to become flagrant is the main source of VD."

---(name) said that "Stamp Out VD--Prevention is the Watchword" would be the theme of this year's Social Hygiene Day observance and that major attention would be given to development and presentation of action for prevention.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Advance News Release #3

Suggested Release Date:
10 Days Before Social Hygiene Day

(ADD RELEVANT LOCAL MATERIAL, RETYPE AND SEND TO
ALL DAILY AND WEEKLY NEWSPAPERS IN YOUR AREA)

A concrete program of community action against the venereal disease will be presented to the Social Hygiene Day rally which will be held here Wednesday, Feb. 5 at ---(time and place), ---(name) ---(title)---(affiliation), chairman of the sponsoring committee, announced today.

Civic leaders, health authorities and social hygiene experts will present the facts and figures which indicate that VD is one of the nation's top trouble questions, ---(name) said.

But facing up to the problem means more than taking stock, ---(name) commented. "It means follow-through as well."

---(name) said citizen activity would be enlisted at the rally for a year-round program, keyed to three avenues of operation: support to the efforts of physicians and public health officers to find and treat every infected person; action for strict enforcement of laws against prostitution, a main source of VD infection; and popular education to familiarize the public with the truth about the diseases and to educate and guide youth in preparation for stable marriage and strong, enduring family life.

"The program has the support of local medical, public health and law enforcement authorities in addition to business, labor, club and educational leaders," ---(name) added.

Serving with ---(name chairman) on the Social Hygiene Day sponsoring committee are: (ADD NAMES TITLES AND AFFILIATIONS OF FIVE OR SIX OF THE MOST PROMINENT COMMITTEE MEMBERS).

Agencies cooperating include (LIST THE MAIN GROUPS AND CITY DEPARTMENTS BY NAME).

(Also add other Social Hygiene Day events scheduled, such as film showings, exhibits, panel discussions or other activities you may have arranged.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Advance News Release #4

Suggested Release Date:
8 Days Before Social Hygiene Day

(ADD RELEVANT LOCAL MATERIAL, RETYPE AND SEND TO
ALL DAILY AND WEEKLY NEWSPAPERS IN YOUR AREA)

The problem of combatting venereal disease today merits the intelligent cooperation of every section of the community and calls for the most widespread venereal disease education, Health Commissioner---(name) said today, announcing his sponsorship of the Social Hygiene Day observance which will be held ---(time and place).

Social Hygiene Day, sponsored nationally by the American Social Hygiene Association, will be observed simultaneously in thousands of communities throughout the country as part of a drive to spotlight public attention on the dangers of VD and to strengthen broad year-round preventive programs.

"Combined operations by all constructive forces in the community can reverse the present rising trend in venereal disease infections," the Commissioner said.

"That is why citizen participation in the Social Hygiene Day rally next --- (date) is of such pressing importance.

"While there is marked increase in the number of infections today, it is also true that we have made important gains in the fight against VD in recent years. In 1939, there were 15 deaths per 100,000 population due to all forms of syphilis. By 1944, only 10.6 persons in every 100,000 died from this cause.

"Infant mortality from congenital syphilis, which in 1939 was 57 per 100,000 live births, had come down to 27 by 1944.

"This is encouraging evidence of what can be done. A great task still remains. Social Hygiene Day will be the rallying point for redoubled efforts to finish the job."

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Social Hygiene Day Rally Release #5

Suggested Release Date:
5 Days Before Social Hygiene Day

Police Chief ---(name) today urged all out citizen support for the Social Hygiene Day observance sponsored by the American Social Hygiene Association, which will be held here Wednesday, February 5, at ---(time and place).

The theme of the observance, part of ceremonies being conducted simultaneously throughout the country, is "Stamp Out VD--Prevention is the Watchword." A major plank of the program to be presented is rigid enforcement of laws against prostitution, a main source of venereal disease infection.

"A police department, no matter how efficient, needs the backing of an enlightened, interested public," Chief---(name) asserted, in endorsing the Social Hygiene Day rally.

"We are proud of the record of our city. But this record has been achieved only through constant vigilance.

"Racketeers and exploiters are always looking for a chance to make a break-through. Commercialized vice never gets an opportunity to get a foothold where the public is alert to the corruption, degradation and dangers to public health that results from such operations.

