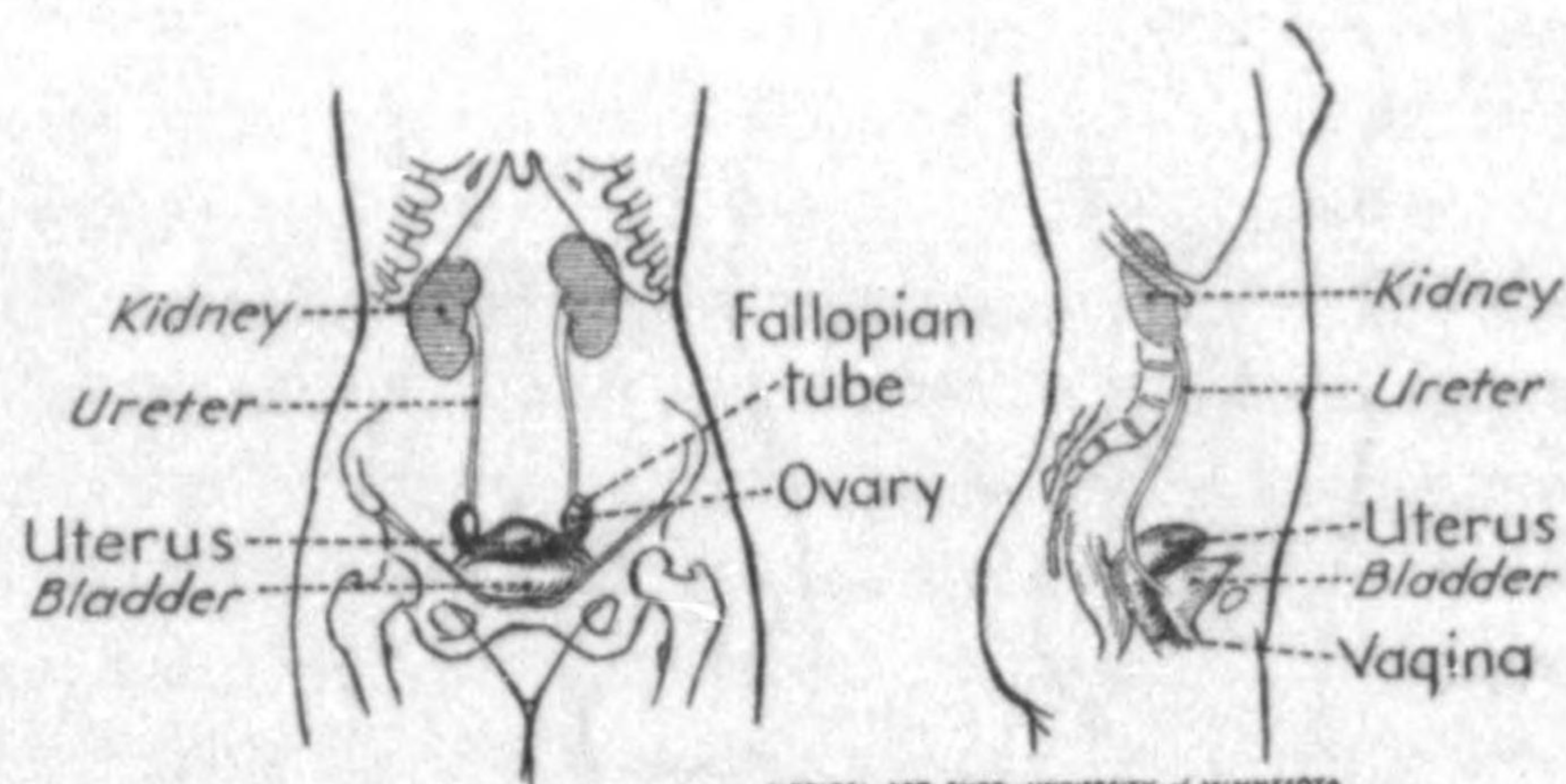
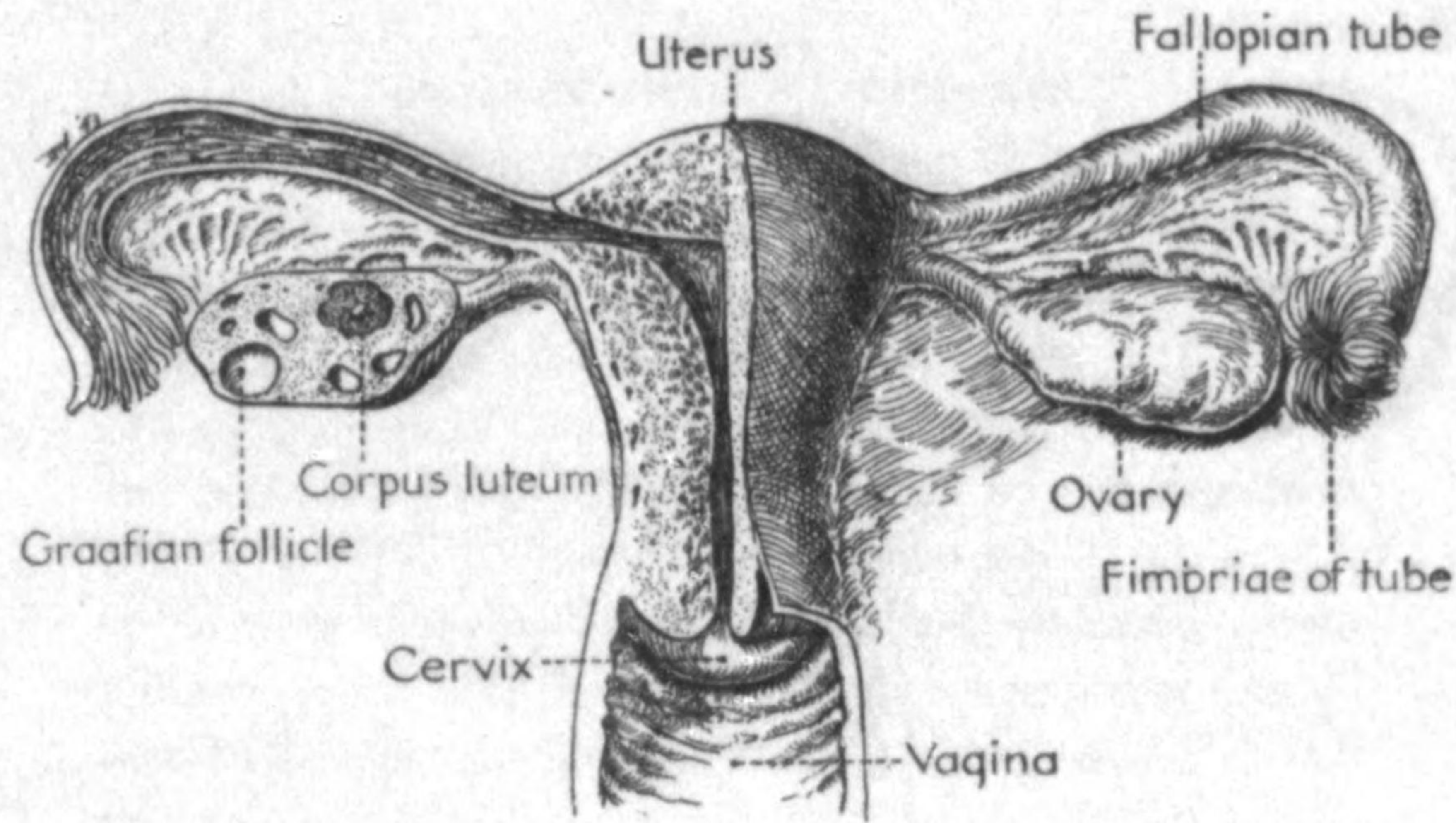


desires? Because in women the reproductive organs lie mostly inside the body, it is necessary to look at a picture of the internal organs to understand how they are bringing about the development of a girl into a woman.

The various parts and organs that you see with labels giving their names, on the next page, are present in one's body from very early in prenatal life, or life before birth. But their growth is slow and gradual indeed until the time becomes ripe for a girl to emerge from childhood. Then, very speedily, the ovaries, or egg-bearing cells, the uterus, or thick-walled muscular pocket whose purpose is to serve later as the home of the developing child, the vagina, or passage that leads from the uterus to the outside of the body, and all the associated organs begin to develop so that they can play their parts when the time comes for bearing children. Their growth is influenced and controlled by glands in various places in the body, known as endocrine glands, that send powerful secretions into the blood. The tiny egg cells in the ovaries begin to develop, and when the first one is mature, or ripe, it becomes loosened from its follicle, the sheltering cover in which it grew, and slips out, passing into the open fringe-like end of one of the two tubes that lead into the uterus.

There are many thousands of diminutive eggs present in the two ovaries at puberty (a name for the time at which a girl becomes mature), but only a few hundred of these will ripen and leave the ovaries. Once in about 28 days throughout the sexually active period of a woman's life, from about

FEMALE REPRODUCTIVE ORGANS



14 to 45 or 50, an egg ripens in one or the other of the ovaries, and leaves to begin its journey through the tubes and into the uterus or womb. This occurs about midway between the menstrual periods, with which the egg's actions are connected.

THE MONTHLY MENSTRUAL PERIOD

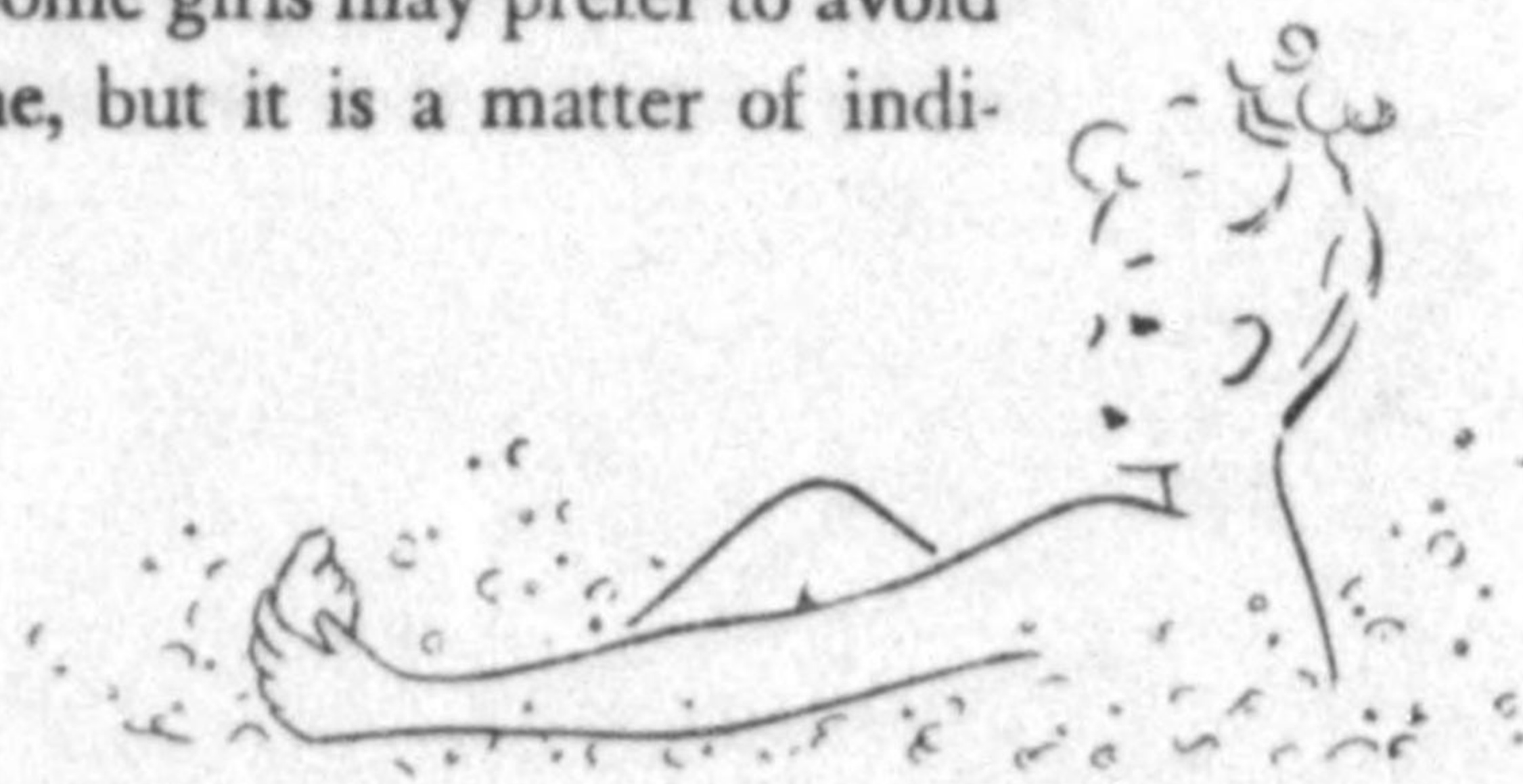
This is what happens to bring about the monthly menstruation. First the lining of the uterus, a hollow organ larger at the top than at the bottom, and between 2 and 3 inches long, begins to thicken. From about $\frac{1}{25}$ of an inch it increases to about an eighth of an inch in thickness, while small spaces form under it, gradually causing the blood vessels of the lining to loosen their hold on the wall of the uterus. Presently this layer of blood vessels falls away bit by bit and is emptied through the vagina. This is the monthly flow of blood, which normally amounts to only about two ounces all told, during the four or five days it takes to be released from the uterus.

The majority of girls begin to menstruate some time in their fourteenth year, 13 years and 9 months being about the age when the greatest number have their first period. There is a great deal of variation, however, in the time when different girls reach puberty, some girls maturing as early as nine or ten, others as late as 16 or 17. Neither early nor late menstruation is anything to be concerned about, for many factors enter in, such as the climate one lives in, the hereditary tendency in a family, and so on. For the first year or so,

a girl's periods are apt to be irregular, too, something that is rather to be expected. Sometimes a change of climate, such as one encounters on a trip, will result in a period or two being skipped.

Many girls get the mistaken notion that the monthly passage of blood is an illness, but of course this is not true. In a normal, healthy girl the menstrual period should not cause more than slight discomfort. If there is an undue amount of pain, if headaches, cramps, or other difficulties accompany the appearance of the menstrual flow, a girl should have a careful examination by a physician competent to discover what is wrong. In only very unusual cases does any condition exist that cannot be remedied by proper treatment. The main thing to remember is to keep oneself in good physical condition, by proper food, plenty of healthful exercise, and enough sleep and rest so that one's body is functioning on a high level in all respects.

During one's monthly period it is especially important to keep fresh and clean by bathing frequently. This is contrary to the old superstitious idea that a person should not take baths at this time. Nowadays, authorities believe that girls should carry on with their regular activities, with an extra amount of rest the first day or so if they feel the need of it. There is no reason why a girl should not go swimming, or dancing, or take any other form of exercise that she feels inclined to, provided she is well and strong and avoids becoming chilled or fatigued. Some girls may prefer to avoid strenuous activities at this time, but it is a matter of indi-



vidual preference. The main thing is not to pamper oneself unduly.

REASON FOR THE OCCURRENCE OF THE MONTHLY FLOW

Why does this seeming waste occur? It is not really waste, but simply the result of a regular preparation every 28 days for the reception of the ripened egg. But the egg will burrow into the wall of the uterus, lodge there, and use this collected nourishment only if it has been fertilized by meeting a sperm cell in its passage through the tubes. Faithfully and automatically, then, the uterus throughout the productive life of a woman, gets ready to do its part in the bearing of a child by building up blood vessels to provide future nourishment. If there has been no sexual intercourse, during which the penis of the male has entered the vagina of the woman, and ejected or sent forth into it the sex cells of the male, the liberated egg has nothing to do but find its way down the passages, where it passes out or is gradually absorbed. However, if the sex act has taken place, the tiny, extremely active sperm cells contained in the seminal or life-creating fluid of the male (2 or 3 hundred million sperms in a single outpouring or ejaculation) find their way up through the vagina, uterus, and Fallopian tubes, where one sperm may very probably come in contact with the waiting egg. When a sperm cell meets with an egg cell, its entrance into the egg is assured, and the combination of the two nuclear or life-containing cells is almost immediate. After a sperm cell has penetrated the much larger egg cell a change

takes place at once in the outer wall of the egg cell, so that no more sperms can enter.

Here, in this tiny pin-point of life, is contained all that goes to make up the future individual. His eye and hair color, the kind of physique he will have, the degree of mental ability—all are determined the moment the union of the two cells has taken place. Doesn't it seem marvelous beyond description to think that in the diminitive speck, just visible to one's naked eye, much smaller than the periods on this page, is wrapped up all the future possibilities of a human being? All the love, and energy, and ability, the activity and imagination, of each human being is packed away here to unfold when the proper time comes.

Of all these things that are to come into being in the newly-started life, each parent has contributed an exactly equal share. It may seem surprising that the egg cell, so many hundreds of times larger than the sperm cell, supplies only half of the traits that are to be inherited by the infant whose beginning is now taking place. But it is true that the father and the mother will each have an equal part in determining the appearance, the mental and emotional and physical make-up of their offspring.

There are good reasons for the difference in size of the egg and the sperm cells. First of all, the egg cell has no means of moving about, while each sperm cell is equipped with a lashing tail which makes rapid movement possible. The economy that nature practices in supplying only relatively few egg-cells in the body of the female must be met

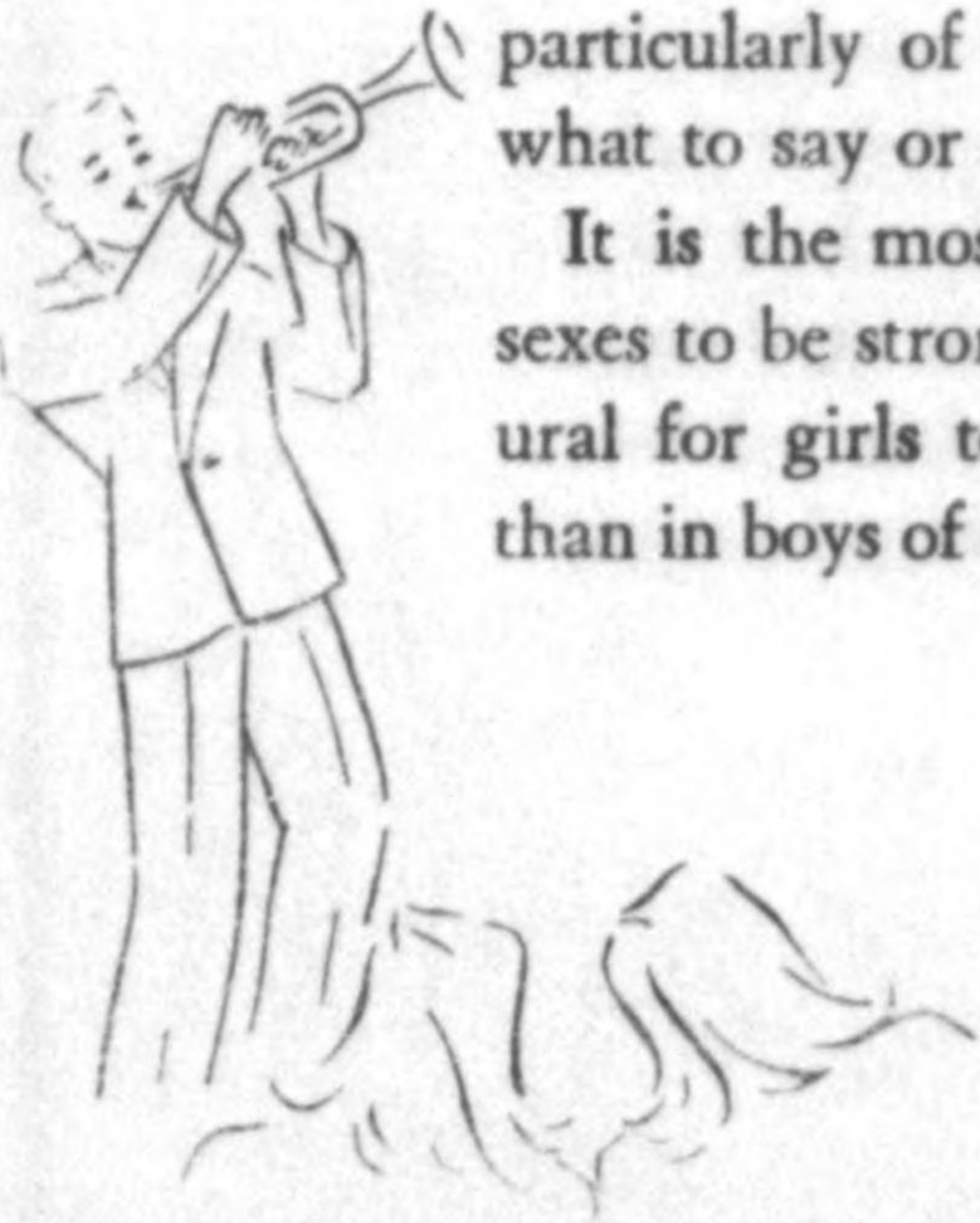
by enough lavishness in the provision of sperm cells to make sure that the egg will be found. Each tiny bit of creative material consists of but little beyond the nucleus containing the life-ingredients known as chromosomes, and the swimming tail that enables it to move about, but which it leaves behind when it enters the egg.

BECOMING ADJUSTED SOCIALLY

This brief and sketchy account of the way life begins, and its relation to what you have accepted very matter-of-factly as the changes making you into a woman, is concerned with only a part of what is happening to you. For while the great life-force is going about its business, causing changes in your body, there are other changes going on that seem of almost more importance to you.

The changes in your thoughts and feelings have been noticeable, haven't they? Feelings of modesty, of shrinking from the old natural association with boys, are mixed with a desire to attract them. Girls are often puzzled by their own contradictory actions. They find themselves talking and laughing loudly, longing to make a display by wearing clothes that will call attention, seeking the company of boys, particularly of older ones, and then not always knowing what to say or do when they are with them.

It is the most natural thing in the world for the two sexes to be strongly drawn toward each other. It is also natural for girls to be more interested in slightly older boys than in boys of their own age. Girls mature somewhat faster



than boys, from infancy on. This means that in the early teens, an age when most girls have reached sexual maturity, boys are only approaching this stage. Girls often prefer parties that include boys by the time they are eleven or twelve, while boys don't reach this social interest, including an interest in dancing, until sometimes as much as three or four years later.

Only when one tries to learn to interpret and explain one's feelings and impulses, when one tries to use them wisely, can one expect to progress to the normal adult stage and have one's sex life become a "magnificent symphony," as Stanley Hall, the great friend of youth, described it.