"As Chief of Police in --- (city), I welcome the plans for the Social Hygiene Day meeting and hope that out of it will come a year-round program of preventive action on which all sections of the community will unite."

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Advance News Release #6

Suggested Release Date:
2 Days Before Social Hygiene Day

(ADD RELEVANT LOCAL MATERIAL, RETYPE AND SEND TO
ALL DAILY AND WEEKLY NEWSPAPERS IN YOUR AREA)

---(name)---(title)---(affiliation) will be the principal speaker at the city-wide Social Hygiene Day rally here Feb. 5 ---(time and place) as ---(name of city) joins in a nation wide concentrated drive against the venereal diseases.

---(name) will discuss (topic of talk), based on national, state and local findings.

Other speakers at the meeting, one of thousands being held coincidently in cities throughout the country, will include: (add names, titles and affiliations of other speakers).

The Social Hygiene Day observance, sponsored nationally by the American Social Hygiene Association, is being conducted here under the auspices of a broad sponsoring group, which includes (list city departments and sponsoring agencies by name).

---(president of the community medical society or a leading physician) today urged all-out citizen participation in the meeting.

"In the control of venereal disease, the question of prevention cannot be ignored," he said. "While not strictly the province of medical men, physicians and health officers are well aware of the importance of working hand in hand with those forces in the community devoting their efforts to better understanding of the dangers of the diseases, their cause and factors making for their spread as well as efforts for the development of more wholesome sex standards. The purpose of the rally is to strengthen that working relationship and to center our efforts around a common program of action."

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

News Release on Meeting #7

To Reach All Papers A Day Before Meeting. To Be Marked For Release On Date Following Meeting.

(NOTE: THIS IS THE BIG STORY FOR RELEASE ON SOCIAL HYGIENE DAY ITSELF. IT IS TO BE FULLY PREPARED WITH LOCAL FACTS ADDED AND PLACED IN THE HANDS OF NEWSPAPER EDITORS THE DAY BEFORE YOUR EVENT. WITH IT SHOULD GO COPIES OF SPEECHES, A FULL LIST OF SPEAKERS, BRIEF BIOGRAPHICAL DATA ON EACH, AND BACKGROUND MATERIAL ON SOCIAL HYGIENE DAY. THE SAME MATERIAL SHOULD BE AVAILABLE FOR DISTRIBUTION AT THE MEETING TO REPORTERS ASSIGNED TO COVER. IF YOU INTEND TO GIVE PAPERS PHOTOS OF YOUR TOP SPEAKERS, THESE SHOULD BE IN THE NEWSPAPER OFFICES AT LEAST 24 HOURS BEFORE THE RALLY.)

The key to control of the venereal diseases lies in streamlining the preventive program while intensifying efforts to find-and-treat every infection, ---(name)---(title)---(affiliation), asserted today (WEDNESDAY, FEB. 5) at a Social Hygiene Day rally at ---(place). Social Hygiene Day is sponsored in thousands of communities by the American Social Hygiene Association.

A concrete program of action against VD on which all sections of the community will be asked to cooperate was put forward at the rally, one of thousands held coincidently throughout the country under the slogan "Stamp Out VD--Prevention Is the Watchword."

"While there has been a shocking increase in VD cases reported in the past 12 months,"---(name principal speaker quoted above) declared. "We have all the tools at hand to reverse the trend and advance rapidly toward our goal. Our task is to apply those tools effectively."

(IF YOU USE THIS QUOTE MAKE SURE IT APPEARS ALSO IN THE MANUSCRIPT OF THE SPEAKER TO WHOM IT IS ATTRIBUTED.)

---(name) revealed that VD prevalence has doubled in many cities since the close of war and that in ---(name your state) and ---(name your city) there are definite signals that the situation requires immediate attention and cooperative action.

(more)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

INSERT TWO PARAGRAPHS OF QUOTES FROM PRINCIPAL TALK AND ONE PARAGRAPH OF QUOTES EACH FROM OTHER OUTSTANDING TALKS. QUOTES SHOULD BE DIVERSIFIED AND EACH SHOULD COVER A VITAL PHASE OF THE CAMPAIGN TO STAMP OUT VD.