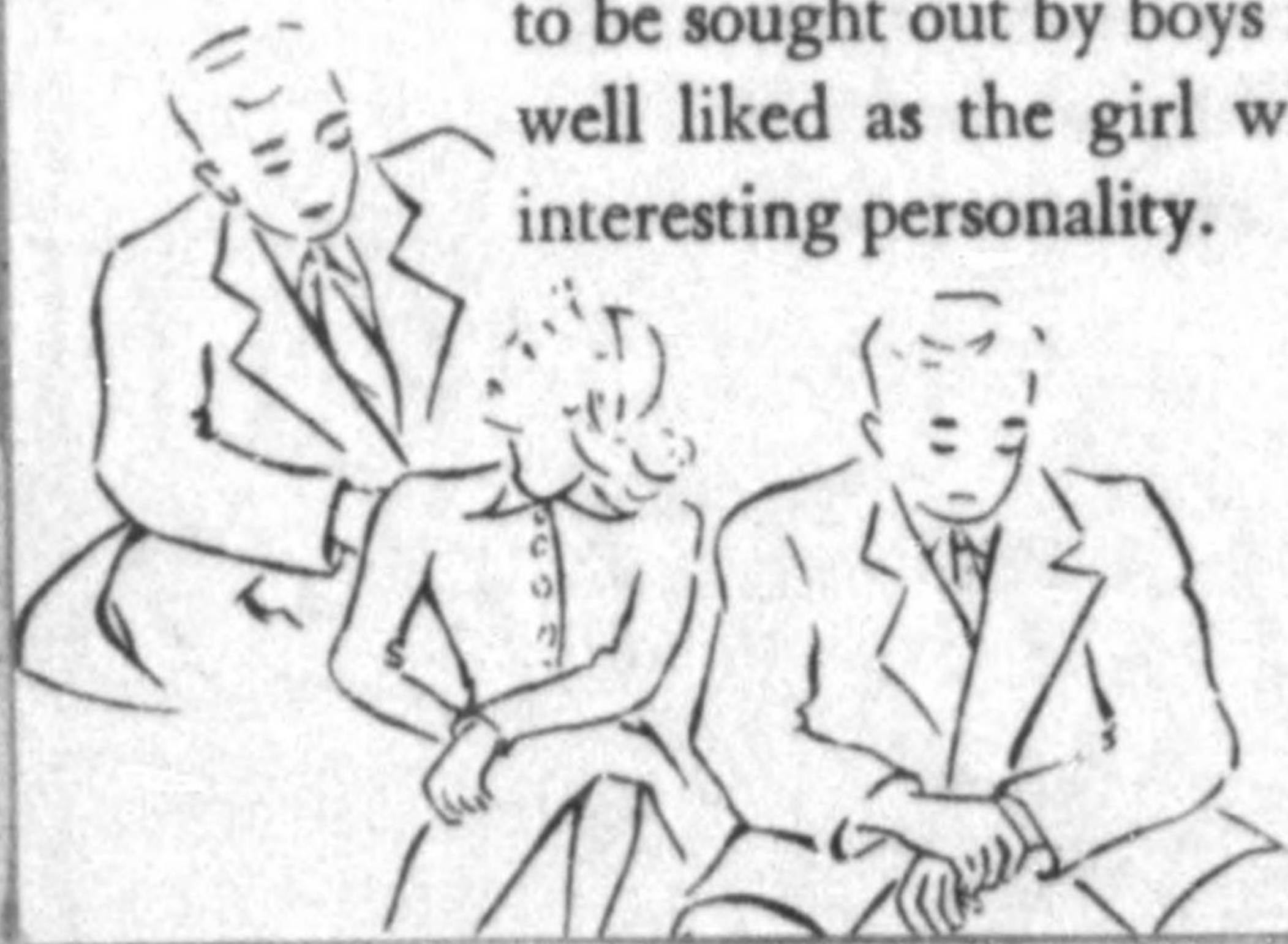
A girl who has understanding parents is lucky. If her father doesn't protest about every boy she goes out with (he's inclined to be a bit jealous, you see, because he doesn't like the idea of having rivals for your affection!) and her mother helps her by being sympathetic about her clothes, and her sudden feelings of strong interest in one boy after another, a girl has reason to be thankful. For mothers and fathers can be very loving, and desirous of being close to their daughters, without being able to recall much of what they are going through. Thus, one mother may resent it when her daughter wants more privacy than in the past, when she shuts herself away in her room, and also sometimes shuts her mother out of her thoughts and feelings. This very natural part of growing up serves a useful purpose, and a girl should not feel guilty about it. Not all mothers realize that without this impulse to have an inner life of

her own, without some drawing back and withholding of confidences, a girl cannot grow into independent womanhood. Each person must have times when she can think things out for herself, and come to her own conclusions as to what meanings life holds for her.

Of tremendous importance at this time are the friends one makes. A girl may find herself turning away from younger friends, and seeking the companionship of older girls she admires. The models she picks out now to copy may make a great deal of difference to her future happiness. If she chooses as friends girls who are cheap or shallow in their interests she automatically denies herself opportunities for growth. Too, girls often meet boys through their girl friends; and the chances are that she who makes wise selections in girl friends will become acquainted with boys, who, as they grow up, will be those in whom she has a lasting interest.

EVERY GIRL WANTS TO BE POPULAR

To a girl in her teens it is even more important to be popular with boys than with girls. But woe to the girl who seeks to be liked *only* by boys! You may be envious of a girl who always has a flock of dates. But remember that there are different ways of being attractive to boys. The girl who has to cheapen herself or lower her standards of behavior to be sought out by boys is unlikely in the long run to be as well liked as the girl who depends upon building up an interesting personality.



If you look around you, I daresay you'll find as many plain, quiet, and unassuming women happily married as there are pretty, vivacious, outstanding ones. This is because by the time marriage comes around, men are looking for something more than just a pretty face. In fact, boys themselves, when questioned, say that they care much more about a girl's being a good sport, that is, being fun to be with, being the kind of person who isn't always thinking about herself, and getting edgy and huffy when things don't go exactly right, than they do about her looks.

Many girls are in such a hurry to have the experience of loving and being loved that they are needlessly excited and concerned over the degree of their popularity in the teens. There is plenty of time! Because a girl is not immensely sought after in her middle teens does not mean that she will not have a wide circle of friends, of both sexes, when she is a little older. One of the few studies we have of marriage shows that being popular in one's teens is not at all a guarantee of happiness in one's married life.

Because the sex impulse works somewhat differently in boys and in girls, it is necessary for a girl to understand something of her responsibilities in her social contacts with boys. The urge to mate, of necessity, has to be very strong, otherwise the race would not go on. Because a boy's expression of sex drive is more direct than that of a girl, because he takes a more active part, it is sometimes hard for a girl to realize that she has, without knowing it, aroused a boy's strong sex feelings. Thus, a girl may ask how she may dis-

courage a boy's advances, not knowing that something in her behavior has encouraged the boy to believe that she will welcome his caresses. Perhaps she has leaned her head on his shoulder, or smoothed his hair, or put her hand in his overcoat pocket when she was cold. These slight acts may seem to him like an invitation. Once a boy's feelings have been stirred up by physical contacts or endearments it may be much harder for him to stop than the girl understands. She may have felt only a mildly pleasurable reaction. To put it briefly, it is up to the girl to see that her relationships with a boy are kept such that he is not forced to believe she is treating him unfairly.

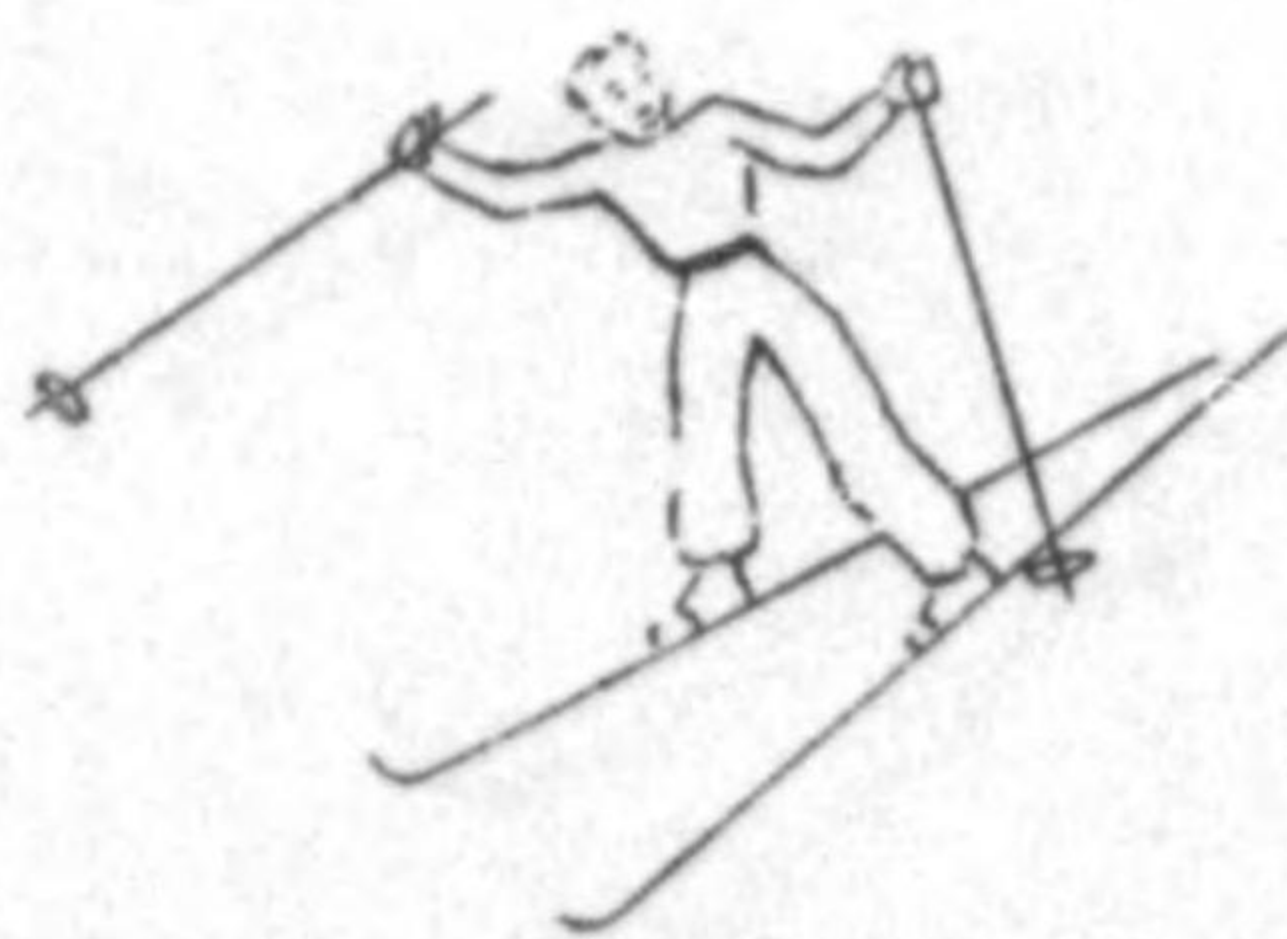
A GIRL'S SOCIAL RESPONSIBILITIES

It is one of the most natural things in the world for one to want to express one's feelings for another by physical contacts, but as kissing and other forms of endearment are the first steps leading to the surge of desire that demands complete union, desires of this sort must be checked by building up self-control, during the years when mating is not yet permissible. In recent years the freedom of adolescents to go about together unchaperoned has led in many cases to a letting down of restraint between the sexes. So-called "petting," "necking," or whatever the current phrase is, are indulged in without the censure that used to be placed on such demonstrations. Where real affection is the basis for such expressions, when neither boy nor girl feels a loss of self-respect as a result, there may be no harm done.

But in many cases such behavior is engaged in merely out of curiosity. When this is so, it is easy to see how one's self-restraint may be weakened, and the meaning of caresses cheapened and lost sight of. One's chief defense against this will be to choose as associates those whose standards of thought and action are such that they wish to reserve their demonstrations of affection for someone whom they really love. Their admiration for one another, and their feelings of respect will be greater if they come to a mutual understanding. Some girls believe that in order to be popular they must let every boy they go out with have a goodnight kiss; on the other hand, some boys really think that girls expect this. A girl has many other ways of showing her boy friends that she has enjoyed their company and the good times they provide. She can become a good conversationalist, or better yet, a good listener; for most boys like to talk about their interests, in which comparatively few girls bother to show any concern. She can become good at sports that boys enjoy; a boy who likes to ski wants the girl he takes along with him to be able to stand up on her own skis, not to be an old-fashioned clinging vine who shrieks helplessly and interferes with his fun. Whatever you may mistakenly have been led to believe, boys like girls with whom they can have good times, and their idea of a good time is by no means always based on sex appeal.

HEREDITY AND EUGENICS

Why is it important to know something about the way



human beings begin and develop? One very good reason why girls should give thought to the matter is because they, as future mothers, have a lot to say about what kind of people our race is going to consist of in the future. If girls pick out the right kind of mate they are safeguarding the children they will bring into the world; while if they marry hastily and thoughtlessly they may greatly endanger their children's future, because they do not know whether the stock they are marrying into is intelligent, strong, and hardy, nor do they know whether lack of emotional stability and insanity are present in the family connection. To meet and know the family of the young man is essential if a girl finds herself seriously interested, for seeing him out of his own background is sometimes deceptive.

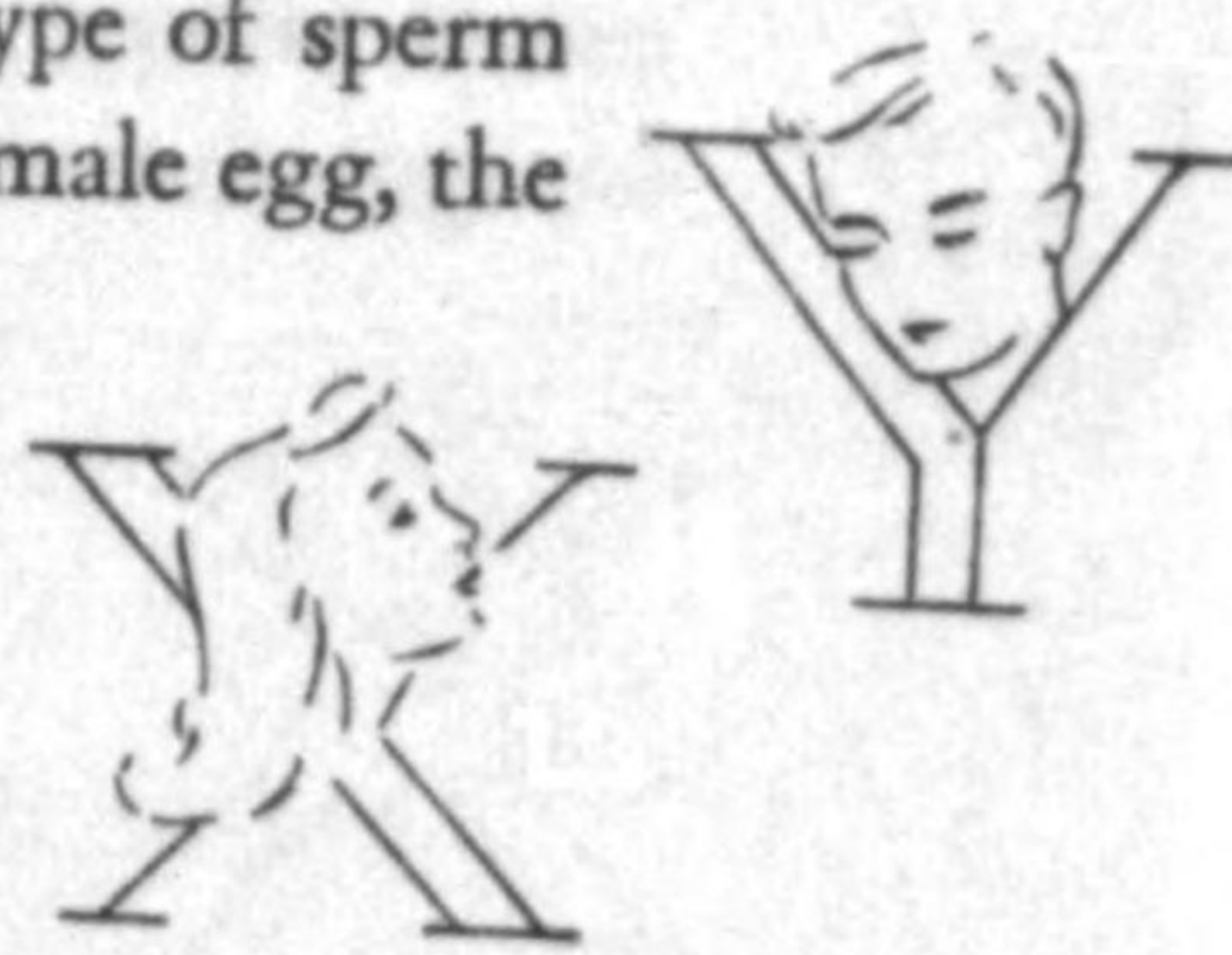
In many states it is now required by law that each partner to a marriage have a Wassermann test before he or she marries. One of the principal reasons for this law is that in this way it may help to establish the absence or presence of syphilis, and thus guard against the possibility of fastening on an unborn child the results of this disease. (In some states this law may not be necessary for most of their syphilis is of the non-infectious type; cardio-vascular and central nervous syphilis, rather than early infectious syphilis.) All couples that contemplate marriage, regardless of what state they live in, should have a complete medical examination which would include a Wassermann test.

Sometimes even the words "venereal disease" are frightening to a girl, because she doesn't know how these diseases

are acquired. Because there is only the remotest chance of their being transferred from one person to another except through the physical contact of sex intercourse, the girl whose self-respect keeps her from indulging in sex intimacy has nothing to worry about.

There are so many absorbing things about this amazing story of the beginnings of life that it is impossible to give more than the most general outlines of a few of the facts. But there are two questions which occur to everyone to which brief answers can be given. They are, Can the sex of a baby be determined beforehand? and, How do twins come about?

You have probably studied in your biology class the way cells are made up, and the way they divide and multiply. Do you remember that each egg and each sperm cell contain 48 chromosomes, or tiny collections of material, each stocked with the substances that determine the characteristics of the individual formed by the meeting of the egg and sperm cells? Perhaps for the purposes of our description it would be better to say that each of the two cells has 46 chromosomes, plus two other sex-deciding particles. In the female cell, the two sex-determining chromosomes are always of one type, called 'x'. But there are two types of mature sperm cell, one bearing an 'x' chromosome, one bearing a so-called 'y' chromosome. If it happens that a female egg is fertilized by a sperm bearing the 'x' type of chromosome, the resulting individual will be a girl; if the 'y' type of sperm cell happens to be the one that penetrates the female egg, the



resulting offspring will be a boy. Since no one can possibly know which kind of sperm cell will reach the egg first (it is supposed that the two kinds are produced in about equal numbers), it is quite beyond human powers to know in advance what the sex of a baby is going to be; although, as you can see, its sex has been determined since the moment of conception, when the sperm entered the egg. However, when it is nearly time for a baby to be born, it is sometimes possible for the physician to determine pretty accurately whether a boy or a girl is on the way, by listening to the heartbeats of the fetus. The rate is slightly different in boys and girls, so at least a guess can sometimes be made.

A physician can usually predict when twins are to be born, because he can hear through his stethoscope the beating of two hearts, or see the shadows of their bodies on an X-ray plate.

There are two kinds of twins, those rare cases that result from a single egg, and those that come about when 2 eggs have developed and been fertilized at the same time. When twins occur because of the splitting of an egg during the very early stages of the embryo, they are called identical twins, because they are actually halves of the same original material. Such twins are always of the same sex, they look very much alike, and have very similar characteristics. Often the resemblance is so close that even when the two are separated early in life, and brought up in totally different environments, they still remain similar in tastes, interests, and even health, when they are grown up.



Fraternal twins, or twins that happen to have come into the world at the same time through the accident of two eggs having been present and fertilized, are as often as not of different sexes, and are, of course, no more alike than any brothers and sisters, or two children of the same sex in the same family.

In the case of the identical twins, a single placenta has served to nourish both growing embryos, while in the case of fraternal twins, two placentas have developed. Sometimes when two babies of the same sex are born at the same time it never becomes known whether or not they are identical twins, because no examination of the placenta was made at the time of birth. So-called "Siamese" twins are those twins whose bodies never become completely separated during the process of development.

Cases in which more than two babies are born at a single time are much more rare than cases of fraternal twins, which occur once in about 85 or 86 births. Some cases may be either identical or fraternal multiple births. The chances that as many as five babies will develop at the same time, as in the case of the famous Dionne quintuplets, are only one in about 52 million. Some families are more likely to have twins than others, and there even seem to be more twins born in some countries than others.

HOW WE USE WHAT WE KNOW

It matters little how much we know about reproduction if we do not make use of this information in our own lives.

But because many of the odd attitudes that people developed in the past seem to have been due to lack of knowledge, it is hoped that full and frank discussion of the part sex plays in life may result in young people growing up with a more wholesome and natural way of thinking and acting about their sex life.

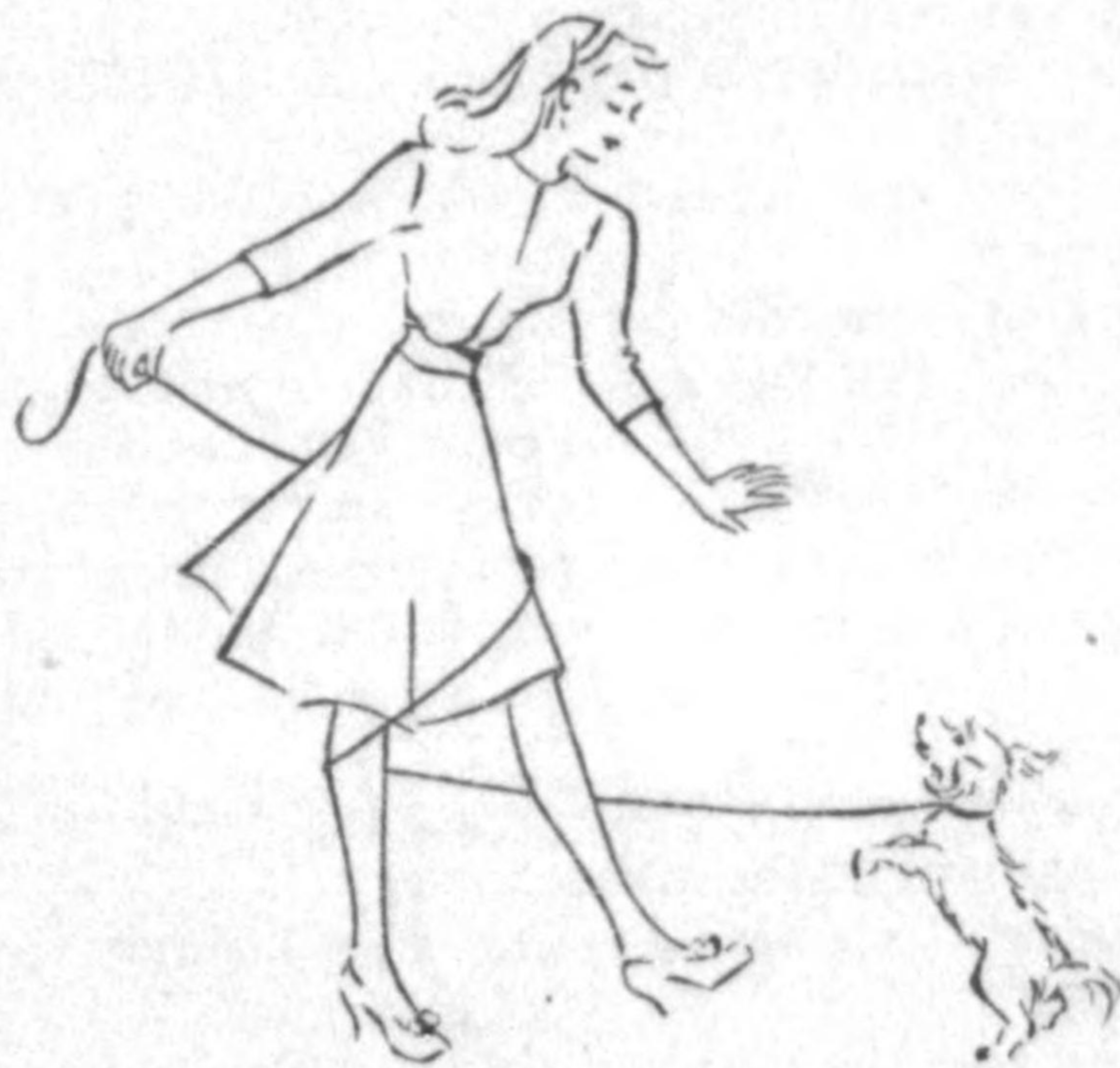
The way we act is closely related to the way we feel. If we feel bolstered up by real knowledge we are better able to handle all sorts of situations that might otherwise cause us embarrassment or confusion. If we know exactly how to prepare a meal with whatever materials we may have on hand we aren't flustered when company comes. If a girl knows something about the way sex impulses work, she is prepared to handle herself sensibly no matter what sort of social situation she may find herself in.