Other speakers at the meeting were (LIST Names and affiliations. Also add list of leading organizations and agencies joining in sponsorship or contributing to success of Social Hygiene Day observance. Briefly report other features of the meeting.)

###

DECLASSIFIED E.O. 12065 SECTION 3--402/NNDG NO. 775013

Proposed Letter to the Editor

For Publication In January

(NOTE: THIS IS A SAMPLE OF THE KIND OF LETTER THAT CAN BE SENT TO THE PAPERS BY THE CHAIRMAN OR OTHER PROMINENT MEMBERS OF YOUR COMMITTEE. IF THERE IS MORE THAN ONE PAPER IN YOUR COMMUNITY, DIFFERENT LETTERS SHOULD BE SENT TO EACH. LETTERS CAN BE SENT BY THE HEALTH OFFICERS, PHYSICIANS, LEADING BUSINESS MEN, LABOR LEADERS, EDUCATORS, HEADS OF WOMEN'S ORGANIZATIONS, ETC.)

Editor
(name of paper)
(Address)

Sir:

Venereal disease rates, which reached an all-time American low in 1944, are climbing again. The rise is most marked among our young people. There is a ringing challenge to all intelligent men and women in this alarming disclosure.

It is shocking as a threat to public health, shocking because it reverses a downward trend established during wartime and shocking because it comes at a time when science has provided us with unprecedented rapid treatment, permitting arrest of early syphilis in 10 days; gonorrhea in a few hours.

Those who are familiar with what happened after World War I will be the first to recognize that this is a matter for great concern. Then, too, after a period of wartime progress against VD, vigilance was relaxed, public appropriations for control were permitted to lapse and VD began to spread on a big scale. This must not happen again.

Moreover, VD is more than a medical or public health problem. It is a manifestation of deep-seated social troubles. When rates begin to rise, it is a signal that combined efforts of all sections of the community are needed for action.

We are encouraging such action here with a Social Hygiene Day observance Wednesday, Feb. 5, in which we invite the broadest public participation. While our meeting will dramatize the whole question, it will only be the beginning, the kick-off so-to-speak, of a movement to strengthen the whole social hygiene movement and assure its operations on a year-round basis. This is a project which warrants widespread support.

Sincerely yours,

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Proposed Letter to the Editor

For Publication In January

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Sincerely yours,

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Background Material for Editorials

(IN PROMOTING EDITORIAL COMMENT IN YOUR LOCAL NEWSPAPERS, SUBMIT THIS BACKGROUND MATERIAL - RETYPED DOUBLE SPACE - ALONG WITH ENCLOSED SUGGESTED EDITORIAL.)

Venereal disease incidence is rising throughout the country, according to the American Social Hygiene Association, sole national voluntary agency leading the fight against VD.

In New York City, the nation's largest community, there was a 29 per cent increase for the first six months of 1946 as against the same period in 1945. The August, 1946, N.Y.C., figure was 41 per cent above the August, 1945, VD figure. New York State, exclusive of New York City, as this was written was moving toward a 100 per cent increase over '45. North Carolina reports that for the first nine months of '46 more cases of early infectious syphilis were reported than ever before in a comparable period.

Dr. John R. Heller, chief of the venereal disease division of the U.S. Public Health Service, estimates that final reports for 1946 will reveal an increase in reported cases of early syphilis amounting to 42,000 and in gonorrhea of 50,000 as compared to 1945. Dr. Heller attributes much of the increase to the return of men from the armed services to civilian life. But the increase is there and the increase is undeniable.

This is shocking as a threat to public health. It is doubly shocking because it reverses a downward trend established during wartime and because it comes after the development of penicillin for unprecedented rapid treatment of VD.

The year 1947 may be the year of decision on whether gains made in wartime are held and new advances made against VD.

Some of the danger signals:

In September, 1945, Army officials, quoting an incidence of 154 VD cases per thousand men in the European Theater of Operations, forecast still higher numbers of VD infections among occupation troops. These higher rates were confirmed in 1946, indicating civilian epidemic overseas. This sharpens the threat to America's health. VD cannot be kept behind national boundaries as attested by the rise in infections among our seaport populations.