Not only is one's poise and comfort added to by having thought through some of the problems connected with sex, but one's future steps—love, marriage, and family life—will be taken with much more assurance of avoiding mistakes if we know the importance of adjusting this side of our lives.

Safeguarding one's own future happiness may seem like a selfish thing to do. But every time *one* home is made more secure against the distress of misunderstandings, of personality conflicts, of the deep unhappiness associated with sex problems, the whole of our society benefits. For each young man and woman who enter upon the great adventure of marriage with love and courage *and* some knowledge of how to make and keep their relations with each other good,

are making ready to give their children the best of training as a safeguard to *their* future.

An explorer who started out to climb unknown mountains or penetrate untouched jungles would be laughed at if he did not make careful plans, if he didn't prepare for all sorts of emergencies by stocking up with extra food and clothing and all kinds of possible necessities. You, who are starting out to explore life, are trying to stock up with the kind of knowledge and attitudes that will make you able to face all manner of exciting, unforeseeable problems. Here's to your success! May all the ingredients of your lives be blended so harmoniously that people, seeing you, will think, "I'd like to know that girl! She looks so happy and alive and interesting!"



Glossary

- Amniotic fluid (am-nee-ot'ic) fluid in which the fetus lies inside the sac called the am ni-on.
- Cilia (sil'i-a) hairlike processes capable of a vibrating or lashing movement.
- Coitus (kō'i-tus) sexual intercourse.
- Embryo (em'bree-ō) rudimentary form of unborn young.
- Epididymis (ep'i-did'y-mis) tubes leading from the testes to the vas deferens.
- Fallopian tubes (fal-lō'pe-an) tubes leading from the ovaries to the uterus.
- Fetus (fee'tus) the unborn young from the end of the third month until birth.
- Menstruation (men-stru-ā'tion) periodic discharge of blood from the uterus.
- Ovary (ō'vah-ry) the organ where the egg is developed.
- Penis (pē'nis) male organ of sexual union.
- Placenta (pla-sen'ta) the organ by means of which the fetus is nourished.
- Prepuce (pree'pus) loose fold of skin covering the end of the penis.
- Scrotum (scrō'tum) the sac containing the testes.
- Sperm (or sē'men) impregnating fluid of male animals.
- Testes (tes'teez) the two male genital glands corresponding to ovaries in the female, and producing sperm cells.
- Urethra (ū-ree'thra) canal carrying off urine from the bladder and, in males, serving as the genital duct.
- Uterus (ū'ter-us) the womb, or organ for containing and nourishing the young.
- Vagina (va-jy'na) the passage leading from the outside genital opening to the uterus.
- Vas deferens (vas deffer-enz) duct leading from the testicles.
- Vulva (vul'va) the external parts of the female genital organs.

school *E-1-2*

SOCIAL WORKER HELPS HANDICAPPED ADOLESCENTS WITH EMOTIONAL PROBLEMS

Acts as part of medical team to treat "whole child"

by **EDNA M. LAMPRON**

*Psychiatric Social Worker
Detroit Orthopaedic Clinic*

• An adolescent who must go to the hospital for orthopedic treatment is likely to resent it, unlike a young child, who is likely to take it as a matter of course. The adolescent may resent not only the hospitalization but the necessity for leaving his home, being separated from his family and friends, and interrupting his school life and other activities.

For many orthopedic conditions the surgery does not consist of a single operation, but a series of them, and the young patient has to remain under the supervision of the surgeon for years, sometimes until he is grown up. Each time a new procedure is begun, the child's earlier experiences tend to re-create themselves and to intensify the more recent ones.

Also, when an adolescent must make adjustments again and again, as he goes to the hospital, then to the convalescent home, back to his own home, and then again to the hospital, he must accept these difficulties while going through the normal conflicts of adolescence.

A crippled adolescent, like other adolescents, is attempting to relate himself to his world and is struggling with the process of growing up. Like other adolescents, he does much self-questioning. He becomes aware that he is different from most young people, and he realizes that his world and his activities are extremely limited. If he is disfigured, or is unable to use a leg or an arm or some other part of the body, he may be unable to achieve satisfactory adjustment to the boy-and-girl world. He resents his limitations and needs help in accepting them. But if he learns to accept

them he may eventually function successfully within his capacity.

The crippled young person can achieve this success more easily if he has the advantage of a corrective plan to help meet not only his orthopedic needs, but also his emotional ones. Resources for the general rehabilitation of a handicapped young person can be coordinated successfully through cooperation by the doctor, the nurse, the physical therapist, the social worker, the occupational therapist, the teacher in the special school, and the workers in the sheltered workshop and the rehabilitation bureau.

Medical team responsible

If the handicapped adolescent is to achieve a mature, well-adjusted personality and to attain the maximum degree of rehabilitation possible for him, personality difficulties should be recognized early and remedial measures begun. This early recognition and treatment are the responsibility of the medical team—the doctor, the nurse, and the medical-social worker.

To give some idea of the help that social workers are able to give handicapped children as they grow into adolescence, this paper presents the results of a study of 5 years' medical and social records of a number of boys and girls under care at the Detroit Orthopaedic Clinic. The clinic for the past quarter century has been providing medical services to orthopedically handicapped children and young adults.

About 10 years ago the clinic expanded its program, supplementing its medical services with general services that emphasize the whole child. The additional services include guidance in personality adjustment, provision of recreational opportunities, social case-work service, group therapy,

clubs, and education—a hospital convalescent school and a nursery school.

The children whose records were selected for study all had handicaps that made them noticeably different from other children. (Children with handicaps due to cerebral palsy were not included, as these children's social development is much more difficult to evaluate than that of other handicapped children.)

When the 34 boys and 26 girls in the group entered the clinic their ages ranged from 9 to 17 years.

Twenty-four were of American parentage, and 36 were American-born children of foreign parentage.

Thirty-one were Protestants; 29 were Roman Catholics.

Thirty had both parents in the home; the other 30 came from broken homes.

Twenty-seven of the families had incomes that were adequate for the family needs, but insufficient to pay for orthopedic care. Thirteen were totally dependent on public assistance for family needs; 20 were partly dependent.

Poliomyelitis was the most common diagnosis for these children. Thirty-two had had this diagnosis; the diagnoses for the other 28 fell into 17 different orthopedic classifications, the more common being scoliosis (7), osteomyelitis (4), and spina bifida (3).

Thirty-two of the children had had little play activity in their early years, as they had been handicapped before they were 5 years of age. Perhaps these children made a more comfortable adjustment to their handicaps because unlike the other 28, they had never known full physical activity.

Fifty of the children had had orthopedic surgery; 39 of these had had from 2 to 9 operations,

and had spent from a month to 3 years in a hospital. Most of the group had had, in addition, long periods of physical therapy. Also they had had casts applied, or had worn braces or special shoes, or had used crutches. Forty-three had attended an orthopedic school at some time.

Some of the children were retarded in their school grades. Some high-school pupils were 1 or 2 years behind, largely as a result of having been out of school for treatment.

Mental endowment studied

Psychometric examinations were obtained in many cases in which there was a question as to the child's mental endowment and such an examination was needed for vocational planning. Only two children received psychiatric study, as the clinic did not have this service at that time, and the community facilities were limited.

The clinic workers realized that little recreation was available for the boys and girls and that they needed to have some group experience before they would be ready to participate in ordinary group activities. With this in view the clinic initiated boys' and girls' clubs. The leaders were experienced in group work and used opportunities for the patient's release of energies and feelings. Written observations by the leaders helped the social worker to evaluate each patient's reaction to his handicap, and the degree to which he adjusted himself to group experience. Later, the boys and girls 16 years of age or over were helped to organize clubs through which they had opportunities for satisfactory boy-and-girl relationships and participation in community activities.

The social worker arranged for school or camp placement for some boys and girls and helped some to make vocational plans.

Freedom to express feelings

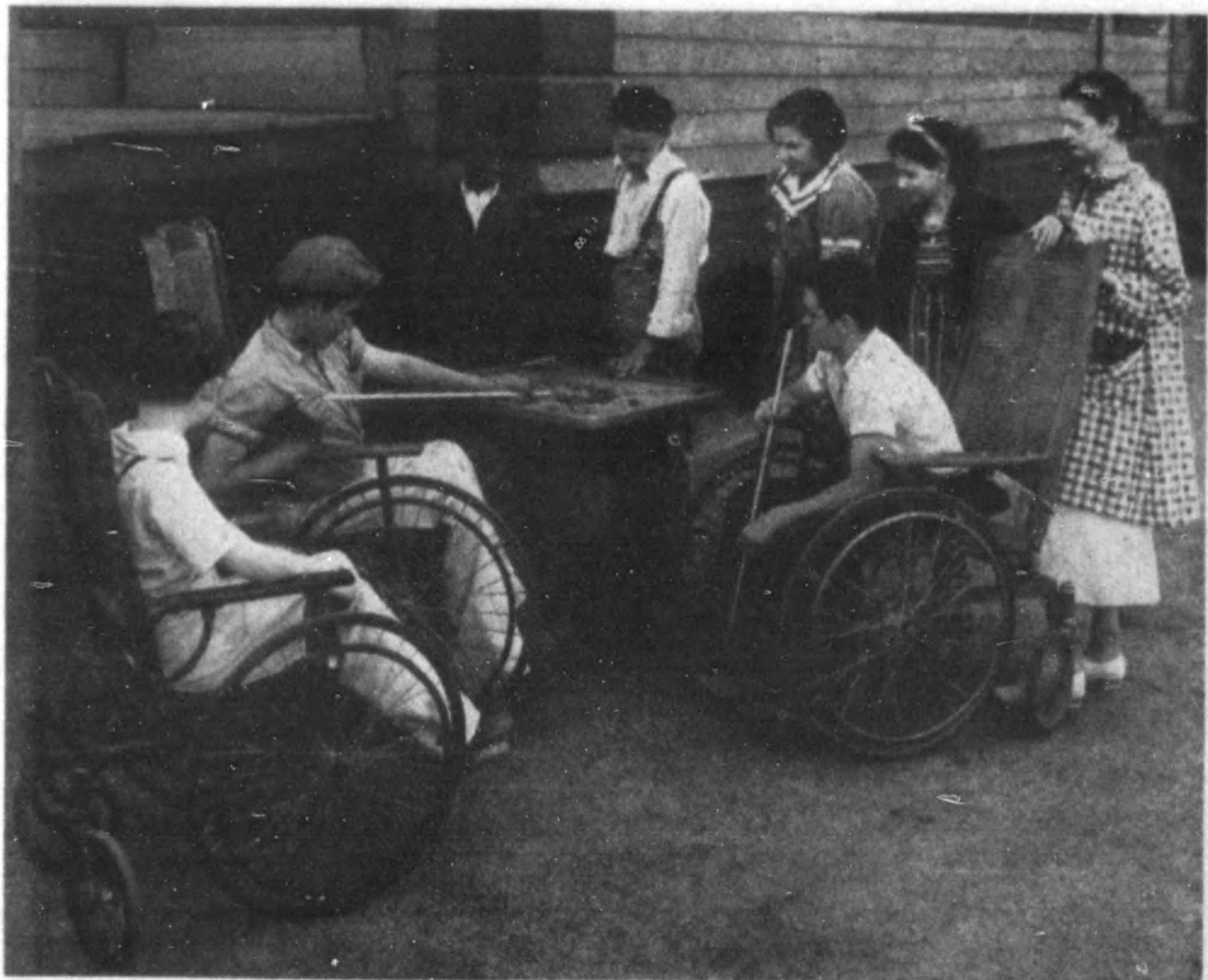
The worker's efforts were directed toward knowing the child and his family and gaining their confidence so that they felt free to express their feelings. When the

parents were unable to accept guidance, the social worker focused the treatment on the adolescent himself, as in the case of Eddie.

Eddie came to the attention of the clinic at the age of 13, in need of corrective surgery. His arm and leg were paralyzed as a result of poliomyelitis contracted at the age of 6 months. He was bitter about his handicap, and after the

all his attention to a second child, a husky, athletic girl. The bewildered mother pampered her son, but was not mature enough to understand how to help him effectively.

The handicap of Eddie's point of view could not be remedied by medical and surgical procedures alone. Here was a boy very much in need of "plus" service, which



Photograph lent by U. S. Office of Education

RECREATION TIME in a school for crippled children. Playing with other children of their own age helps adolescents to conquer the self-consciousness many feel.

surgery refused to try many activities that the doctor felt he was able to do. He refused to associate with boys and girls of his own age, was failing in his school work in spite of superior intelligence, and had threatened suicide.

The story does not begin with Eddie at 13, but in infancy, when his father played with him and exercised his tiny arms and legs, and hoped to make an athlete of him. These dreams were abruptly shattered when Eddie was stricken with infantile paralysis. Heartbroken, the father could see only the remnants of a plan that could never be realized, and gradually he turned away from the boy, giving

the clinic had to offer. Simultaneously with the doctor's treatment, the social worker began a series of conferences with Eddie, which lasted more than 2 years. He began to know and trust her as a friendly, sympathetic person. He could tell her of his unhappiness about his home. In a way she became a parent to him, and at the same time she was working with his parents to help them understand Eddie and what his crippled condition meant to him.

As soon as Eddie began to feel surer of himself at home, more certain that his family really loved him in spite of his physical disability, the social worker persuad-

ed and helped him to make his first steps toward getting along with other boys his own age. This was accomplished through the clinic boys' club, where he learned to share with others. In spite of a useless right arm, he became expert at ping-pong, and before long was independently associating with boys in his neighborhood. Eddie began to need money to

has girl friends. Six years of medical and social-service treatment have meant the difference between happy, productive adulthood and the barren future that he himself anticipated when he came to the clinic, saying, "There is nothing in life for me except selling pencils on a street corner."

The worker evaluated the social adjustment of the 60 young peo-

marked feelings of resentment, self-pity or depression. Of these maladjusted young people, 8 were between 14 and 16 at the time this report was written, and the other 4 were over 19. Nine of them had become handicapped at the age of 6 or younger.

Only one of these maladjusted boys and girls had understanding parents. This child was a girl who was severely crippled from infantile paralysis and could not move without help. In spite of her parents' encouragement and interest, the girl remained withdrawn and shy.

One maladjusted girl had a younger sister toward whom their father showed favoritism. This caused the crippled girl to adopt an attitude of withdrawal from social life. Her original self-consciousness increased, for in her crippled condition she could not hope to compete with her sister.

Ten of the 12 maladjusted boys and girls had overprotective and overanxious parents. This attitude constitutes a real danger to a crippled child's emotional growth, as the child may be prevented from gaining even the limited self-satisfaction that his handicap allows.

Since most of the children with overprotective parents are still under 16 years of age, it is possible that as they grow older they will become more and more independent.

One of the 12 maladjusted children, Elena, has had a very unhappy home life. Her father is alcoholic and unstable. He deserted her mother to live with another woman, and the mother's resentment has had its effect on Elena's life. Her mother would often say to her, "You are a cripple."

The girl visits her father occasionally, but he is ashamed to go out with her because of her crippled condition.

The social worker has recognized Elena's emotional needs, and has stood by her as an understanding friend, to whom the girl would talk about her problems.

Elena has gained some measure of social adjustment, but is still



Photograph lent by U. S. Office of Education

MODEL ships and planes are fun to build in this orthopedic school. Working together helps crippled children to adjust to life after they leave school.

keep up with his new friends, but he was afraid to ride on street cars or go about the streets alone. However, when a job in a small candy store was offered him it meant so much to him that he overcame his dread of riding street cars. When he wished to change his work a second job was found for him. Later, when he was without work he fearlessly began to make his own contacts and succeeded in getting a clerical position at a good salary.

Instead of being a burden to his parents, Eddie is carrying his share of the family responsibility; he goes about wherever he wishes, meets people easily and

ple at the end of the 5 years during which they had been receiving social treatment, and classified them in three groups, maladjusted, well-adjusted, and—the middle group—fairly comfortably adjusted.

Twelve of the 60 boys and girls were classified as maladjusted; 10 were classified as well-adjusted, and the remainder, 38, as fairly comfortably adjusted.

Maladjustment

The maladjusted young people include those who are shy and seclusive or too aggressive; those who are overdependent on their parents; and those who show

afraid to go out alone, even though the orthopedic surgeon says she is physically able to do so.

Fairly comfortable adjustment

In 38 cases both the parents and the child were given as much help as they would accept from the social worker and on the whole were making a fairly comfortable adjustment. A patient was considered to be "fairly comfortably adjusted" if he had been able to make some adaptation in his personality, so as to compromise with his handicap.

Much can be accomplished despite unfortunate parental attitudes and undesirable environments, and in 10 of the 38 cases of fairly comfortable adjustment the parents had accepted the child's handicap as though they said, "Here it is and we are resigned."

The common factors in effecting adjustment in these 38 cases were the adolescent's inner urge for growth and independence and the social worker's individual work with him, or with his parents, or with both.

Seven of the children in this group of 38 had parents who made the child feel unwanted and unloved. In 21 cases the child was subjected to antagonism by one parent and overprotection by the other.

One crippled boy was not allowed by his father to be present when there was company; he was hidden in another room. The mother would try to make amends to the boy by giving him candy and other sweets. As a result the boy became very heavy, a problem because of his paralyzed legs.

An example of the children that were considered fairly comfortably adjusted is shown in the story of Jake.

Jake, throughout his school years, had no associates outside of the home. He did not use his crippled arm at all. His parents were passive about his handicap. He had a strong feeling against associating with crippled children.

Apparently in an effort to gain a place with a group, he became involved in stealing.

The social worker helped him get a job where the pay satisfied him and he began using the arm which he had previously considered "of no use."

He did not welcome the social worker's effort to interest him in the boys' club and still is withdrawn from social contacts, but at 17 he is adjusted to his employment and has accepted his handicap as a reality.

Good adjustment

The 10 patients considered well adjusted have a wholesome attitude toward their handicap, have a wide range of interests, including participation in social activities and in employment, and do not show any appreciable behavior difficulties. In 8 of the 10 cases, the parents appear to be sufficiently well-adjusted to be able to maintain a constructive attitude toward the child and to stimulate him to as much participation as his handicap permits.

The mother of one boy in this group was overanxious about him and also showed favoritism to his sister, but the boy was able to derive sufficient constructive satisfaction from his father.

In these cases the social worker had excellent relationships with the patient and the parents. She was sought for the most part in times of crisis, such as proposed surgery or other long-time treatment. After she had helped relieve the parents' anxiety, her role became a supportive one.

In these 10 cases in which the boys and girls were considered to be well-adjusted we find evidence that well-adjusted parents helped the young people to develop their own potentialities and to aim at goals within their capacities. The parents of Charles, a severely handicapped boy, are a good example of this.

At the age of 19 Charles is able to engage satisfactorily in strenuous physical activity.

He was born with an anomaly of the right foot, which was rudimentary and attached to the hip. In addition, he had only three fingers on his left hand.

When he was 6, Charles begged his mother to allow him to ride a bicycle, at 8 he wanted to ice skate, and at 16 he selected driving a car as his next feat. Each time he wished to try a new activity, the parents suggested that he might try the new experience as soon as he felt ready.

Charles now drives a car, rides a bicycle, and ice skates, using a special crutch with a spike. He is well liked by boys and girls and is a leader in church and neighborhood groups. He is self-confident, successfully employed, and enjoying a full life within the limits of his handicap. Throughout we can see the constructive attitude of both parents toward Charles from his very early years. Though the goal seemed beyond the patient's limit, the parents neither discouraged nor encouraged his hopes but held them as a possibility, if and when he was able. This shows their acceptance of Charles as a normal child rather than a cripple.

Compensate for limitations

These 60 case studies show that handicapped adolescents have a deep feeling about their disability and their lessened opportunity for social life, employment, and marriage. Development of positive personality factors helps them to compensate for physical limitations and to live in the everyday world with a maximum of usefulness and comfort to themselves and to the community. This development can be helped by working with the child in his home, his school, and his community, as early as possible, and this is definitely within the province of social service.

The community has already assumed great responsibility for the crippled child's medical care. It is a long and expensive program, involving private as well as public funds. If the program of an orthopedic agency is to be an adequate one, the challenge of treating the whole child should be accepted.



FUTURE HEALTH FOR



Your
Child

SAFEGUARD YOUR CHILD AGAINST...

tuberculosis



What is the Nature of This Test Against Tuberculosis?

This is not an immunization, since there is no known method of immunizing against tuberculosis. However, this test is of great benefit in "screening" campaigns to ascertain persons who are "susceptible" to tuberculosis. It is the first step in locating possible cases of tuberculosis for further study. This test does not hurt and is as simple and easy as wearing a small strip of adhesive tape for two days. If all students were patch-tested once a year, infections and early cases would be brought to light for further study and care at the stage when there is the best opportunity for cure and the prevention of spreading the infection.

Who Should Receive This Test?

Every student in school should have the benefit of an annual test by means of TUBERCULIN PATCH TEST (VOLLMER) *Lederle*. Adults should be tested where there is suspicion of late tuberculosis.

When Should This Test Be Given?

The test should be applied preferably at the beginning of the school year, so that further testing may proceed at once and students or others who actually have tuberculosis may be spared the effect of

intense school activity upon a disease which usually can be promptly arrested if treated by proper means.

What Results Are Accomplished By This Test?

The majority of students show no reaction at all. Even if two red spots like those in the picture appear after the tape is removed, it does not mean that active tuberculosis is present. It simply indicates that a further examination should be made of the case by means of X-rays and physical examinations, since the person either has had, or has, tuberculosis. Un-suspected cases can thus be detected. The earlier the disease is treated, the more promptly it will be halted.