Since the war ended, American Social Hygiene Association studies show law enforcement against prostitution relaxing in many communities. At the end of June, 1946, 16 per cent of cities studied showed "bad" conditions, as compared with four per cent early in 1945. Congress' failure to provide for Federal social protection assistance to the states and communities for the current year makes this situation more critical.

(more)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

In the past year and a half, the armed services have demobilized millions of men. The highly valuable military-civil cooperative plan for case-finding, which brought thousands of sources of infection under treatment, has been reduced in proportion. Civilian case-finding facilities are not yet adequate to do the full job alone, especially with the civilian population augmented by war demobilization. Nor are most communities yet in a position to provide education against VD on the intensive scale maintained by the armed services.

There is also the factor of over-confidence in the public mind--especially among youth, regarding the effectiveness of penicillin. There are indications that in some cases the promise of rapid treatment appears to lull the fear of infection.

Social Hygiene Day, which falls this year on Wednesday, February 5, will call communities through the country into action, dramatizing the importance of the fight to stamp out VD and set forth a concrete program of year-round action.

This is a project in the highest public interest. We recommend full participation in the rally and ask our forward-looking citizens to see that the policies enunciated be translated in the every day life of our city--in broader health education, in enforcement of laws against prostitution, in strengthened support to the work of physicians and health officers and in specialized guidance for our young people.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Suggested Newspaper Editorial

For Use Any Time in January

(NOTE: TO OBTAIN COMMENT ON THE EDITORIAL PAGE, OR CARTOONS, IT IS SUGGESTED THAT YOUR COMMITTEE CHAIRMAN OR AN IMPORTANT MEMBER OF YOUR COMMITTEE VISIT THE EDITORS OF LOCAL PAPERS, OR, IF THIS IS NOT POSSIBLE, WRITE TO THEM ON HIS BUSINESS OR PROFESSIONAL STATIONERY. THE FOLLOWING SUGGESTED EDITORIAL COPIED IN DOUBLE SPACE, CAN BE PRESENTED ALONG WITH THE BACKGROUND MATERIAL FOR EDITORIALS WHICH IS INCLUDED IN THE KIT.)

We can be grateful today to the radio station that brashly cut Dr. Thomas Parran off the air in the middle of a speech a little over a decade ago. Dr. Parran, now Surgeon General of the U.S. Public Health Service, was about to mention the word syphilis. The station silenced him in application of an unwritten but tightly enforced taboo. VD flourished on the ignorance which that taboo fostered.

The station's arbitrary action started a significant train of events. Public health forces, built up over a period of 20 years by the American Social Hygiene Association, moved swiftly into action. They seized the opportunity for frank and somewhat heated public discussion. They shook the smug complacency of those who would hide the facts. This ripped the gag off and at last permitted the great mediums of information to tell the truth about VD, which, if untreated, causes death, insanity, crippling or other disability.

Because of that incident and the successful efforts that followed, we are in an infinitely better situation today to fight venereal disease, now striking with new strength throughout the country.

Many of the tragic elements that marked the period after World War I, when VD spread alarmingly, are present in today's reports. But we are fortified against a breakdown in controls because, unlike Americans of a generation ago, we are free in press and radio to bring the full facts to the people, free to name the causes, free to enlist the widest citizen interest, activity and support for a broad program of prevention.

This is the moment to use that freedom. VD rates, held down to an all-time American low during wartime, are beginning to rise again. Prostitution, a chief source of infection is creeping back. At the end of June, 1946, 16 per cent of cities studied by the American Social Hygiene Association showed "bad" conditions, as compared with four per cent in early 1945. Congress' failure to provide for federal social protection assistance to the states and communities for the current year makes this situation more critical. Millions of men, in the age groups in which VD is most prevalent, have returned to civilian life from the armed services. The highly valuable military-civil cooperative system for case-finding, which brought thousands of sources of infection under treatment, becomes inoperative in proportion to demobilization.

(more)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

The times call for action against the venereal diseases, now before the danger grows. The opportunity for such action is offered for us here by a Social Hygiene Day rally, Wednesday, February 5, at ---(time and place). One of thousands of such observances being held coincidently throughout the country under the leadership of the American Social Hygiene Association, this meeting will spotlight public attention on the dangers of VD. More than that, it will mark the presentation of a concrete program of year-round action on which all forces of the community can unite.

Here is an opportunity for each of us to play our part in the development of a more wholesome life for ourselves and our children. More exactly, viewed in the light of the shocking reports of increasing VD prevalence, participation is a responsibility. We hail the rally's slogan: "Stamp Out VD--Prevention is the Watchword." We congratulate the sponsors of Social Hygiene Day and urge the city as a whole to join in the observance.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

INFORMATION SHORTS

(For Use by Speakers and for "Filler"
and by Columnists in Local Newspapers)

The venereal diseases, in their infectious stages, are largely diseases of youth, according to the American Social Hygiene Association. More than a third of the patients in 15 Public Health Rapid Treatment Centers were found to be in their teens. A recent federal study showed that roughly half of infectious VD was spread by girls and women in the 18-to-22 year age group.

###

An estimated $168,000,000 is taken out of the pockets of American workers each year because of working days lost as a result of venereal diseases, according to the American Social Hygiene Association.

###

The annual loss of working time in the United States due to syphilis - caused paresis (softening of the brain) is estimated at 73,000 man-years and 23,000 woman-years. More than $11,000,000 is spent annually in this country for the care in mental hospitals of persons stricken with this one form of syphilis, according to the American Social Hygiene Association.

###

Care of syphilitic veterans of World War I cost taxpayers 82 million dollars up to June 30, 1940, according to the Veterans Administration. Costs for the same item for World War II veterans, will almost certainly be much higher and may run as high as a billion dollars, according to the American Social Hygiene Association. How high the bill goes, the Association says, will depend in large part on how effectively citizens and communities assure follow-up and treatment for vets who need it.

###

Medical men describe syphilis as "the great imitator" because, unless unmasked by competent diagnosis, it poses as any one of a number of ailments. Gonorrhea, six to ten times as prevalent, is called the "most common plague of mankind," according to the American Social Hygiene Association.

###

For every hundred cases of other communicable diseases like diphtheria, malaria, pneumonia, tuberculosis or infantile paralysis, there are 170 cases of venereal disease. Gonorrhea affects more persons than any other disease except the common cold and measles. In 1945, in New York State, both gonorrhea and syphilis also exceeded measles, according to the American Social Hygiene Association.

###

Thirty-two states now have pre-marital examination laws as a precaution against the spread of syphilis in marriage. Thirty-six states have prenatal examination laws. Blood tests in early pregnancy may reveal the presence of syphilis and permit treatment that, nine times out of ten, will insure the birth of a living baby free from syphilis, accoring to the American Social Hygiene Association.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Pre-natal and pre-marital examination laws, now on the books in more than 30 states, save the lives of thousands of new-born babies who otherwise might die, victims of syphilis. Public education and citizen support which won enactment of these laws were fostered by the American Social Hygiene Association.

###

A person can harbor syphilis for years without knowing that anything is wrong. Only vague symptoms may at last take him to a physician. Heart conditions, nervous troubles and complications of various injuries appear on the industrial cost-sheet under many titles. If the true facts were known, many of these would be revealed as manifestations of syphilis, according to the American Social Hygiene Association.

###

Penicillin permits arrest of early syphilis in a week; gonorrhea in a few hours. But syphilis is a treacherous, sneaky enemy. Patients treated with penicillin must remain under a doctor's supervision for a considerable time to make sure the drug has actually stopped the progress of the disease, according to the American Social Hygiene Association.

###

The VD rate among prostitutes is fantastically high, according to federal studies. In a New Orleans drive, 80 percent of prostitutes were found infected. Government spokesmen say these figures are not exceptional.

###

Over 3,000,000 Americans have syphilis; at least 10,000,000 have gonorrhea, according to U.S. Public Health Service estimates. This approaches one tenth of our total population.

###

The New York City VD rate in the 15-to-19 age group, increased from 1,427 in 1939 to 5,139 in 1945. There is a 39 percent rise in the number of girls arraigned in Magistrate's Court on prostitution charges in New York City over 1943.

###

Teamwork by official and voluntary agencies brought VD rates in the United States down to an all-time low during wartime. Since VJ Day, rates have begun to rise again, according to the American Social Hygiene Association.