Method of Using This Test

One of the simplest, easiest, and most efficient ways to track down unsuspected tuberculosis is by means of the Tuberculin Patch Test. TUBERCULIN PATCH TEST (VOLLMER) *Lederle* is a strip of adhesive tape on which are three little squares of paper. Two of the squares contain the testing material, and the third square checks the accuracy of the test. The adhesive tape is left on the skin for two days, then removed, and two days later the result can be interpreted by the physician making the test.

Do not let the test strip get wet! Do not take the test strip off to look under it!

SAFEGUARD YOUR CHILD AGAINST TUBERCULOSIS...



**Put it on -
MONDAY**



**Take it off -
WEDNESDAY**



**Positive reaction -
(if any) FRIDAY**

LEDERLE LABORATORIES, INC. A Unit of American Cyanamid Company
30 ROCKEFELLER PLAZA, NEW YORK 20, N.Y.

SAFEGUARD YOUR CHILD AGAINST...

SAFEGUARD YOUR CHILD...

diphtheria



What Is the Nature of Immunization Against Diphtheria?

There have just been made available by *Lederle* new toxoids which are vastly superior to anything previously produced. These purogenated toxoids appear essentially not to cause reactions in children and adults. In the alum-precipitated forms, the alum content has been reduced by 75%, thus reducing to a minimum any local reaction caused by that substance. In these toxoids, the nitrogen-containing impurities have been reduced to approximately 0.15%.

This is a simple, rapid, effective method of preventing diphtheria by conferring upon the child a durable active immunity. By active immunity is meant a long-term resistance which the child builds up gradually over a period of weeks, while the injections are taking effect. This is the opposite of "passive" immunity, which is produced in non-immune children, for temporary protection, by means of an anti-serum.

When Should This Immunization Be Practiced?

Ordinarily, the best time to immunize against diphtheria is between the sixth and ninth month of life. Every child should be immunized against diphtheria in infancy, and such children as show they are still sensitive (by means of a special test called the Schick test) should be immunized just prior to entrance into school.

What Results Are Accomplished By This Immunization?

A lasting immunity to diphtheria is secured, which can be increased at any time by means of a booster dose of toxoid.

Who Should Apply This Immunization?

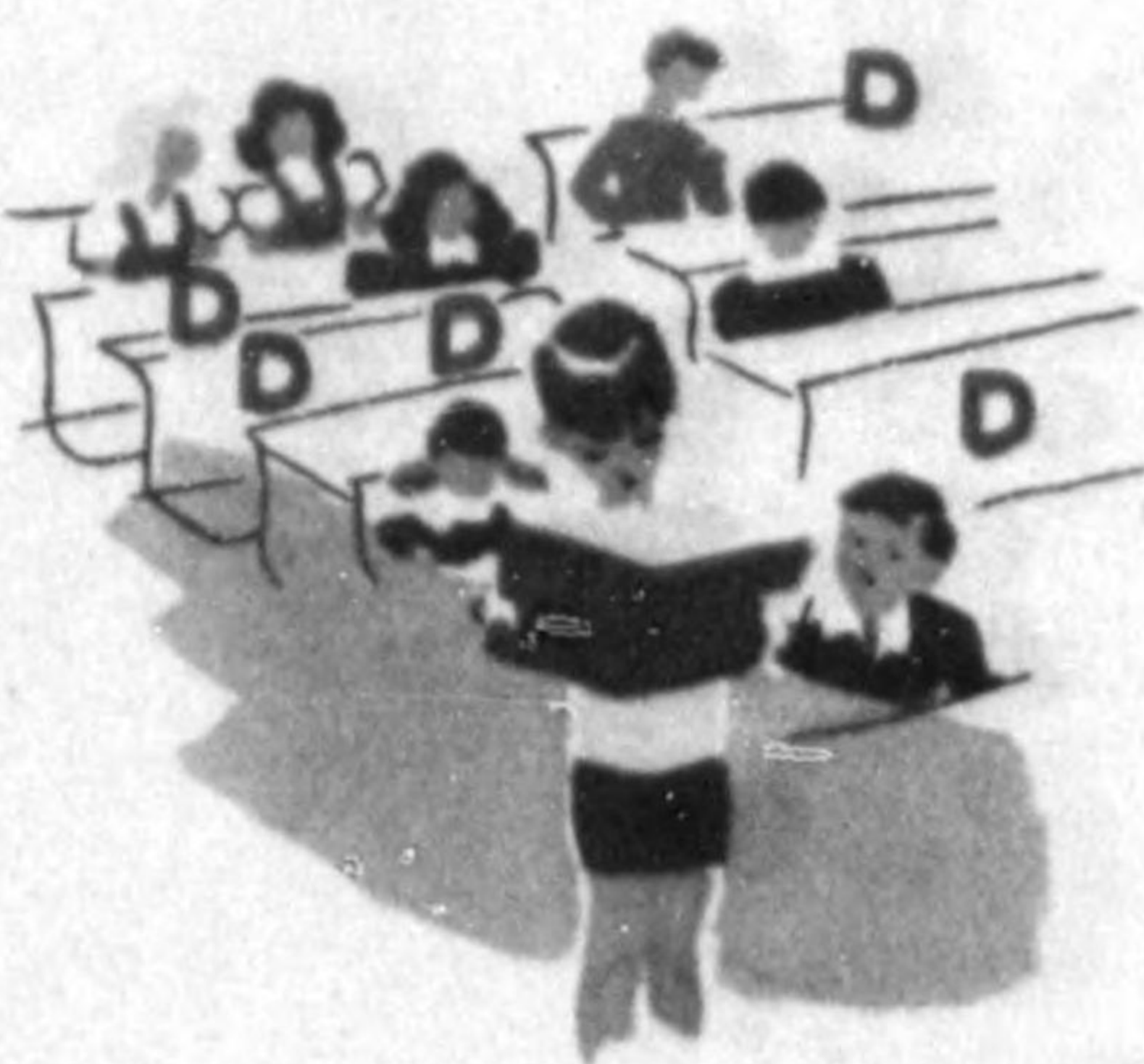
Your physician, or a trained nurse under his supervision, in his office, at your home, or in a clinic.

What Is the Nature of Immunization Against Tetanus?

There have just been made available toxoids which are vastly superior to those previously produced. These purogenated toxoids, to cause reactions in children and adults. In the alum-precipitated forms, the alum content has been reduced by 75%, thus reducing to a minimum any local reaction caused by that substance. In these toxoids, the nitrogen-containing impurities have been reduced to approximately 0.15%. Protection against tetanus is provided by protection against diphtheria, both by means of "toxoids." In fact a combined diphtheria-tetanus toxoid is coming into increasing use, providing durable immunity to both these diseases.

Who Should Receive This Immunization?

While previously anyone engaged in a profession (military services, dangerous sports, or farming, highway accident risks, etc.) was considered a suitable subject for this immunization, the incidence of tetanus is increasing that everyone should be immunized against tetanus.



ONLY YOUR PHYSICIAN CAN PROTECT YOUR CHILD

SAFEGUARD YOUR CHILD AGAINST...

SAFEGUARD YOUR CHILD...

tetanus!

What Is the Nature of Immunization Against Tetanus?

There have just been made available by *Lederle* new toxoids which are vastly superior to anything previously produced. These purogenated toxoids appear not to cause reactions in children and adults. In the alum-precipitated forms, the alum content has been reduced by 75%, thus reducing to a minimum any local reaction caused by that substance. In these toxoids, the nitrogen-containing impurities have been reduced to approximately 0.15%. Protection against tetanus is very similar to protection against diphtheria, both being achieved by means of "toxoids." In fact a combined diphtheria-tetanus toxoid is coming into increasing use for providing durable immunity to both these diseases.

Who Should Receive This Immunization?

While previously anyone engaged in a hazardous occupation (military services, dangerous sports, gardening or farming, highway accident risks, etc.) was considered a suitable subject for this immunization, the feeling is increasing that everyone should be immunized against tetanus.



When Should This Immunization Be Given?

It is preferably given between the sixth and ninth month of life.

What Results Are Accomplished By This Immunization?

A durable immunity to tetanus is achieved, and the patient's immune defenses are placed in a state of readiness so that upon the receipt of a severe injury that is contaminated with dirt, or otherwise may be suspected of harboring tetanus organisms, the individual's immunity may be greatly stimulated immediately by a "booster" dose of tetanus toxoid. This is preferable to administering antitetanus serum.

Who Should Apply This Immunization?

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or in a clinic.

What Are the Advantages of Simultaneous Immunization Both Diphtheria and Tetanus?

The production of active immunity is a simple, rapid, and highly effective means of acquiring immunity to both diphtheria and tetanus. Acquiring immunity by this means, it can be used to stimulate immunity to tetanus.

The outstanding achievement of the immunology has been the purification of toxoids by the alcohol-fractionation process. These PUROGENATED* TOXOIDS represent the greatest advance in active immunization since the discovery of toxoids. They have been found to be far more pure than previous toxoids. (For other advantages, see preceding pages on Diphtheria and Tetanus.)

When Should This Immunization Be Given?

Every child should be immunized against tetanus simultaneously in infancy. Later, when they are still sensitive (determined by means of a test called the Schick test) to diphtheria, a booster dose just prior to entrance into school.

The best time to immunize children against tetanus, if this has not been done, there should be immunizing them at any time during their lives.

What Results Are Accomplished By This Immunization?

The child secures within a month or so a durable immunity to both diphtheria and tetanus. This immunity is increased at any time that there is a subsequent exposure by a so-called "booster" dose of diphtheria or tetanus toxoid, or both toxoids.

Who Should Apply This Immunization?

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or in a clinic.

*Trade Mark

PROTECT YOUR CHILD AGAINST THE COMMON CHILDHOOD DISEASES

SAFEGUARD YOUR CHILD AGAINST...

anus!

both *diphtheria*
and *tetanus!*

What Are the Advantages of Simultaneous Immunization Against Both Diphtheria and Tetanus?

The production of active immunity by means of toxoids is a simple, rapid, and highly effective method of preventing both diphtheria and tetanus. At any time after acquiring immunity by this means, a "booster" dose may be used to stimulate immunity to either diphtheria or tetanus.

The outstanding achievement of the year in preventive immunology has been the purification and crystallization of toxoids by the alcohol-fractionation method of Pillemer. These PUROGENATED* TOXOIDS *Lederle* constitute the greatest advance in active immunization technique since the discovery of toxoids. The resulting toxoids have been found to be far more pure than the parent toxoids. (For other advantages, see preceding sections on Diphtheria and Tetanus.)

When Should This Immunization Be Practiced?

Every child should be immunized against diphtheria and tetanus simultaneously in infancy. Later, such children as are still sensitive (determined by means of a special test called the Schick test) to diphtheria, should receive a booster dose just prior to entrance into school.

The best time to immunize children is in infancy, but if this has not been done, there should be no hesitation in immunizing them at any time during the preschool years.

What Results Are Accomplished By This Immunization?

The child secures within a month or two an active lasting immunity to both diphtheria and tetanus, which can be increased at any time that there is an epidemic or undue exposure by a so-called "booster" dose of either diphtheria or tetanus toxoid, or both toxoids.

Who Should Apply This Immunization?

Your physician, or a trained nurse under his supervision, in his office, at your home, or in a clinic.

*Trade Mark



Immunization Be Given?

between the sixth and ninth

Accomplished By This

to tetanus is achieved, and the lenses are placed in a state of the receipt of a severe injury with dirt, or otherwise may be tetanus organisms, the indi- be greatly stimulated immedi- dose of tetanus toxoid. This is tering antitetanus serum.

This Immunization?

trained nurse acting under his ce, at your home, or in a clinic.

NST THE COMMON CHILDHOOD INFECTIONS!

SAFEGUARD YOUR CHILD AGAINST...

smallpox



What is the Nature of Smallpox Vaccination?

This is a simple, rapid, painless vaccination, which leaves the skin almost intact. Ordinarily, no dressing is necessary and the effectiveness of the vaccine is promptly shown by a "reaction" of redness, or small blisters.

Who Should Receive This Vaccination?

Every child should be vaccinated in infancy, revaccinated on entering school, and revaccinated whenever an epidemic appears.

When Should This Vaccination Be Practiced?

One of the most authoritative groups of children's specialists in the world states as follows—"Vaccinate as early in life as possible . . .". No child should be permitted to go beyond three years of age without such vaccination.

What Results Are Accomplished By This Vaccination?

The child, or adult, is protected for a considerable period of time against one of the most serious epidemic diseases known to man.

Who Should Apply This Vaccination?

Your physician, or a trained nurse acting under his supervision, either at his office, in your home, or at a clinic.



SAFEGUARD YOUR CHILD AGAINST...
FOLLOWING UPPER



Who Should Receive This Vaccination?

Many individuals react very differently to these vaccines during epidemics when others do not. Your physician should be consulted in the group in which your child belongs.

When Should This Vaccination Be Practiced?

It may be given at any time, but it is probably unnecessary. The type of vaccine which should not be used should be discussed with your physician.

What Results Are Accomplished By This Vaccination?

The results that are likely to be obtained are indicated in advance. Physicians should be consulted with such vaccines to determine the benefit in that individual case. The vaccination may be repeated year after year. In those cases where they are not effective, of course, discontinue them.

Who Should Apply This Vaccination?

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or at a clinic.

LEDFELT LABORATORIES, INC., 30 ROCKEFELLER PLACE, NEW YORK 20, N.Y.

SAFEGUARD YOUR CHILD AGAINST SECONDARY INVADERS FOLLOWING UPPER RESPIRATORY INFECTIONS, PARTICULARLY ...

“colds”!



What is the Nature of Immunization Against Secondary Invaders?

Upper respiratory infections, including the “common cold”, are frequently caused by invaders that either are not fully identified, or are of such a nature that there is no known protection against them. All that can be done for such infections is to provide good nursing care, rest, fluids, and palliatives for relief of symptoms. Following these infections, however, well recognized bacterial invaders enter the respiratory tract and may cause a good deal of disability from prolonged bronchitis, tracheitis, or laryngitis. It is against these secondary invaders that mixed or “combined” vaccines are employed.

Who Should Receive This Vaccine?

Many individuals react very favorably to repeated injections of these vaccines during the winter season, whereas others do not. Your physician is the best judge of the group in which your child belongs.

When Should This Vaccine Be Given?

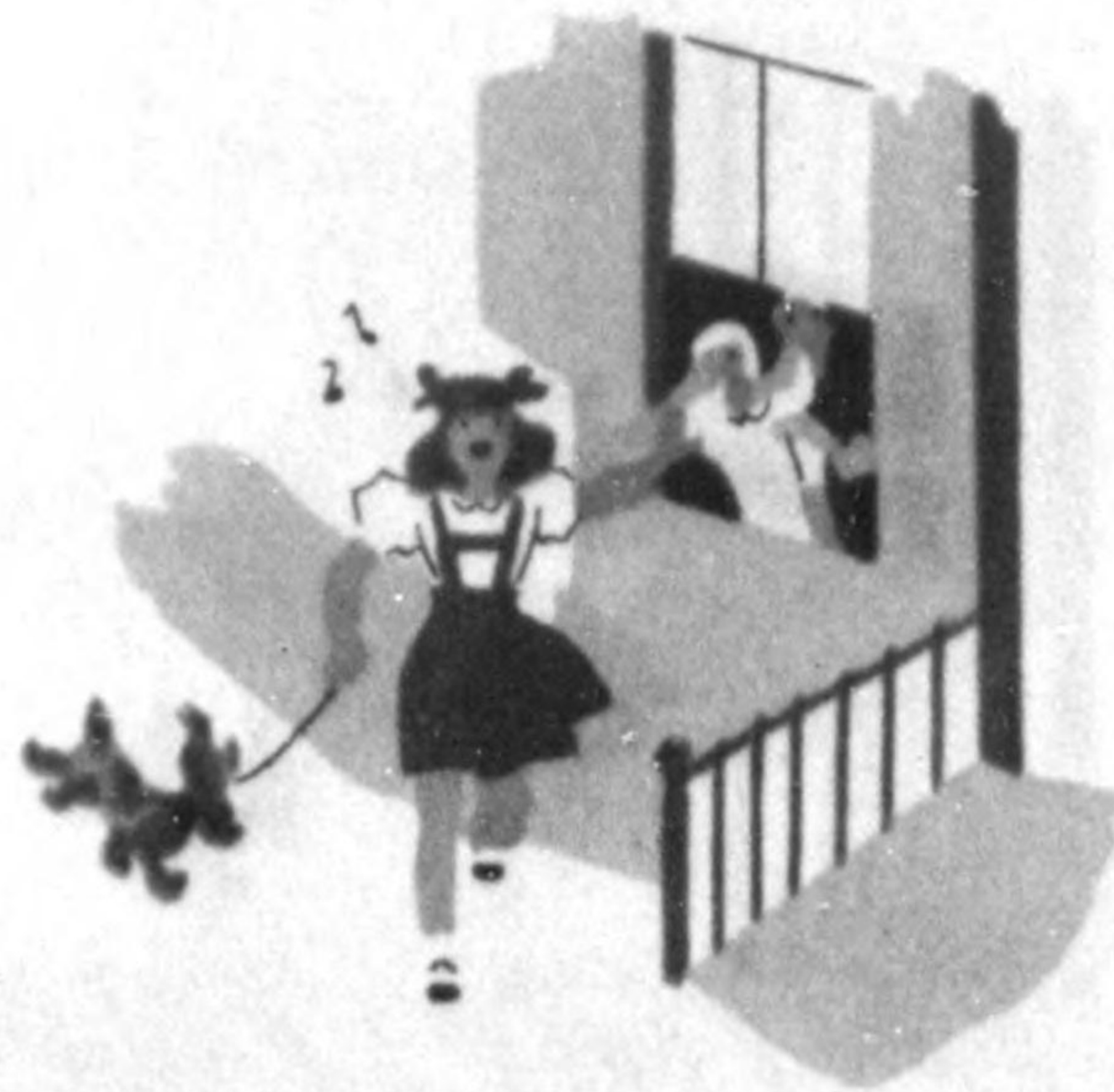
It may be given at any time, except that its use in infants is probably unnecessary. There are certain conditions in which vaccine should not be used, and your physician is acquainted with these contra-indications.

What Results Are Accomplished By This Vaccination?

The results that are likely to be achieved cannot be predicted in advance. Physicians frequently test a patient with such vaccines to determine whether they are of benefit in that individual case. If they are of benefit, they may be repeated year after year for their protective value. In those cases where they are not of use the physician will, of course, discontinue their use.

Who Should Apply This Vaccine?

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or in a clinic.



SAFEGUARD YOU

What is the Nature Against Virus I

Virus influenza, or “Spanish influenza” in 1918 and has been great. Immunization is derived from a strong and lengthy immunization disease. It is ordinarily given by skin.

Who Should Receive

Children and adults (depending on the virus type) should receive

When Should This Given?

It may be given at any age during an epidemic—which occurs every few years—vaccine should be given when it reaches your area. A “booster” epidemic is delayed several years or may be given for any

What Results Are Immunization?

An immunity of unknown duration

Who Should Administer Immunization?

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or in a clinic.

BY INVADERS
PARTICULARLY ...

olds!

**Nature of Immunization
Against Secondary Invaders?**

Infections, including the "common cold", are caused by invaders that either are primary or are of such a nature that there is no immunity against them. All that can be done is to provide good nursing care, rest, and medicine for relief of symptoms. Following influenza, however, well recognized bacterial invaders enter the respiratory tract and may cause a good deal of trouble, such as prolonged bronchitis, tracheitis, or pneumonia. In these cases secondary invaders that are not normally present and vaccines are employed.



SAFEGUARD YOUR CHILD AGAINST...

virus influenza

**What is the Nature of Immunization
Against Virus Influenza?**

Virus influenza, or "Spanish influenza", swept the world in 1918 and has been greatly dreaded since that time. This immunization is derived from chick embryos and provides a strong and lengthy immunity to the virus form of the disease. It is ordinarily given in a single dose beneath the skin.



Who Should Receive This Immunization?

Children and adults endangered by epidemic influenza (of the virus type) should receive this immunization.

**When Should This Immunization Be
Given?**

It may be given at any age over two years. In the presence of epidemics—which occur in this country every few years—vaccine should be given before the epidemic reaches your area. A "booster" dose may be given if the epidemic is delayed several months in reaching your area, or may be given for any future epidemic.



**What Results Are Accomplished By This
Immunization?**

An immunity of unknown duration results.

**Who Should Administer This
Immunization?**

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or in a clinic.

SAFEGUARD YOUR CHILD AGAINST...

measles

What Is the Nature of Immunization Against Measles?

There is no known means of protecting in all instances against measles. However, an efficient means has been formulated for modifying measles to such an extent that it need no longer be feared, and then permitting the child to have a "light case" of the disease which in itself confers a very long, if not permanent, immunity. This protection is conferred by certain constituents of the blood known as immune serum globulins.

Lederle research now makes available a refined measles antibody solution that is superior in the following respects: (1) The solution contains all the immune components of whole blood; (2) It contains four times the total antibodies per dose, compared with products previously available; and (3) It has had reaction-producing materials removed to such an extent that unpleasant after-effects are likely to prove exceptionally rare or nonexistent.

Who Should Receive This Protection?

All children exposed to the disease should receive this immune serum globulin.

When Should This Protection Be Given?

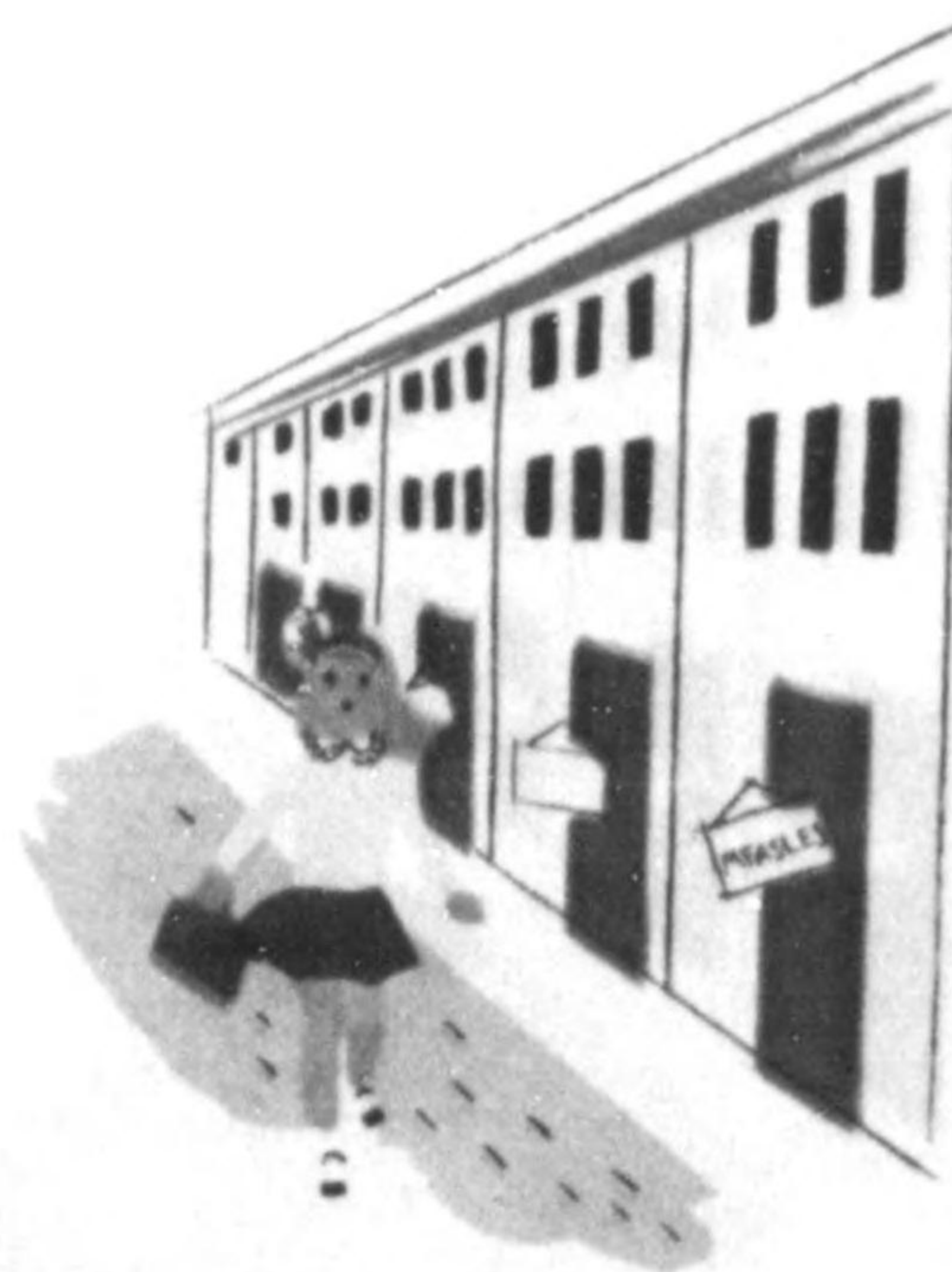
It may be given at any age, within 6 days after exposure to the disease.

What Results Are Accomplished By This Protection?

If the immune serum globulin is given within 6 days after exposure, the disease usually will be modified, if a moderate dose of globulin is given, so that the child will have a "mild attack." It is much wiser for the child to have a mild attack, acquiring lasting immunity, than to give complete protection for only a few weeks through passive immunity. If a larger dose of globulin is given, it is quite usual for the disease not to develop. In that event, the same procedure should be gone through the next time there is exposure. Your physician will, of course, determine appropriate dosage.

Who Should Apply This Immunization?

Your physician, or a trained nurse acting under his supervision, in his office, at your home, or in a clinic.



SAFEGUARD YOUR CHILD AGAINST...

What Is the Nature of Immunization Against Whooping Cough?

The best method for protecting your child against whooping cough is by means of *CINE PHASE I Lederle*. This vaccine gives your child ample time to immunize himself before he has been in contact with whooping cough. Where it is desired to protect children directly exposed to children directly exposed to cases, *PERTUSSIS ANTI* is available.

Who Should Receive This Protection?

Since the consensus is that the best protection is against whooping cough, protection.



ONLY YOUR PHYSICIAN CAN PROTECT YOU

SAFEGUARD YOUR CHILD AGAINST...

SAFEGUARD YOUR

whooping cough

What Is the Nature of Immunization Against Whooping Cough?

The best method for providing protection against this disease is by means of a vaccine. PERTUSSIS VACCINE PHASE I *Lederle* is most useful where there is ample time to immunize a child who has not recently been in contact with whooping-cough cases.

Where it is desired to give partial or complete protection to children directly in contact with whooping-cough cases, PERTUSSIS ANTIGEN *Lederle* may be used.

Who Should Receive This Immunization?

Since the consensus is that there is no natural immunity against whooping cough, all children should receive this protection.



When Should This Immunization Be Practiced?

All children should be immunized between the ages of 6 months and 6 years of age. Whenever after the original immunization they are in close contact with whooping-cough cases, they should receive additional protection by means of a booster dose of vaccine. The duration of protection from whooping-cough vaccines is not fully known, but a single dose is not a permanent, and occasionally not a complete, protection.

What Results Are Accomplished By This Immunization?

The child has a considerable degree of protection for many months or years following the administration of the Phase I Vaccine. The child is able by means of a booster dose at any time to step up his immunity if exposed to whooping-cough cases, or if in the midst of an epidemic. While whooping cough itself is not ordinarily very serious in its immediate effects, the complications which follow it—bronchitis, bronchopneumonia, middle ear disease, kidney disease, heart disease—may prove a serious menace to future health.

Who Should Apply This Immunization?

Your physician, or a trained nurse under his supervision, in his office, at your home, or in a clinic.



PROTECT YOUR CHILD AGAINST THE COMMON CHILD

SAFEGUARD YOUR CHILD AGAINST...

cough

typhoid fever



Immunization Be

immunized between the ages of 1 and 3 years of age. Whenever after the original immunization a child has close contact with whooping-cough or receives additional protection by means of a second dose of vaccine. The duration of protection afforded by whooping-cough vaccines is not fully known. It is not a permanent, and occasional booster protection.

Accomplished By This

A considerable degree of protection for a child is accomplished following the administration of this vaccine. The child is able by means of a booster dose to step up his immunity if exposed to new cases, or if in the midst of an outbreak of whooping-cough itself is not ordinarily complicated by severe effects, the complications such as bronchopneumonia, middle ear infection, heart disease—may prove a serious health.

Who Should Apply This Immunization?

Your physician, or a trained nurse under his supervision, in his office, at your home, or in a clinic.



What is the Nature of Immunization Against Typhoid Fever?

This is a simple, rapid, efficient method of immunization by means of a vaccine, which has been proven in both World War I and World War II.

Who Should Receive This Immunization?

All children and adults should receive this immunization who are likely to be exposed to typhoid fever organisms, either through the handling of patients, through consuming contaminated water, milk, or other liquids, or foods. Those who are likely to live in the tropics particularly need this protection.

When Should This Immunization Be Practiced?

Vaccination may be given at any time, in infancy, childhood, youth, or adult life.

What Results Are Accomplished By This Immunization?

Vaccination provides a complete immunity in almost all cases. In populations such as Army personnel, who were vaccinated en masse with the combined vaccine, both typhoid and paratyphoid fevers were essentially eradicated.

Who Should Apply This Immunization?

Your physician, or a trained nurse under his supervision, in his office, at your home, or in a clinic.

AGAINST THE COMMON CHILDHOOD INFECTIONS!

D13a

*The diagnosis
of Gonorrhoea
in women*

Collection of material for laboratory examination



P. S. Pelouze, M.D.

The Diagnosis of Gonorrhoea in Women

P. S. Pelouze, M. D.*

No matter how efficacious the treatment of gonorrhoea may become, it is of little avail unless the infected female gets it. In order that she may get treatment, the infection must be revealed, and in countless thousands of women this is not done despite the fact that they may transmit gonorrhoea to one or many males.

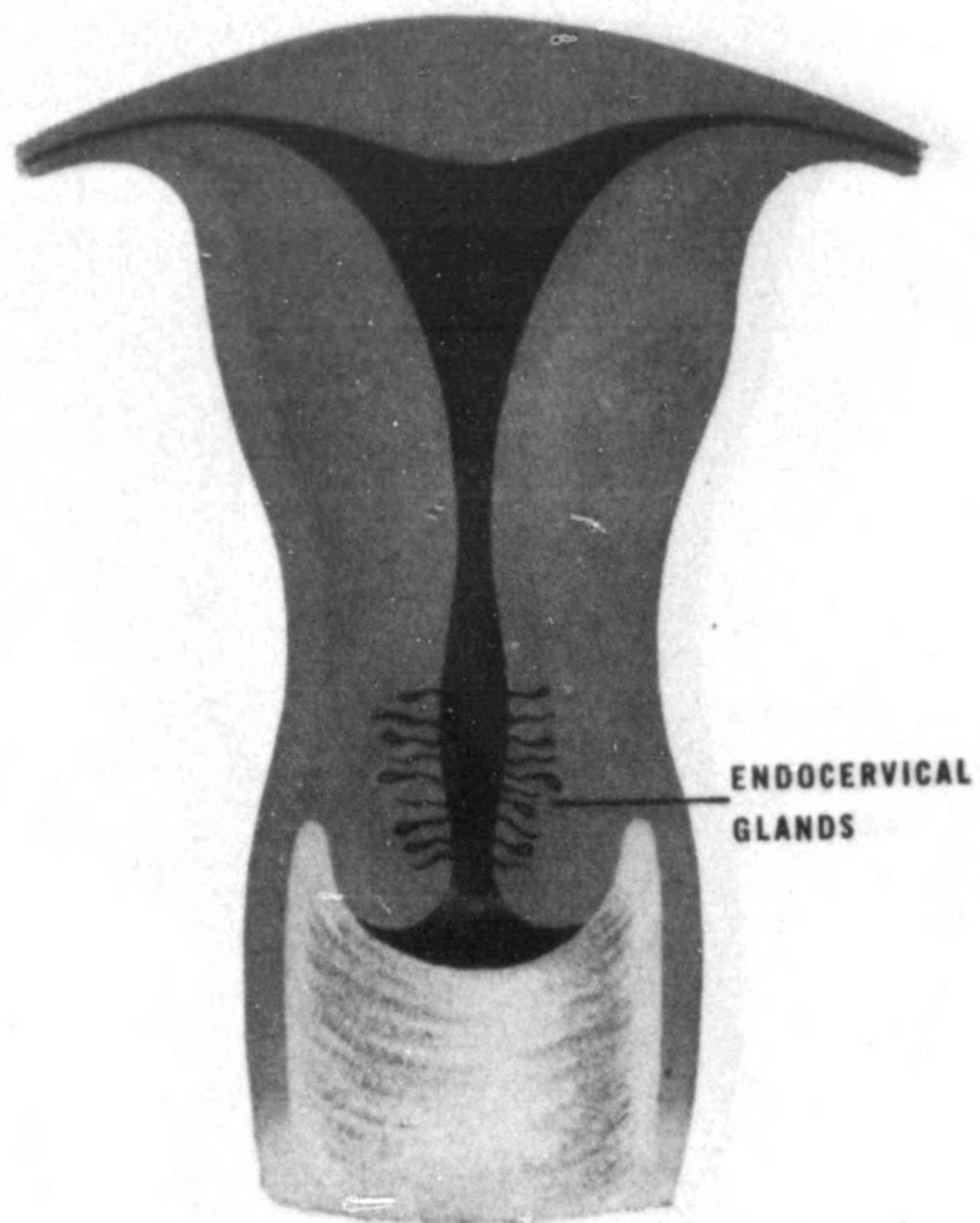
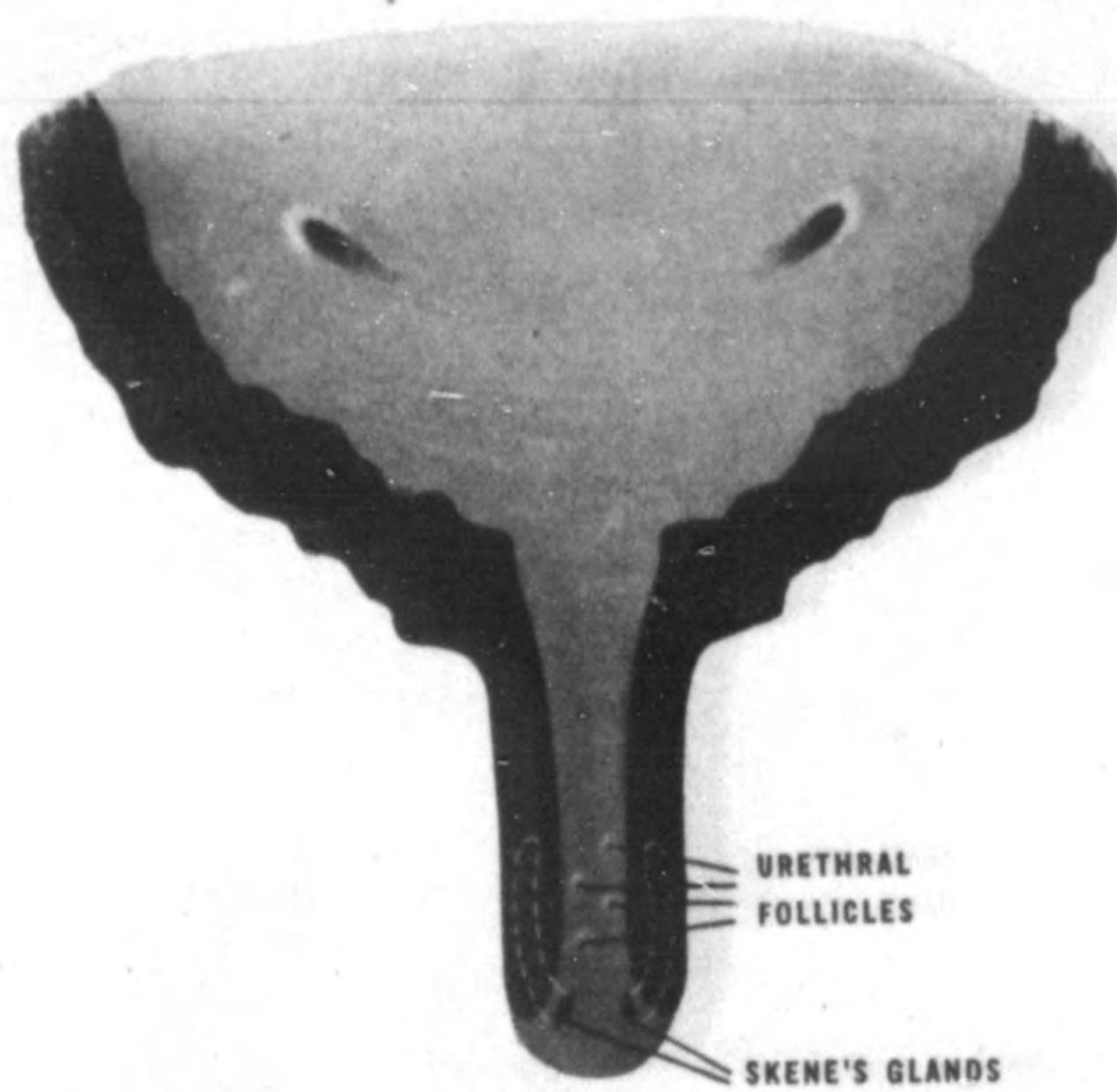
Most gonorrhoea in women is in a quiescent state at the time of study, and several unfortunate things are standing in the way of our uncovering a vast amount of infection. The most important of these are:

- a** Much too low a degree of suspicion regarding office or even regarding clinic patients.
- b** Too much confidence in laboratory reports commonly based upon the decidedly poor material so frequently sent for study. (No laboratory report can be better than the material supplied.)
- c** Widespread lack of understanding among those obtaining material for spreads or cultures that quiescent gonorrhoea is predominantly a disease of the smaller mucous glands whose secretions must be obtained, as a rule, if gonococci are to be found.
- d** Overlooking the fact that in women there are *two* decidedly frequent areas of residual infection (Skene's and the endocervical glands) and one less common but by no means less important site (Bartholin's glands).

Slight changes in the far too common methods of obtaining material for study will result in the discovery of countless infections now escaping diagnosis and add immeasurably to the control of the disease.

*Associate Professor of Urology, University of Pennsylvania, and Special Consultant, U. S. Public Health Service.

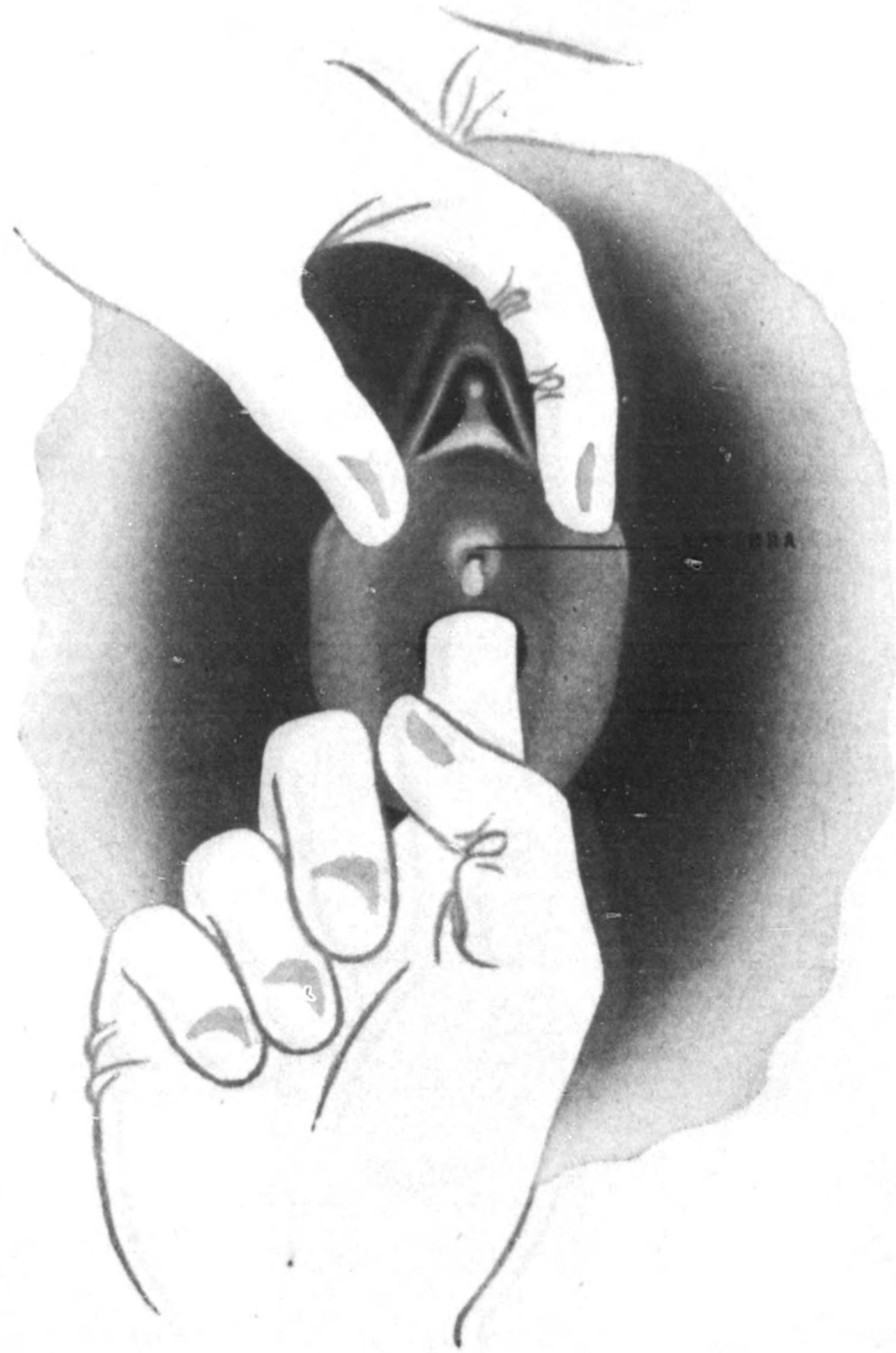
Where Gonorrhea Colonizes



Methods for Obtaining Glandular Secretions

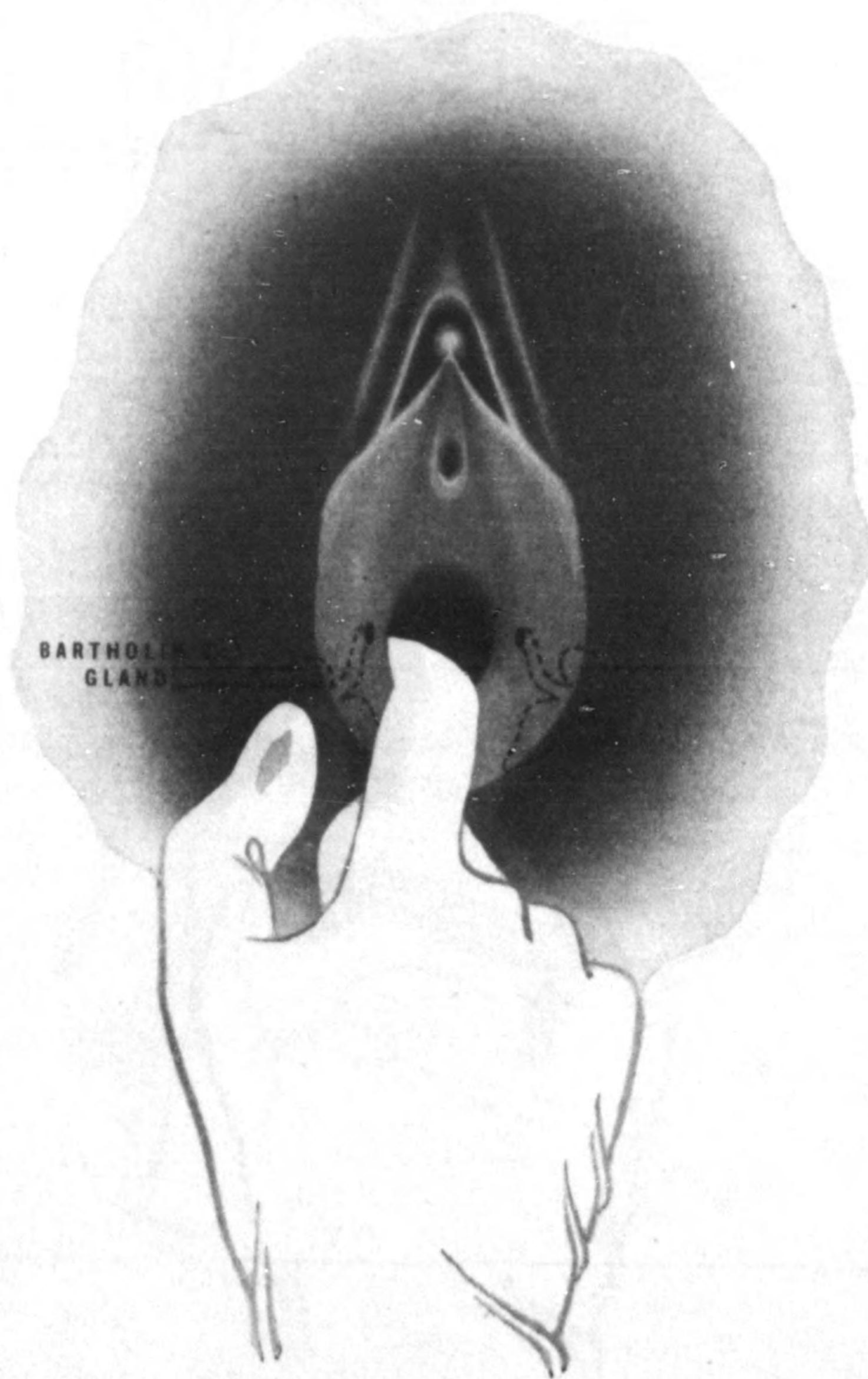
Skene's glands

Cleanse the urethral meatus with dry cotton. Digitally strip the entire urethra, paying particular attention to the lower half inch. Pass a small cotton-wrapped applicator one-half inch into the meatus and rub it into the floor of the urethra whether macroscopic fluid is expressed or not.