###

The Chief Surgeon's office reports that the venereal disease rate among some of our troops in Europe is at the highest point in American military history, with one of four GIs infected. This indicates an epidemic of VD in certain parts of Europe and that threatens the United States, according to the American Social Hygiene Association, because VD epidemics cannot be kept behind national boundaries.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

A main factor in reducing VD rates during wartime was federal action against prostitution, a main source of infection. Since VJ Day, vice racketeers are attempting to make a come-back, according to the American Social Hygiene Association.

###

Studies of commercialized vice, made by the American Social Hygiene Association in selected cities, indicate that the housing shortage is one of the main factors preventing houses of prostitution from reopening. Brothels, where they exist, are a chief source of venereal disease infection.

###

Law enforcement authorities find that many crimes decline in volume when a red light district is closed, according to the American Social Hygiene Association.

###

Over 200,000 new infections of syphilis occur each year in the United States, according to the American Social Hygiene Association, sole national voluntary agency in the country fighting VD. At least a million gonorrhea infections occur annually.

###

Syphilis and gonorrhea, though both venereal diseases, are two quite different ailments, caused by two quite different germs and causing quite different types of suffering and disability.

###

The prostitution racket is the most vicious form of exploitation. The prostitute's share of her own earnings averages not more than 20 percent in most cases, according to the American Social Hygiene Association, whose studies of commercialized vice are used by law enforcement officers in cleanup drives.

###

Repression of prostitution cuts VD rates rapidly. Wartime government figures show that wherever the law cracked down, disease rates fell, according to the American Social Hygiene Association.

###

Venereal Disease is not spread on the job, according to the American Social Hygiene Association, sole national voluntary agency fighting VD. Nobody catches it because of unclean toilet seats, drinking glasses, towels, etc. Infection is almost exclusively through sex contact. Rare cases of syphilis infection through kissing are reported.

###

Syphilis is caused by a germ known as a spirochete. Gonorrhea is caused by a germ known as gonococcus. Gonorrhea strikes from five to seven times as many victims as syphilis, according to the American Social Hygiene Association.

###

Insanity, blindness, heart disease and paralysis result from untreated syphilis. Untreated gonorrhea can cause permanent disability, according to the American Social Hygiene Association.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Mayor's Proclamation

To Be Released During The
Week Preceding Your Meeting

(TO BE BROUGHT TO YOUR MAYOR OR
SENT WITH A COVERING LETTER)

SOCIAL HYGIENE DAY PROCLAMATION

by

MAYOR_____

WHEREAS, the City of _____ is justly proud of its leadership in safeguarding the health and welfare of its citizens and

WHEREAS, the venereal diseases, kept down to an all-time low during war-time, have begun to spread alarmingly, causing increased disability, misery and expense and

WHEREAS, the American Social Hygiene Association, backed by the public health authorities, as well as military, medical, legal and social agencies of this nation, state and community has fixed Wednesday, February 5, as Social Hygiene Day to alert citizens to action against these dread diseases and to strengthen our entire preventive program,

NOW, THEREFORE, I, _____, mayor of the City of
(Mayor's name)
_____ do hereby proclaim Wednesday, February 5, Social Hygiene Day and call upon all people in our city to participate in the observance and give its program their full support.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Social Hygiene Day Release #8

(RELEASE AFTER Social Hygiene Day TO GIVE CONTINUITY TO THE PROGRAM OF ACTION THAT YOUR OBSERVANCE HAS INITIATED.)

Following through on the Social Hygiene Day rally held here Feb. 5, leaders of medical, social service, civic and municipal fields today initiated steps for practical application of the three-way year-round program of action.

The broad sponsoring committee which carried through the "Stamp Out VD" meeting will continue its operations in a three-pronged drive---(name, title, affiliation) chairman, announced. Participating agencies include: (list sponsors).

The committee will carry on systematic activities on these principal projects, part of the program put forward nationally by the American Social Hygiene Association ---(chairman) said:

1. Support public health department efforts to find and treat every case of infection. This will be achieved through a regularized program of education on the danger of VD, its causes and the value of early diagnosis and treatment.

2. Spur citizen interest in law enforcement to assure continued repression of prostitution, a main source of VD infection.

3. Equip teachers, parents, church leaders and others in posts of leadership so they may more adequately meet the needs of young people for sound knowledge and guidance.