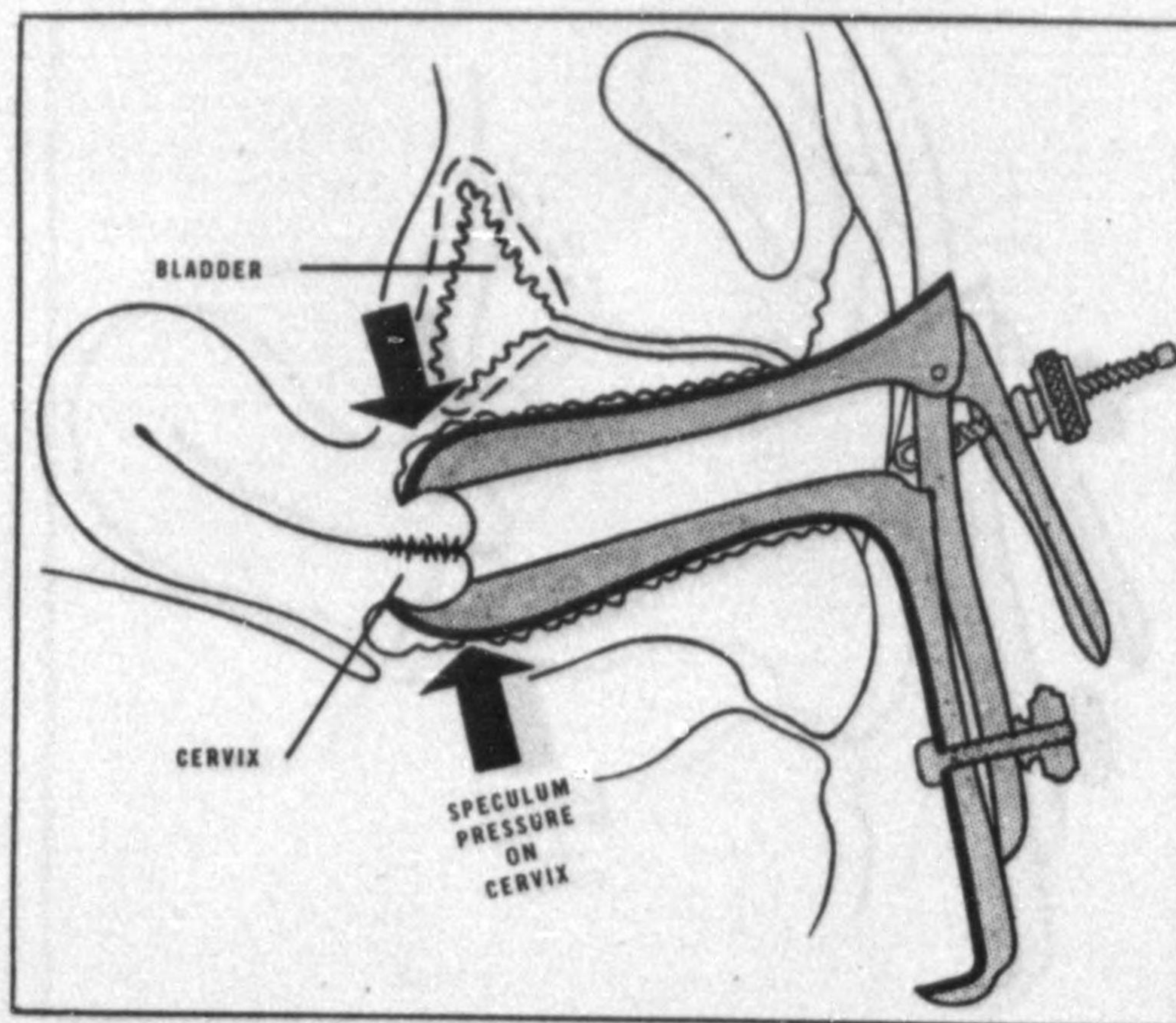
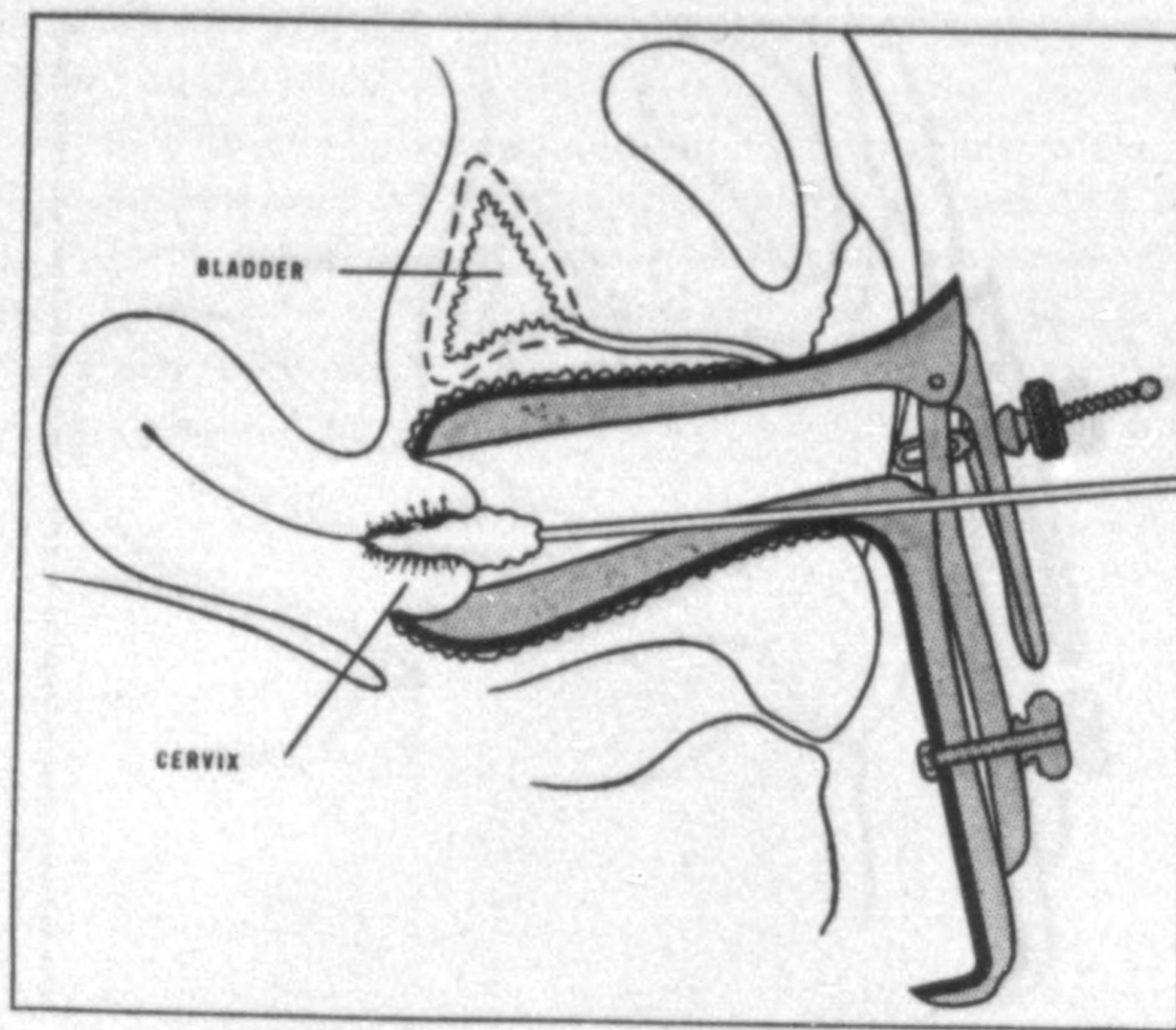


Bartholin's glands

Cleanse the opening of the duct at the junction of the middle and posterior third of the lesser labia with dry cotton. With a finger in the vagina and the thumb externally, compress the intervening structures at a point halfway from the duct opening to the midline posteriorly and collect even the slightest moisture for study. (Commonly the quantity obtained is so slight it would be lost on a cotton-wrapped applicator. A platinum loop or the flat end of a toothpick may serve better.)



Endocervical glands



Introduce a bivalve vaginal speculum so that the uterine cervix rests between the ends of its blades. (If cultures are to be employed, the speculum should be introduced wet—no lubricant should be employed.) Thoroughly remove the cervical plug of mucus either by cotton-wrapped applicators or a suction apparatus. After the canal has been thoroughly cleansed, compress the cervix in the manner shown to force out the glandular secretion, and secure it upon the cotton-wrapped applicators.

Remarks

- 1** Cultures are more reliable than spreads, but they are far from being universally available because of transportation difficulties which have not yet been solved.
- 2** Nothing but a thin spread is of much use to the microscopist. (True cervical secretion rarely spreads thinly.)
- 3** Surface fluids from the vagina or vulva in the adult, except in the unusual fulminant case, are practically useless for study. The microscopist recognizes them at a glance and generally discards them without further study.
- 4** Thousands of laboratory hours are being wasted upon the study of material offering little chance for the detection of gonococci and thousands of women roam at will to spread infection for this and other reasons that should not exist and easily could be eradicated.

VD Bulletin 97

Federal Security Agency
U. S. PUBLIC HEALTH SERVICE
Thomas Parran, Surgeon General

School
E1-2

Teen-Age Recreation Programs

Note.—At a meeting of the Children's Bureau Advisory Committee on Leisure-Time Programs, November 3, 1944, a Subcommittee Report on Teen-Age Programs was presented by Dr. Fritz Redl, Associate Professor of Group Work, School of Public Affairs and Social Work, Wayne University. The following is a summary of the verbatim report.

The subcommittee on teen-age programs tried to confine itself to an evaluation of what is happening right now. (1) The first question around which I am to organize this discussion relates to the various situations in which the planning of teen-age programs and program changes is undertaken. (2) The second question relates to some of the problem areas in teen-age programs. (3) The third is concerned with a special development of teen-age programs—so-called teen-age "hangouts." We tried to organize our thinking around the causes of this development and around an evaluation in terms of possibilities as well as limitations. We never quite got away from the difficulty of knowing when we were talking about the teen-age program in general and when we were talking about this new development of teen-age centers or youth hangouts, but we agreed that in talking quite a lot about the teen-age center we did not mean to imply that it is the most important development in the teen-age program—it may be the most spectacular and the most convenient development, but not necessarily the most important—nor did we suggest that it is the solution of program problems.

ORGANIZATIONAL SITUATIONS IN RELATION TO YOUTH PROGRAMS

Seven types of situations were listed, about which workers most frequently ask questions.

1. Changes of program within an existing agency

In this situation the organization is the same. The people it works with are the same. But somehow—through the psychology of war living, through some dislocation of family life and home life, through some change in clientele in the neighborhood, through the need for decentralization of programs—most agencies and organizations are faced with the question, "How are we going to adapt our program to the teen-agers, within a basically unchanged organizational setting?"

2. New programs for old clientele

This situation occurs, for example, when an existing agency starts a youth hangout or canteen. The agency knows the neighborhood, and knows

the people, and the people feel an affiliation to the agency.

3. New programs for new clientele

Here the youth program represents an extension of service of an existing agency. The aim is to get in youngsters who were not previously reached by the agency. This often happened under the impact of the delinquency scare and the response of agency staffs who—sometimes unnecessarily—feel that their premises are not used by those who need them most and think of developing programs that would attract youngsters not otherwise amenable to the agency.

4. Decentralized centers or hangout programs for an entirely new clientele with no agency affiliation

In Detroit, for example, the Young Women's Christian Association went out and rented a fire station and set up a youth hangout not officially affiliated with the Y.W.C.A. The youngsters were not to be members of the Y.W.C.A. or to know that the center was run by the Y.W.C.A. "It was just a joint, period."

5. Youth centers operated by organizations that do not ordinarily sponsor youth recreational programs

Some churches already had youth programs and only extended them to reach the teen-agers (for example), but others started them as a new adjunct to their church program.

6. Youth centers sponsored by others

Some youth centers are sponsored by private individuals, commercial organizations, and others, who all of a sudden wanted to do something about the youth problem but had no agency framework or staff through which to function.

7. Hangouts developed and operated by youth committees, clubs, and councils

The difficulty is to decide whether a hangout is really operated by the young people themselves. There are many centers where adults are invited to help. The adults may say it is initiated by the youth or developed by the youth, but how many centers really are originated, initiated, and maintained entirely by the youth? It is sometimes hard to decide.

Any discussion of youth programs is meaningless unless we know which of these special situations we are talking about. The answer to any type of problem—the racial issue, for example—may depend on the type of setting in which adolescents find themselves.

PROBLEM AREAS IN PROGRAMS FOR YOUTH, AND OUR REACTIONS TO THEM

1. Interracial and intercultural problems

The committee agreed on three general policies for handling interracial or intercultural problems.

(a) If a new program with interracial or intercultural characteristics is being developed it is more likely to succeed if other new elements are not introduced at the same time. Forming new groups from neighborhoods with different styles of life increases the recreation problem so much that you may not only have an interracial problem but others as well because of too many differences. Also, let us form recreation groups as carefully and skillfully as we can in terms of all characteristics, including mental age, social development, and so forth.

(b) It is wise to start an interracial or intercultural program on a level which doesn't produce other anxieties. Activities which bring together youth of different racial or cultural groups should be of a kind that the youngsters can participate in without too much difficulty.

(c) People coming into an agency may bring tensions into the agency with them, whether this is what was planned for or not. So if conflict occurs, even when the set-up was very well planned and the conflict may not be related to the program, it is important to realize this and handle it as carefully as possible. Youngsters as well as adults frequently focus conflicts that come from somewhere else on the racial or intercultural issue. For example, if a tough youngster of one race beats up a tough youngster of another race, this need not necessarily be a race problem. By careful diagnosis and real interpretation it may be kept from being experienced as a race problem and be brought back to its original level of tension between young people. This is nothing new—it is usually part of the policy of all group-work agencies. But often I find workers who feel guilty about using so much time on these things. I don't think it is waste of time; I think it is very essential.

(d) One intercultural tension, frequently not recognized as such, is the tension between sub-cultural groups, like the difference between youngsters from a tough neighborhood and youngsters identified with the upper middle class. Taste—in terms of what behavior is cute or impressive—is very differently expressed on different economic levels. Going into a place with his hat on may show lack of respect in one youngster, but this only may be a sign that he feels comfortable and at home in another youngster. We haven't enough materials on these sub-cultural differences—so far

we have been more successful in describing cultures like those of the Eskimos and Samoans.

2. Attitudes toward new clientele

Many agencies are worried for fear the old clientele wouldn't like the new clientele, or the sponsoring board or committee wouldn't like them. This indicates a tremendous need for training and interpretation, not so much perhaps for professional people as for volunteer workers. Workers need to be prepared for what they are going to find and see in terms of new clientele and be prepared to understand their behavior instead of reacting negatively to unaccustomed or unusual behavior exhibited by adolescents.

3. Relationships between leaders and participants

(a) The leader should have the skill to show his basic acceptance of the youngsters so well or so automatically that he can afford to interfere with their behavior. In large teen-age programs there are times when the leader has to interfere with some individual's behavior. These situations can be easily handled if the youngsters have the feeling of acceptance by an adult for what they are. The leader must decide, after studying the youngsters, what kind of behavior he can afford to interfere with, and what not. He learns to tolerate behavior, not on the basis of whether his own sensitiveness is hurt, but on the basis of what it means in terms of the lives of these youngsters. In one place with one background, behavior may be objectionable and require interference, while in another setting, the same behavior is perfectly acceptable. It is important for workers to have an understanding of standards in terms of the culture of the youngsters and of their sociological affiliations.

(b) The leader should have an adequate knowledge of the psychology of adolescents. If he knows what adolescents go through in growing up he will be able to develop a program which is closer to the interests of adolescents, including work, marriage, and school, and to utilize their interest in participating in leisure-time activities in a meaningful way.

(c) Adolescents need to have the feeling that adults trust them and don't get scared when they want to take the initiative. The workers should realize that it is important to challenge youth in terms of increased rather than decreased participation. Of course most of us feel that a sense of humor is an essential equipment for people who want to take on the job of working with teenagers in an environment not overcontrolled. This is especially true as the training of most workers has not prepared them to deal with the handling of

teen-agers in large groups and really informal organization.

4. Counseling

Counseling is not considered a part of the hangout program at all, but surprisingly enough sometimes when the leader has no intention of giving counseling services, the youngsters come and find out that the leader is not so bad as they thought he might be, and suddenly the leader finds himself surrounded by 10 or 20 youngsters who want to tell him their life history and ask him for help with their difficulties. This occurs especially in large group situations. It is rather opposed to the original theory of case-work counseling in a small situation, hermetically sealed in an interview room. Now we are finding one advantage of the large grouping where the youngsters know they can walk right out if they begin to feel embarrassed. Agencies need to be realistic enough to acknowledge that the leader cannot solve all the problems of individual youth in a hangout. However, an agency might provide professional help to the workers which can help them with meeting the counseling problems. Then, they might look for places where some on-the-spot counseling could be used, perhaps using a case worker who might come to the large group centers ready to volunteer her skills if she sees a place for effective case-work counseling.

5. Employed youth

In some places a lack of interest in organized programs has been shown by employed youth. For them the informal, mass anonymity of the hangout seems to be easier. Some employed youth seem to have an aversion for the social agency as a source of recreation because the fun they can have there is not sufficiently tied up with the fun of using the money worked for all day long, and their status as employed youth. Some employed youth may be getting sufficient recreational opportunities through programs conducted for war workers by industrial plants. Some youth have little time for recreation. Their working hours may interfere with recreational life. A program for adolescent girls in a trailer area in one community failed because after school the girls had to take care of the little children at home, have all the dishes washed, and other tasks done, when their parents came home. Employed youth must be approached differently from school youth. The boy who is employed may want a more adult type of recreation. Maybe that is why employed youth often seem to prefer commercial recreation. The whole question of commercial recreation and its appeal to young adults should be given more study.

6. Interpretation to the community

The subcommittee on teen-age recreation programs organized its thinking about interpretation around three questions: What needs interpreting most? Who are the people to whom we should address our interpretation? In what ways can the interpretation best be done?

(a) The importance of continued community planning for teen-age youth should not be forgotten because of some temporary emergency.

(b) Since some people have interpreted delinquency prevention as something that includes the whole recreational program, there is need for an interpretation as to what is and what is not the relationship of delinquency to the recreational program.

(c) The canteen program, as a new development, needs a lot of interpretation. Some of the headaches agencies are having over the hangout program were produced by the fact that it developed so fast that no one had time to tell the community, including agencies and the people who lived next door, what a teen-age canteen would mean in the neighborhood. Adolescent behavior itself needs interpretation to adults. The noisy way in which adolescents grow up is confused with the signs of decay. Sometimes social acceptance depends on social-economic differences. In a college town it is all right if at the freshman rally, a few windows get smashed, as it is no more than college towns expect. But if the youngsters are in a large city and wear "zoot suits," all of a sudden it is feared that they are "delinquent" youth.

THE YOUTH CENTER OR TEEN-AGE HANGOUT AS A DEVELOPMENT OF THE YOUTH PROGRAM

1. Factors leading to the development of youth centers

(a) *The delinquency scare.*—Youth centers were the first remedy that occurred to people to meet increases in delinquency under war conditions—and the youngsters were ready!

(b) *The loss of skilled workers.*—Some agencies have the illusion that anybody can run a youth center. Actually, of course, it is a difficult job for a leader to handle a youth center, and one requiring skill and training.

(c) *The fear of losing clientele.*

(d) *Competition of commercial recreation.*—Offering something as similar to commercial recreation as they can is the method some agencies use to keep youngsters away from commercial recreation. It is a concession to the attraction of a

commercial recreation; only the canteen bar serves "coke" instead of beer.

(e) *Increased community responsibility.*—War-time morale has definitely increased the awareness of many people that youth need a little more attention from the adult community.

(f) *Dislocation of family life.*—We realize that many families are broken up in their group living. The parents may still be happily married; individuals may happen to come together after the dishes are washed; but otherwise they lead separate lives. The need of youngsters for family life is not being met, and they are dropping out of the family group for their leisure-time pursuits.

2. Possibilities of the youth-center program

Evaluation of the youth center covers its possibilities as well as its limitations and dangers. Among its possibilities, some are:

(a) Youngsters who are too tired, or too antagonistic toward adults, or unready for more organized recreation, may be ready to accept a minimum of adult leadership in the hangout situation. For certain youngsters the hangout is an acceptable pattern of group recreation, because their taste is limited to the dancing-and-lounging situation, or because they are too suspicious of adult leadership.

(b) The hangout allows constructive loafing in an "acceptance-soaked" climate. This is a substitute for what some children may be missing in family life. Normal families don't have a program all the time; they may spend a lot of time just being together. This feeling of mutual acceptance in a happy family group is missing for many youngsters. In a limited way the hangout may be a substitute. The youngsters may not dance, but just come to sit in a place where people won't kick them out, where they are liked just as they are, and where they have an acceptance by adults.

(c) The need for dancing is a normal need of most youngsters and is better served in the youth center than in some unsupervised place. Some

youngsters develop an extreme interest in jitterbugging. That may be very primitive, but fulfillment of a real need is always important.

(d) Youth centers give adults an opportunity to learn what adolescents are really like and to find out ways in which education-resistant youth can be helped.

(e) The youth hangout gives the agency a chance to introduce its other programs. If the hangout is on the sixth floor of the Y.W.C.A., the leader can tell the youngsters what is going on on the seventh floor, and some of them may be ready to go on to the seventh floor. They can join other programs if they want to. Even in situations where the hangout is not affiliated with the program of an existing agency something can be done to provide more organized activities for the youngsters who are ready for them.

(f) The youth center helps us realize where some other programs fail. It is surprising what attitudes we find sometimes in youngsters who we thought would be interested in an agency program. We can learn a lot about what may be missing in leadership relationships and in organized programs.

3. Limitations and dangers of the hangout

Among the limitations and dangers of the hangout the following two were mentioned:

(a) This mass program fails to reach many of the youngsters who attend, some of whom may be ready for small-group affiliation. Perhaps 20 individuals out of 500 are reached by the leadership—what about the others? The failure of the youth centers to provide individualization of membership is an obvious disadvantage.

(b) The hangout program often lacks value. There may be a danger of developing addiction to it. In one community we watched some youngsters sitting from 8 to 12 o'clock every night. Youngsters who depend too much on this one type of activity—or inactivity—should be helped to develop broader interests.

E 1-2

**CHILD QUESTIONS
— AND —
THEIR ANSWERS**

**A Pamphlet to Aid Fathers and Mothers in the
Instruction of Their Children on
Sex and Parenthood**

By HELEN WILLISTON BROWN, M. D.

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1790 Broadway, New York, N. Y.**

**THE WISCONSIN STATE BOARD OF HEALTH
MADISON, WISCONSIN
1941**

CHILD QUESTIONS AND THEIR ANSWERS

The reasonable desire in every heart is to be happy and our conduct—the life we lead—is a more or less intelligent groping toward that end. So it is only fair that, in their education, our young people should be given any information that will help them to judge what kind of happiness is most worth while and how it is most likely to be obtained. This information should include some fundamental rules of living.

The first of these is to have health, mental and physical, and the best knowledge we have concerning methods of acquiring and preserving health should form a fundamental part of the education of children.

A second guide to happiness is to give a child standards and ideals which are in accord with the general opinion of the best elements in a community. In other words, an individual has more chance of happiness if he lives in such a way as to meet with the approval of those whom he respects and loves.

At the present time there is none who would deny the value of giving our young people these ideals of health and conduct, though there is a wide variation of opinion as to how it may best be done. Mothers especially, aroused by the changed conditions in living which are taking their daughters out of the home and into a world where they are more or less constantly subjected to unhealthful influences, are asking how they may best fortify and safeguard their daughters; how they may give them worthy and enduring ideals.

These mothers realize, also that there is no one factor which may so easily make or mar a life as the factor of sex in its relation to health and conduct. They realize this very plainly, but for many of them the old taboo, the old habit of silence and sense of false modesty has set a seal upon their lips which they find hard or impossible to break, and they turn to those whom they deem wiser than they, and ask how they shall deal with this matter.

The Mother's Attitude

To begin with, in instructing a child in matters of sex, the mother's own attitude is almost all-important. Her point of view is what the child gets more quickly than anything else, and it is essential, therefore, that the presentation be a simple direct one, neither too emphatic nor too sentimental or with any feeling that the subject is especially absorbing or secret in its nature. This consideration is very important for it is a matter of common knowledge how any undue emotion or suggestion of secrecy tends to fasten a child's attention upon the subject dealt with in an unwholesome way.

We do not know in just what way the taboo against the discussion of sex arose, but the general consensus of opinion is that at the present day it has become a source of danger, because while it may prevent rational sex instruction, it does not operate against vicious sources, and so sex information has become one-sided. This has been particularly true in the case of boys, who have generally got this information through vicious and demoralizing traditions, handed on among them from generation to generation. Girls in the past have in many cases been kept from sex information at all, but at the present time, if we consider the output of reading matter and moving picture shows, we realize that this would be well-nigh an impossibility today.

When Should Sex Instruction Begin?

A question mothers often ask is, "Granted that I should give my child sex instruction, at what age should I begin?" Most educators agree that the time to inform a child is when it first asks intelligent questions, and its questions should be answered simply and informally, according to the degree of its ability to understand. It is hard for an adult to realize how circumscribed the field of consciousness of a small child may be, and how he may live in it utterly incapable of perceiving the most obvious things because they are in no way connected with his own range of thought. Moreover, small children, especially boys, usually pour out a stream of questions, and ask "why" often from habit, without particularly desiring or expecting an answer. If in this casual way they should chance upon questions relating to sex, there is no special reason that they should be answered.

But once a child has got a real problem in his mind, has considered it somewhat, and comes to his parents as the fount of all wisdom for a solution, they will be wise, if they wish to retain his confidence, to give him a straightforward answer.

How many people can look back to the time when they asked serious questions in all simplicity of their parents and were put off in a manner that was not only disappointing, but led them to feel that the question was improper? They turned away humiliated but sufficiently curious to pursue their inquiry elsewhere. How these people now envy their more fortunate friends who can joyfully declare that their mothers always told them everything.

The usual question that children ask their mothers is where babies come from, and if they are truthfully told, it will save a great deal of confusion and worry. A small child may be satisfied for the time being by the explanation that he came from an egg as little birds do. Later he will inquire more about the egg from which he came, and he may be told that as the human egg has no shell to protect it, it is necessary to keep it, until it is ready to be hatched or born, in a safe place in the body of the mother. When he goes on to make direct application to himself and his brothers and sisters, his feeling of reverence and respect for his mother may easily be aroused by explaining how much trouble she has taken for them all, and with how much love she regards them. The question of just how a baby is born is sure to come up, and it is often difficult for a mother to answer because of her own self-consciousness, but if she remembers that the child is simply asking for reasonable information, it should be fairly easy to explain in words that he can understand, that when it comes time for a baby to be born, a passageway is opened up to the outside world. It is well for most children to realize that birth is a serious and painful thing, and this tends to dignity.

Instructing a Child About Paternity

All these facts most children will want to know between the ages of five and ten, and there is another question which may or may not come up during that period but which will certainly have to be answered at some time or other, and

that is the question of paternity. This is for most mothers the most difficult thing to do, and they complain with good reason that the average book on sex instruction omits this answer.

Probably the best way to lay the foundation for an answer is to emphasize to small children the fact that all young have two parents—a father and a mother. Later as the child inquires further, explain that for the life and growth of young animals of all sorts, there must be the union of two cells, or eggs, one from the father and one from the mother, and these two eggs uniting and growing in the body of the mother form the embryo or baby animal. The child is sure to ask how the egg from the father is placed with the mother egg. This of course differs with different animals, but may perhaps be best explained by reference to insects. Tell the child that the male or father insect has an organ or tube through which he can place his egg in an opening in the body of the female or mother insect and that when in this way the male egg meets the female egg, they unite and grow into an embryo. Then say that the same general method is true of animals, human beings among them; also make it plain that such a union of cells can only take place among grown-up or adult animals because in young animals the organs of sex are not fully developed.

This is a perfectly truthful and rational method and should not be too difficult for any mother but she need not hope to make clear this subject, or any other subject connected with sex, all at one time. Children often understand much less than they appear to and sometimes misunderstand in the most absurd way. The mother will have to expect to go over these problems, from time to time, adding to, and straightening out the child's fund of knowledge, and above all keeping in such close touch with the child that he will feel free to come to her with more questions as they arise.

The Child That Asks No Questions

But mothers ask what they ought to do if their children do not come to them with questions. The lack of questions is, in general due to one or two causes: either the child has not thought about the subject enough to ask, or he is getting information elsewhere, and it is the mother's duty

to find out tactfully which is the case. If it be the latter, she should win the child's confidence by her own sympathetic attitude. The child will probably have been told, along with any sex information he has been given, that his mother would be much shocked if she knew about it; so the line for the mother to follow is to let the child feel that she is interested to find out what the child knows but not in the least angry with him, and to conceal entirely any feeling of horror or disgust at what he may tell her. A child under such circumstances will usually tell all he knows and be tremendously relieved and grateful to find his mother so friendly a confidante. The mother can gently point out where his information is wrong and give him simple facts together with a more wholesome point of view.

"But," the mothers say again, "what should I do if my child is really entirely ignorant?" This is a difficult question, and depends very much on the individual case. The danger is, of course, that the ignorant child may at any time receive information from unwholesome sources with bad effect, and it is a question to decide whether it is better to forewarn the child or not. Many mothers who are in close touch with their children feel it sufficient to warn them either not to talk about intimate subjects with their playmates, or else to be sure to repeat to them anything they hear and do not entirely understand.

In some cases it may be better to arouse the child's curiosity gently so that of its own accord it will ask questions. It would seem reasonable, certainly, that when a child gets to be eleven or twelve, he should have in his possession as much sex information as already outlined above.

What to Tell a Growing Girl

As regards little girls, certainly no mother should allow her daughter to reach the age of menstruation without informing her on that subject, if for no other reason than to prevent needless fright and worry. There is a great variety of opinion as to the emphasis which should be put upon it. A mist of superstition and a halo of invalidism that would seem to be unhealthy and unnecessary surround this function. It is hardly enough to tell the child that, once established, menstruation will recur with more or less regularity once a month, and that at the time of the period it is

probably better as a rule to avoid any special exertion. Too much discussion of the subject will tend to fix the mind upon it in a morbid way but gradually the mother should explain that the beginning of menstruation means a transition period between childhood and womanhood and that there is a definite connection between menstruation and the ability to have children.

As concerns the boy, it certainly is the father's duty to inform him about the facts of puberty, but if the father will not do it—and he frequently will not—the mother should see that the boy has the information, either from good pamphlets or from a doctor or teacher whose point of view is in accord with the cleaner standards of society; and she should talk over the subject with him sufficiently from time to time so that he may understand her ideals for him and the sound reason with which they can be backed up.

The Boy at Puberty

By the time the boy reaches puberty, he should know that seminal emissions are normal and that masturbation is not a normal practice. He should have some knowledge of the anatomical and physiological differences between men and women, and of the nature of bisexual reproduction. He should have sufficient ideas of hygiene to protect him against infection with a venereal disease, and in view of the number of boys who are seduced by older girls or women, he should know enough about prostitution to be on his guard.

All these are subjects on which a boy ordinarily acquires inexact information from his associates; and it is therefore important that he receive exact information from his parents, if his conduct is to be rightly guided. Information alone is not sufficient, however; he must also be given ideals.

A mother's ideals for her son have always counted with him to some extent, but there has also been a tendency among young men to feel that their mothers did not understand their problems. The modern mother who does know is therefore in a much better position to help her son than the old-fashioned mother who vaguely and earnestly hoped that her son would be "good." She can tell him that continence and chastity do not injure the health of young people, and she can back this statement with the testimony of the most enlightened part of the medical profession. She

can point out, when he is old enough to care, that he hopes some day to marry the loveliest and finest girl in the world, and so it is up to him to be as fine as she, if he is to give her a square deal. She should tell him also that aside from the mental degradation of associating with loose women, he will be running a great risk of getting venereal disease—that the venereal diseases may not only ruin his own health, but, if he should take the infection with him into marriage, it is likely to ruin the health of his wife, who has trusted him, and the lives of their future children, for whose sake as well as his own she has lived a clean and wholesome life.

Any boy who is not very abnormal knows that he wants some time a happy home, a healthy wife and children, and if it is put clearly to him how far his own conduct may effect that ideal, it will bring to his aid his sense of fairness and chivalry, and will present to him a concrete motive for self-control.

A Serious Question

There is another serious question just alluded to in the instruction of older boys that a good many mothers have to face for their younger girls and boys as well—the problem of self-abuse or masturbation. There is a wide range of opinion concerning it, from the mother who regards it with positive horror to the mother who says all children do it and ignores it entirely.

The habit of masturbation can be acquired by the child spontaneously or through vicious instruction. And the child of the streets is practically sure to be informed of it. While the habit should not be regarded with undue distress, it is certainly undesirable because it is abnormal and wasteful of nervous energy, and no mother with the welfare of her child at heart should allow it to continue.

In caring for a baby, it is important to see that his hands are kept away from his sex organs when he is undressed, and that the clothing he wears is not so tight as to cause friction or irritation. An older child who has acquired the habit of masturbation must be carefully supervised. He should not be left alone at play. When he takes a nap in the day time, or goes to bed at night, some one should stay with him until he is sleeping, and when he wakes up he should get up. A child who is old enough to understand

what his mother considers right and wrong with him, and who is on friendly terms with his mother, could be taught that when he desires to do wrong, he should come to her for aid, and she can easily distract his mind to other things. No mother should try to frighten a child by telling him he may go insane, because in spite of the well-known tradition, there is no evidence that masturbation, of itself, ever causes insanity, though the mental distress produced in a sensitive child by the impression that he is abnormal and a social outcast may be very great.

We realize now that the old method of trying to correct faults by threats and bogies of evil is a disastrous one that has reaped a harvest in many hearts of fears and miseries which might easily have been avoided, if instead of threats there had been given assurances of aid. Instead of putting too much emphasis on the unpleasant results of undesirable conduct, it is better to picture the advantages that come through different and more wholesome types of behavior. In other words, instead of trying to check a fault through fear, it is better to drive it out with ideals which will not tolerate it.

When a boy gets older and reaches the age of puberty, he normally tends to look out for himself, and stops confiding the facts of his sex life to his mother. She should expect this and realize that she can then only hope to help him more indirectly, and that it is to his father he should turn for such help and information as he may need.

The Venereal Disease Problem

There is another consideration that a mother should bear in mind and that is the problem of the venereal diseases. Of course it would be absurd to instruct young children concerning them, but on the other hand mothers should be on their guard to see that at school or elsewhere, their children are not drinking out of common drinking cups or using dirty towels or toilets, and the children should be instructed as to the possibility of catching colds and other infectious diseases in such ways.

Older children should have some knowledge of the venereal diseases, but probably this instruction will be more definite and scientific if given by doctors or trained teachers in connection with work in sociology or hygiene. There-

fore, it would seem to be an important part of the duty of mothers, besides giving their children sex instruction at home, to see that schools and colleges carry on that information in various suitable courses.

But fundamentally the duty of sex instruction belongs in the home and to the parents, and thousands of mothers, realizing this, have already given their children splendid education of this sort. They have been pioneers, deserving of the highest praise for their courage and common sense, and by their work they have greatly helped to take away the taboo from the subject of sex education, and have made it infinitely easier for the present-day mother to deal with, because it is now generally expected that she will do so. Of course there are still mothers who feel it difficult and who doubt their own ability, but they should remember that a child whose honest questions are honestly answered by his mother is much better off than one who gains doubtful information through dubious channels.

FREE PAMPHLETS

Additional copies of this pamphlet and others explaining the campaign against venereal diseases and presenting the true facts of sex in a wholesome manner will be sent to any address free of charge.

- "The Girl's Part"—For girls fourteen years and up.
- "Keeping Fit"—For boys and young men.
- "The Mother's Reply"—For mothers.
- "The Parent's Part"—For parents.
- "Child Questions and Their Answers"—For parents.
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- "What to Read on Social Hygiene."
- "Facts About Syphilis, Gonorrhea and Other Venereal Diseases."
- "Gonorrhea."
- "Syphilis."

THE WISCONSIN STATE BOARD OF HEALTH
MADISON, WISCONSIN
1941
COOPERATING WITH
THE UNITED STATES PUBLIC HEALTH SERVICE

61-7

THE
PARENT'S
PART

THE WISCONSIN STATE BOARD OF HEALTH
MADISON, WISCONSIN
1941

THE PARENT'S PART

You were shocked to hear that the number of deaths resulting from influenza epidemic in 1918 was greater than the total losses among the American troops during the war. Is it any less a shock to know that the Army lost more days of service on account of venereal disease than from any other disease? One hundred and ninety-seven thousand such cases were reported in the Army camps during the 15 months ending November, 1918. This meant a loss of approximately two and one-half million training days. Is it any wonder that the Surgeon General of the Army stated that if it were possible to rid his men either of all wounds or of all venereal diseases he would rather rid them of the venereal cases?

But venereal disease is not, primarily, a military problem or a war-time epidemic. Estimates show that one man contracted the disease after entering the service to every five before entering it. This means that the source of disease is in civilian communities—your communities. The draft, with its examination of the nation's men, resulted in digging underneath the sod of every-day life and showing that out of sight in your town, in your state, there is going on yearly an untold waste of manhood, womanhood, and childhood by the ravages of these diseases.

Being highly contagious, they have entered homes and marriage relations. Women and children, not knowing the cause, have suffered from them for generations. Innocent young wives, previously healthy, have been mutilated by necessary surgical operations, some have been made invalids, many have remained childless, and others have lost life itself. Babies have been born dead or defective; others have become blind a few hours after birth.

This is in addition to the thousands of men who, thinking they were cured by patent remedies, have been visited years later by sterility, paralysis, and insanity.

PREVENTABLE DISEASES

Nor is this terrible waste of health and life inevitable. Syphilis and gonorrhoea must be classed as preventable contagious diseases. We know and can identify through the microscope the germs which cause them. We know and can

Comparative Prevalence of Venereal Diseases and other important communicable diseases in the U. S. Army.

Venereal Diseases 102.3
 Other Communicable Diseases 29.4

Pneumonia, scarlet fever, typhoid and paratyphoid. (Measles not included.)

The figures above represent the annual rate per 1,000 for all troops in the United States based on the reports from September 21, 1917, to May 31, 1918. These figures are accurate for purposes of comparison only. Prepared from reports to the Surgeon General of the Army.

Comparison of the number of cases of Venereal Diseases contracted before and after enlistment

Before enlistment 5
 After enlistment 1

The number of cases before enlistment includes all uncured cases, old and new as compared with the new cases contracted after enlistment. The great contrast, however, is mainly due to the better protection given to soldiers than is given most men and boys in civil life.

The above estimate is based on reports from Camps Sherman, Lee, Upton, Meade, Custer, Kearney, and the Western Department from October 25, 1917, to May 10, 1918. (See Venereal Disease Control in the Army. W. F. Snow, M. D., and W. A. Sawyer, M. D., Majors, M. R. C., U. S. Army. Journal American Medical Ass'n August 10, 1918, p. 456.)

locate many of the personal carriers. Exposure to them can be practically minimized to the vanishing point if we eliminate the entirely unnecessary and harmful contacts of irregular sexual intercourse. After the success of the army camps in prevention by suppression of prostitution, education, recreation and early treatment, we have an exact method of attack upon them.

Public health authorities throughout the country are now organizing to carry on the fight against this health menace. Practically all of the methods found successful in the army will be utilized. A far-reaching and important part of the program, however, will be *prevention by education*.

SHALL YOU TEACH YOUR CHILD?

Medical officers found that the men in the army camps revealed a surprising ignorance and misinformation on the whole subject of sex and sex diseases. Thousands had acted on the mistaken belief that sex relations are necessary to health, only to find their health impaired by a serious venereal infection. Large numbers thought that gonorrhoea, especially disastrous in its effect upon innocent women, is "no worse than a bad cold." A list of the superstitions and untruths that these men believed forms a terrible indictment against the instruction offered in our homes. And the dis-

eases that these men brought into the army to handicap their usefulness in war were, according to their own admission, largely the products of the attempt to keep children in the blessed state of ignorance and innocence regarding sex.

Much was done in the army to correct the mistaken ideas of these men. But to be most effective this information must begin much earlier. The most important preventive against later vice and venereal disease is the proper education of children with regard to sex. Your part as parents in this campaign, then, is to instruct your own boy and girl. You cannot exempt yourself from this responsibility.

Do you think that while the neighbor's children may need some such information, your own children will never have any such need? It is no longer possible for you to choose whether your child will learn about sex or not. The only question you have to decide is whether he or she will learn from you or from someone else. If there ever were any justification for the hope that a boy or a girl could grow up entirely innocent of all knowledge of sex matters, that hope is forever gone. For better or for worse, the prudery and the silence connected with love, passion, temptation, marriage, and vice are being replaced by an abundance of discussion and interpretation in literature, drama, especially in the "movies." From these sources—or from much worse and unreliable gossip of companions, advertisements of quack doctors and patent medicine—your boy and girl will receive their sex information unless you yourself offer them something better and truer.

You would, furthermore, by your very silence and evasion of the subject be giving the wrong kind of sex education. You would be indicating unmistakably to your child that sex is something nasty or vulgar and not to be discussed with you. You are cutting off his confidence on this most important problem and condemning him to secret and unreliable channels.

It is not natural for your children to be uninterested in the vivid drama of the renewal of life they see about them. *Only an abnormally dull child fails to be curious about such things.* If your child remains silent about these matters or fails to ask any questions, in nine cases out of ten it is getting information from other people. If you have refused to answer your child's natural questions about these matters,

Boy of 9½ Years.



The average age at which boys receive their first permanent sex impressions, usually through improper sources.

Boy of 13¼ Years.



The average age at which boys are likely to begin some form of sexual practice.

Boy of 15¼ Years.



The average age at which boys receive sex instruction from wholesome sources.

Parents Have Been Six Years Too Late! Are You Going to Catch Up?

you can be assured that these same questions are asked and answered from sources of which you would be ashamed.

EVIDENCE OF THE NEED OF INFORMATION

Do you think that only the children with abnormal surroundings—the children that are seen in juvenile courts, jails and detention homes—are in need of sex instruction? Testimony taken from men coming from homes above the average and selected by our educational system as intelligent enough for a college education, show the same need convincingly. An inquiry was made among approximately 1,000 such college men in representative institutions of the East, Middle West and West. The replies were manifestly sincere. While students may be no better morally than men outside college, they are not below the average. Furthermore, there is evidence to show that the replies understate rather than overstate the prevalence of sexual practices. In other words, conditions are probably as bad, if not worse than, the conditions indicated by their statements. The conclusions from this study are as follows:

(1) A large majority of the boys get their first permanent impressions about sex from improper sources before the age of twelve. The average age is nine and one-half years. Many testify to the unfortunate effect of these early impressions received from older boys and undesirable sources. One man writes: "The effect was decidedly bad. It gave me a sense of bewilderment and a wrong idea of the workings of nature." Another says: "The effect was decidedly harmful. What I learned was so different from my ideas of human reproduction that I had formed from the myths told me by my parents that I lost my respect for them." *Many of these men expressed bitterness against their parents for having failed to give them clean, helpful information.*

(2) The ideas received from improper sources have often led to some form of sexual practice, most often between the ages of twelve and fifteen years.

(3) Instruction in the past, when given at all, generally has been about four to six years too late. When it has been given by parent or teacher it has been helpful, even though crude and meagre. One young man writes: "It served as a starting point to keep me in the right direction." Another says: "It had a good influence. Instead of picking

up distorted knowledge, I got facts from someone I could believe." And another: "It gave me a deep sense of responsibility for the protection of womankind."

Although no such extensive study has been made regarding the influence on young girls of miseducation, such information as has been gathered shows that more harm results from ignorance than most fathers and mothers would be willing to believe. There is evidence that if the girl grows up and leaves a well-protected home in complete ignorance of the normal facts of sex life—of sexual relations, prostitution and venereal diseases—she is more in danger of serious shock upon learning these facts than if they were presented gradually and naturally in the confidences between mother and daughter.

Public health officers, who are constantly coming into touch with the victims of vice and disease, substantiate this testimony as to the imperative need for sex instruction of boys and girls. Some of the cases coming into their venereal clinics are mere children whose acts in contracting the disease can be ascribed only to their pitiable ignorance—for which their elders, not they, are responsible.

YOUR RESPONSIBILITY

Sex education includes the study of the whole process of reproduction and the nurture of children, the meaning of marriage, prostitution, venereal diseases, illegitimacy, and the hygiene of sound recreation. These cannot be taught at any one time or place. The cooperation of the homes, the churches, the schools, the press, clubs, and societies in your community is necessary.

But you as parents must always be the most important and effective advisor of your children in sex matters. Your home is the natural place for satisfying their early curiosity, directing their adolescent energy and building up habits of self-control. Indeed, all that other agencies can do to give your children accurate knowledge and a wholesome point of view will be nullified if you fail to do your part.

YOUR PREPARATION

The first and principal requirement of you as parent in teaching your children the facts of sex is that you be truthful. The principal defect of mothers and fathers in the past has been that they have not told the plain truth, that they

have practiced deceit of one kind or another and lost forever the confidence of their children. To keep the line of communication open between you and your children through all their youthful struggles is the best guarantee that they will be properly informed. But you destroy this easy approach if you fail to be honest when they come to you.

In the second place it is necessary that you have the right attitude yourself on the subject of the relation of the sexes. If you think of sex as something vulgar and nasty you will be very likely to pass on this dangerous viewpoint to torment another generation. From the very first the child should be made to feel the sacredness of parenthood. He will naturally think of it in this way if you do not interpose a foolish embarrassment or taboo. To know about sex truly is to realize that it is intimately connected with the mental, physical, and moral welfare of the individual and the race, and that it is a subject full of purity, nobleness, and health. Do not pass on to your daughter the prudery and repressed feelings which will result in needless worry and misunderstanding for her years later when she marries. This frankness in the home will not prevent you from teaching your child that it is perfectly proper to discuss with you many things about which it is improper to speak to others.