At the same time, organizations participating in the Social Hygiene program will seek to expand recreational and cultural facilities for young people to provide greater opportunity for wholesome activity in the community.

###

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

Radio Spot Announcements

(HAVE THESE SPOTS COPIED AND SUBMIT TO ALL LOCAL RADIO STATIONS WITH REQUEST THAT THEY BE ANNOUNCED AS OFTEN AS POSSIBLE AT PROGRAM BREAKS DURING THE TWO WEEKS BEFORE SOCIAL HYGIENE DAY. USE THE INFLUENCE OF PROMINENT MEMBERS OF YOUR COMMITTEE TO INDUCE RADIO STATIONS TO COOPERATE.)

15-Second Spot

(Sound--big clock ticking about 3 seconds)

More dangerous than any time bomb is the wave of venereal disease now rising in the country. You can help Stamp Out VD by joining the Social Hygiene Day rally Wednesday, Feb. 5, at ---(time and place) and supporting its concrete program of year-round action.

30-Second Spot

(Whisper) You can't fight VD on the QT. (Normal with emphasis) Help bring the facts out in the open. Venereal disease prevalence is rising but VD can be stamped out through preventive education...through enforcement of laws against prostitution...through better guidance for our young people... through support to public health efforts to find and treat every case of infection. Join the Stamp Out VD campaign, led nationally by the American Social Hygiene Association. You can help by participating in the Social Hygiene Day rally Wednesday, February 5, at ---(time and place).

30-Second Spot

(Whisper) You can't fight VD on the QT. (Normal with emphasis) Get the facts on venereal disease, its dangers, cause, treatment. Learn how you can help prevent the spread of VD. Join the Stamp Out VD Campaign led by the American Social Hygiene Association. Attend the Social Hygiene Day rally here Wednesday, February 5. Join with your good neighbors in working out a year-round program to protect our children from the ravages of VD.

(more)

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30-Second Spot

You're right, mister. I'd really like to help stamp out VD, but when do I start? That's the way most Americans feel about venereal disease and here's the best way to fight VD. Join our community Social Hygiene Day movement, sponsored by the American Social Hygiene Association. Attend the Social Hygiene Day rally here Wednesday, Feb. 5, at ---(time and place) and enlist the support of your friends, neighbors and organizations for support of the broad program of prevention that will be projected for year-round action.

30-Second Spot

"I want to make America a better place for my children. I want to help stamp out venereal disease." That's the American attitude and here's how you can fight VD. Join the Stamp Out VD Campaign led by the American Social Hygiene Association. Back the Social Hygiene Day rally Wednesday, February 5, at ---(time and place). Enlist the support of your organization behind the year-round program of prevention that will be launched there.

30-Second Spot

The time is exactly...In just 45 seconds, venereal disease will average another victim. Join the Stamp Out VD Campaign led by the American Social Hygiene Association. You can help stop VD now by joining the Social Hygiene Day program here Wednesday, Feb. 5, at ---(time and place). Enlist your friends and neighbors to attend the meeting and support its program of year-round action for prevention.

(more)

DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

30-Second Spot

(Sound - big clock ticking about 3 seconds)

45 seconds to go. 45 seconds...and then...venereal disease will strike again. For every 45 seconds, VD averages another victim according to the American Social Hygiene Association. There were 750,000 new infections reported in the last 12 months. Help stamp out venereal disease. Attend the Social Hygiene Day rally here Wednesday, Feb. 5, at ---(time and place). Join with the city health department, the school system, the welfare department (list your own sponsors) in this crusade for health's sake and for happier living.

45-Second Spot

Your money or your life! If a stick-up man put a gun to your ribs and gave you that threat, there'd be no question about your answer. Today, venereal disease puts that same question to the American people. Rates are rising throughout the country. Millions are already suffering and millions more may be endangered. For health's sake, join the Social Hygiene Day observance here Wednesday, Feb. 5, at ---(time and place) and support the year-round program that will be presented. Stamp Out VD--Prevention is the Watchword is the theme of this year's Social Hygiene Day, sponsored nationally by the American Social Hygiene Association.

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DECLASSIFIED E.O. 12065 SECTION 3-402/NNDG NO. 775013

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