In the third place it may be necessary to prepare yourself by reading some reliable book or pamphlet on the subject. *Do not underestimate your own ability, however.* The average adult knows enough facts to satisfy the child's curiosity in every essential way. It is not necessary to know the facts of biology as an expert or to have a medical knowledge of venereal diseases. The simple truths you know are what the child needs. Do not mystify the child by using words he cannot understand. Plain, simple language should be used here as in everything else you explain to him. The mystery of the process of the renewal of life itself is sufficient to give the subject dignity without additional use of allegorical words. Some books on this subject are not reliable and parents should be careful about the ones they choose. In general, it may be said that the pamphlets now being issued by the state boards of health are more satisfactory than most books. Many of the best libraries, however, are now issuing circulars giving the titles of the most reliable books on the sex problem.



10



Which Way Are Your Children Receiving Sex Instruction?

INSTRUCTION OF THE CHILD BEFORE PUBERTY

Your task in the instruction of the child before he reaches the age of puberty is a comparatively simple but very important one. Puberty is the period when bodily sexual development is especially noticeable. It begins with girls at about eleven to thirteen years of age, and in boys at about thirteen to fifteen years. Before this time your chief problem is answering questions.

As early as six or seven the child seems transformed into a human question mark. Here is the beginning of sex education. His curiosity at this period about the origin of life is nothing special or morbid. It is a part of his general curiosity about all things that move and change and grow. Leaving his question unanswered does not satisfy his curiosity. Answering the question does satisfy that curiosity—at least for the time being. Granted that the less children think about sex the better, the essential fact to be borne in mind is that curiosity and interest are aroused by those things that the child does not know about, not those that he knows about.

All the questions will not be asked at once nor should all possible questions be answered at once. Neither is it likely that the child will absorb all the information at one time. It is often the experience of parents that children ask about some of the essential facts a number of times before they remember them. These questions are a sign of healthy attitude.

It may be necessary to postpone an answer to a question about which you need more information, but if this is done in the same frank way you would postpone any other subject, you will not lose your child's confidence.

If a child asks no questions at all, because he has the idea that it is in some way improper to mention such matters, or has had his curiosity satisfied from other sources, you should make an opening for the discussion of the necessary aspects of the subject. Every bit of information about the normal side of sex that is given your child during this period before puberty is so much gain. Later, during adolescence, when your boy or girl is undergoing new personal experiences and acquiring new sensitiveness, it is much harder to give this information.

You may have the problem of giving correct sex informa-

tion after you have already deceived your children with the fable about the stork, or turned them away without satisfying their innocent inquiries. Your only possible course in such case is to inform the child that the stork story is a fable similar to many other childhood myths which one believes for a while and then is disillusioned. After that, proceed to establish confidence by telling the truth.

During the years before puberty, when the opportunities offer, you should warn your boy and girl against handling the sex organs except for the purpose of cleansing them. In the case of your boy you should see that the sex organ is kept free from irritating substances beneath the foreskin. Circumcision may be necessary to decrease the irritation and assist him in keeping clean.

It is impossible to give an accurate schedule of just what all children should know at certain ages. The environment of both boys and girls varies so widely that no general rule applies. The safest guide to the time of giving sex information before puberty is your children's questions themselves.

QUESTIONS AND ANSWERS

Certain questions arise in the minds of nearly all boys and girls in some form or other before the age of adolescence. These questions may come at intervals of weeks, months, or even years. Samples of such questions and satisfactory answers are given here.

1. *"Where did the baby come from?" or where did the puppies come from?*

"Babies grow inside their mother's bodies, just as little birds in a nest. The birds hatch from the eggs, and when their wings grow they leave the nest. After the baby has grown for many weeks in the mother's body it comes out of the body and we say it is born."

2. *"How is the baby born?"*

"All girls and women have a passageway in their bodies which enlarges enough to let the baby come out when it is strong enough. This passageway opens at the lower part of the body. We should never touch that part of the body except to keep it clean, or we might harm it." (This question offers a starting point to warn girls against masturbation or self-abuse. Boys should have the question answered satisfactorily, but the warning against self-abuse might better be related to the explanation of the male sex glands

and the value of their secretions in promoting vigor. This explanation is given simply and clearly in pamphlets for boys published by state boards of health.

3. *"Does it hurt to have the baby born? Why does the doctor come when the baby is born?"*

"Yes; it hurts the mother, but she is so happy to have a baby all her own that she forgets the pain soon. The doctor comes to take care that the baby is born safely." (Do not emphasize the suffering of childbirth in talking to a child.)

4. *"Can I tell Jack how a baby is born? He told me the doctor brings the baby in a satchel."*

"No; some parents don't tell their children anything about this, and they don't want anyone else to tell them. Never talk to anyone about these things without asking me." (This advice may be futile. But it is far better for the truths to be spread among children than the untruths so usually communicated.)

5. *"What does it mean to be half Shepherd and half St. Bernard?"*

"The dog is half Shepherd and half St. Bernard because one of his parents was a Shepherd dog and the other was a St. Bernard. All little dogs must have a father and mother. Birds have a father and mother too, just as babies must have a father and mother."

(This explanation may often satisfy a child completely. He may, however, ask more about the father part in reproduction. Although this is the most delicate subject of all to treat frankly, it is necessary to be sufficiently definite to allay curiosity, and it is the great opportunity to arouse in the boy and girl a fundamental respect for reproduction and to fortify them against vulgar talk and improper use of the sex organs. The explanation may be continued, illustrating with plants and animals, somewhat as follows):

"The seed is inside the mother flower, but it doesn't grow into a new flower until the pollen dust has mixed with it. Every life begins with the mixing of the seeds. Every grown-up animal and every grown-up man and woman have tiny bits of life or seeds inside their bodies which have to come together before new life can start. A part of their bodies is fitted by nature for this purpose. Sometimes as in the case of a fish, the seeds come together in the outside water. But in dogs and birds and people, they mix in the mother's bodies, where they can be much better taken care of."

ADOLESCENCE

As your child approaches adolescence, which begins at the time of puberty, questions become less frequent. If confidence has been firmly established it is likely that much valuable information will have been imparted by answering questions in a simple, natural way. But it will probably be necessary for you to give information voluntarily about the important sex changes taking place.

Your boy and girl should understand that the new sensations and impulses that come to them at this time are indications that their bodies are being prepared for the duties and responsibilities of motherhood and fatherhood.

Your boy should understand that seminal emissions at night generally begin at about fifteen or sixteen, that they are normal and that no attention need be paid to them unless the recurrence is oftener than two or three times a month. He should also understand that the external sex glands manufacture a secretion which is absorbed by the blood, thus contributing greatly to the vigor of manhood. Boys should not be frightened by exaggerated statements regarding the effect of self-abuse, but they should understand that such a habit interferes with the development of the manly qualities they are all ambitious to possess. The prevalent idea that it is healthy to exercise sex organs should be corrected. The common sense and idealism of a life of continence before marriage can be emphasized at this time.

It is highly important that girls, before their bodies show signs of change, should be told about menstruation. Make your daughter understand that this is a normal function; that she will have no pain and practically no discomfort if her body is healthy, her muscles firm and well developed, her blood and digestion as they should be. During early adolescence, if it has not been before, explain to her the reproductive system and the method of reproduction. It is in such explanations that the girl learns once and for all the danger of illegitimacy connected with irregular sexual intercourse.

Pamphlets for boys and girls may be obtained from the most progressive boards of health; safe books for them may be obtained at the best libraries.

As your boy associates more and more with his compan-

ions and men outside the home, he has a right to some definite knowledge of venereal diseases. When the girl enters industrial or business life or is subjected to the dangers of questionable companions, she should also be told of the seriousness of these diseases. Here more than anywhere else you must regulate the amount and kind of information to suit the individual boy and girl. It is necessary that you have accurate knowledge of the seriousness and prevalence of these diseases. The description of them as one of many contagious germ diseases is a convincing way of handling the matter with normal boys and girls. Girls should be guarded against the exaggerations which would lead them to believe that all men have exposed themselves to these dangerous diseases.

INDIRECT TRAINING

During middle adolescence (from sixteen to nineteen years of age) guidance becomes indirect. Direct instruction should not be repeatedly given; keep the youth's mind off the sex question. For your boy at this critical time the love of games and physical activities is able to produce interests and enthusiasm which diminish the temptations to wrongful sex activity. You should overlook no opportunity to encourage such natural athletic interests. You should encourage the eating of wholesome food and keeping the bowels in good working order. You should see to it that your boy has an abundance of exercise and fresh air, and from eight and one-half to ten hours sleep, depending upon his age. You must insist upon habits of frequent bathing and general cleanliness. Although girls are not so universally enthusiastic for physical perfection at this period, you should encourage as much as possible their physical development and participation in outdoor sports.

Your boy should also be encouraged in the development of interests in life—in the making of things, in the multitude of projects which keep them busy. With both boys and girls this is the time of opportunity to develop through literature high ideals of romantic love and earnest enthusiasms for unselfish endeavor. It is a time when the youth is interested in his future career, in reforming projects, in high adventure, and a time when he forms deep friendships. Participation in unselfish activities is a great safety-valve at this period.

In normal boy-and-girl life the developing sex life appears in an attraction for friends of the opposite sex. The manifestation known as "puppy love" must be guided and directed, but it can never be successfully repressed. Boys and girls should be encouraged to mingle socially at frequent intervals at times and places at which adults can be present. The practice of familiarities between the sexes, known commonly as spooning, presents a problem for you. It is positively useless to say "Don't do it." The real harm and unfairness of such things should be pointed out clearly.

WHERE TO GET INFORMATION

State Boards of Health and the United States Public Health Service have prepared pamphlets which present the facts of sex and describe accurately the venereal diseases and their effects, explaining the government's campaign against these diseases. These pamphlets, together with list of books endorsed by experts, are available upon application to either of the above agencies. If you are a member of a parents' organization, you can obtain pamphlets in quantity to pass on to other members. Although Public Health officers, policemen, and teachers have their important work to do in this campaign, there is no work more fundamental or more important than the parent's part in guiding and instructing his or her own children.

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- "Syphilis".
- "Gonorrhea".

Write the
STATE BOARD OF HEALTH
Madison, Wis.

1941

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SEX EDUCATION IN THE HOME



*(The Material in this Pamphlet was Prepared by the
U. S. Public Health Service)*

Virginia State Department of Health—Richmond, Virginia
1941

SEX EDUCATION IN THE HOME

During the last 10 or 15 years society has been learning that many tragedies in marriage and much suffering among innocent women and children have been caused by sex diseases. It is believed that the spread of these diseases has been due largely to ignorance and false ideas regarding sex. Formerly the subject of sex was associated with secret and vicious practices; to discuss it was indecent. Now, men and women are coming to understand that the sex function is intimately connected with the physical, mental, and normal development of the individual and with the welfare of the entire race. People are learning that its right use is the surest basis of health, happiness, and usefulness, and that it is a subject full of nobleness, purity, and health. It is believed that sex education will remedy, in large measure, the suffering caused by these diseases.

It has been discovered, moreover, that many of the disasters mentioned are due to false ideas acquired in childhood. When a mother evades the questions of her child regarding the facts of birth, or answers them untruthfully, its questions thereafter are generally directed toward other sources of information. The results are often most unfortunate. Sex education, therefore, should begin in the home not later than the time when the child asks its first question about the origin of life. It should proceed in easy, progressive stages, a little here and a little there, on through the years until the child has become an adult.

HOW TO BEGIN

A wholesome curiosity about birth and sex exists in all normal children. It is implanted by nature. This curiosity generally shows itself at the age of 5, 6, or 7. When a little child first asks, "Where did the baby come from?" or "Where did the kittens come from?" the mother's opportunity has come. An evasion or a falsehood now may be disastrous. When the child discovers it has been deceived it is not likely to return to its mother when it wishes to learn more. It will go elsewhere. Parents, both mother and father, ought to be prepared for four possible situations: (1) The little child may ask some such question as is indicated above; that is, "Where did baby come from?" (2) He may ask some utterly unexpected question, for example, "What does it mean, 'half shepherd and half St. Bernard?'" (3) He may ask some question beyond his years, some question the answer to which he is too young to understand. (4) He may not ask any question at all, either because he has had his curiosity satisfied from other sources or because he has got the idea in some way that it is improper to mention matters of sex.

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1. The parent may answer a question like the first safely, truthfully, and wisely in some such way as this: "Babies grow inside their mother's bodies, just as little birds in a nest or seeds in a flower. The seeds, when they are ripe, come out of the flower; the birds hatch from the eggs and when their wings grow they leave the nest; and babies, after they are big enough, come out from the mother's body, and we say they are born."

2. If the child asks the question regarding the breed of a dog or another animal, it may be answered somewhat as follows: "The dog is called half shepherd and half St. Bernard because one of its parents was a shepherd dog and the other was a St. Bernard dog. All little dogs must have both a mother and a father; little kittens always have a mother and a father, and so, too, there are always mother birds and father birds when little birds are born, and there are always mothers and fathers when little babies are born."

This often will satisfy the child completely. Sometimes it will be necessary or desirable to show the child some simple flowers like the sweet pea, and to continue somewhat as follows: "Do you see the fine, yellow dust in these flowers? It is called pollen. When the bee goes from flower to flower, it often carries pollen from one flower to another. The pollen contains male cells. They go down through the slender tube in the center to the bottom part of the flowers, where they find the female cells. There the male cells unite with the female cells. Then the new cells thus formed grow into seeds. We plant the seeds in the ground, and in the spring they develop into plants which bear flowers like these we are looking at. So in all kinds of animals and in people there are male cells and female cells, and both the mother and the father have a part in the development of the young."

3. When the child asks questions that are too unexpected for ready answer, it may be necessary to postpone a reply. But the mother should never evade the question or show amusement. She should answer promptly and directly that the question is one that she can not explain until the child is older; just as there are other questions about a steel bridge, for instance, or questions about the stars, that the child can not understand until it is in a higher grade at school. She should say that she will explain these questions when the child is old enough, and that any time the child may come again and ask this or any other question. If the child does not seem completely satisfied, however, she should answer the questions in a direct manner, rather than accept the risk of his going elsewhere for an answer. *The mother should keep the child's confidence by frankness and should always keep the line of communication open.* Most of his questions may be answered with safety by the use of the simplest language.

4. If the child asks no questions at all and makes no easy opening for the parent, then the parent should begin by referring to the recent birth of some pet animal or of a baby. The parent should always do this before the child first enters school or mingles much with other children.

If the child has been deceived, the parent may say to the child: "Do you remember when you asked me where baby brother came from, and I told you that the doctor brought him? Well, that is the way mothers answer little children, just as they tell them that Santa Claus brings them Christmas presents. You know now that mother and father are Santa Claus, and now you are ready for me to explain to you that babies really come from the mother's body." She may then proceed as suggested above.

Many parents would not hesitate to answer the child's simpler questions or to open up the subject with the child if the parent were not afraid of what the first question might lead to. It ought to be remembered by parents that it is not necessary to tell little children much. It is enough to satisfy natural curiosity and above all to keep the child feeling that he may come to the parent at any time with any question. The child should be made to feel the sacredness of reproduction and that what is perfectly proper to speak to the parent about may not be proper to speak to others about. Thus at an early age the child may learn the facts of sex in a clean way and at the same time he may learn to be properly modest and reticent.

THE RESPONSE OF ONE CHILD TO PROPER INSTRUCTION

The response of children to the truth is often most gratifying. A prominent physician tells of one twentieth-century mother whose 6-year-old boy had been brought to her bedside and introduced to his 2-day-old baby sister. She answered the boy's questions as to where the baby came from in this way: "Baby sister came out of mamma's body; baby sister was formed within mama's body; she was formed from materials taken out of mamma's blood, and that's the reason why mamma's hands are so thin and white and mama's cheeks so pale." To this further question, "Mamma, was I formed inside of your body and formed out of your blood?" the mother replied: "Yes, my boy, you were; and that's the reason why mamma loves her little boy so, because she gave her own life blood to make his body." The little boy's eyes took on a far-away look and he was evidently trying to grasp the great idea of mother sacrifice. Evidently this child mind got at last a glimmer of the great truth, because presently his wide-open eyes filled full of tears, and turning to his mamma he threw his arms about her neck and said, "Oh, mamma, I never loved you so much before."

"In telling this wonderful truth in this matchlessly simple and beautiful way," writes the physician, "that mother made a new, strong bond between her own heart and her boy's heart that will hold them together in bonds of strictest confidence and love throughout life. To this boy, parenthood is a sacred relation. That mother, by thus filling her child's mind with the thought of the sacredness of motherhood, completely occupied its virgin soil, giving no place for the noisome weeds of vulgarity and obscenity to germinate and grow. A child thus started in his knowledge of sex is saved from all that is vulgar and unwholesome, to all that is pure and wholesome."

INSTRUCTION SHOULD BE GIVEN STEP BY STEP

The parent should not try to tell the child many new facts at one time. Opportunities will occur for adding information as the child and parent observe the life of the plants and animals around them.

In the spring the child may be shown how the birds mate and how two of them are always together building the nest; how, after a time, the eggs are laid in the nest and the mother bird rests upon them with her warm body for a period of 10 to 20 days, leaving the eggs only for a few moments to get necessary food; and how, at the end of that time, the young birds begin to hatch. The parent may explain how the mother bird continues to protect them with her body, giving up, if necessary, her very life for their protection from enemies, until the little birds are able to fly and to care for themselves. Where young chickens are raised, a similar explanation may be given.

The same information can be conveyed little by little concerning the birth of the dog and of the lambs on the farm, and of the calves and pigs. Each lesson will give the child new opportunities to ask questions which have come into his mind since the previous talk. Two or three years after the first instruction, or, in other words, when the child is about 8 or 9 years old, it naturally will be curious to know what is the father's part in reproduction. The parent may then explain again the fertilization of the female cells in the flower by the male cells. The child may then be told that the male cells are made in the sex glands which hang from the lower part of the body, and that they pass from the father to a nest in the mother's body where the female cells lie and where the baby will grow perfectly protected from harm.

During the years between 6 and 10, when the opportunity offers, you should warn your boy (and it is often wise to warn the girl) against handling the sex organs except for the purpose of cleansing them. It is wrong to arouse fear in this connection. The child should simply be warned to avoid any companion who may try to teach him to handle his sex organs. He should be told, if necessary, that self-abuse is a selfish, stupid habit that may hinder his progress toward the finest manhood or womanhood. The best way to prevent the habit is (1) to keep the child constantly busy with healthful play and good companionship, and (2) to arouse a high respect in him for the wonderful process of reproduction made possible by the sex organs. In the case of your boy, you should see that the sex organ is kept free from irritating substances beneath the foreskin. Circumcision may be necessary to decrease the irritation and assist him in keeping clean.

ADOLESCENCE

As your child approaches adolescence, which begins at about 12 in girls and 14 in boys, questions become less frequent. If confidence has been firmly established, it is likely that much valuable information will have been given by answering questions in a simple, natural way. But it will probably be necessary for you to give information voluntarily about the important sex changes which now take place.

Your boy and girl should understand that the new sensations and impulses that come to them at this time are indications that their bodies are being prepared for the duties and responsibilities of motherhood and fatherhood.

Your boy should understand that seminal emissions at night generally begin at about 15 or 16. These experiences consist of a discharge of a fluid from the sex organs during sleep. They are normal, most boys have them, and no attention need be paid to them unless they occur oftener than one to four times a month. He should also understand that the sex glands on the outside of the body manufacture two secretions. One secretion is a fluid containing the male seeds or the father's part in the production of the baby. The other secretion is never seen but is absorbed by the blood, and contributes greatly to the vigor of manhood. Boys should not be frightened by untrue statements that self-abuse causes terrible results or other exaggerated descriptions of its effects. But they should understand that such a habit may interfere with the development of the manly qualities they are all ambitious to possess. The prevalent idea that it is healthy to exercise the sex organs through sex relations with women should be corrected. The common sense and idealism of a life of continence before marriage can be emphasized at this time.

It is highly important that girls, before their bodies show signs of change, should be told about menstruation. Make your daughter understand that this is a normal function; that she will have no pain and practically no discomfort if her body is healthy, her muscles firm and well developed, her blood and digestion as they should be. During early adolescence, if it has not been done before, explain to her the reproductive system and the method of reproduction. It is in such explanation that the girl learns once and for all the danger of illegitimacy connected with irregular sexual intercourse.

Pamphlets for boys and girls may be obtained from most state boards of health. There are good books for them, but they should be selected with care.

As your boy associates more and more with his companions and men outside the home he has a right to some definite knowledge of venereal disease. When the girl enters industrial or business life or is subjected to the dangers of questionable companions she should also be told of the seriousness of these diseases. Here more than anywhere else you must regulate the amount and kind of information to suit the individual boy and girl. It is necessary that you have accurate knowledge of the seriousness and prevalence of these diseases. The description of them as one of many contagious germ diseases is a convincing way of handling the matter with normal boys and girls. Girls should be guarded against the exaggerations which would lead them to believe that all men have exposed themselves to these dangerous diseases.

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The craving for companionship, especially the companionship of girls and women, should be satisfied. The youth who keeps away from all girls usually has a harder fight against sex temptation than the youth who seeks friends among girls of the kind he wants later to marry and whom he treats in a courteous and manly way. A young man's plan for marriage will often help to keep him straight when nothing else would.

INDIRECT TRAINING

During middle adolescence (from 16 to 19 years of age) guidance becomes indirect. Direct instruction should not be repeatedly given; keep the youth's mind off the sex question. For your boy at this critical time the love of games and physical activities is able to produce interests and enthusiasms which diminish the temptations to wrongful sex activity. You should overlook no opportunity to encourage such natural athletic interests. You should encourage the eating of wholesome food and keeping the bowels in good working order. You should see to it that your boy has an abundance of exercise and fresh air, and from 8½ to 10 hours' sleep, depending on his age. You must insist upon habits of frequent bathing and general cleanliness. Although girls are not so universally enthusiastic for physical perfection at this period, you should encourage as much as possible their physical development and participation in outdoor sports.

Your boy should also be encouraged in the development of interests in life—in the making of things, in the multitude of projects which keep him busy. With both boys and girls this is the time of opportunity to develop through literature high ideals of romantic love and earnest enthusiasms for unselfish endeavor. It is a time when the youth is interested in his future career, in high adventure, and a time when he forms deep friendships. Participation in exciting and unselfish activities is a great safety valve at this period.

Among normal boys and girls the developing sex life appears in an attraction for friends of the opposite sex. The manifestation known as "puppy love" must be guided and directed, but it can never be successfully repressed. The practice of familiarities between the sexes, known commonly as spooning, presents a problem for you. It is positively useless merely to say "Don't do it." The unfairness of such things should be pointed out clearly. Boys and girls should be encouraged to mingle socially at frequent intervals at times and places at which adults can be present.

WHERE TO GET INFORMATION

State boards of health and the United States Public Health Service have prepared pamphlets which present the facts of sex and describe accurately the venereal diseases and their effects, explaining the Government's campaign against these diseases. These pamphlets are available

upon application to the above agencies. If you are a member of a parents' organization, you can obtain pamphlets in quantity to pass on to other members. Although public health officers, and teachers have their important work to do in this campaign, there is no work more fundamental or more important than the parent's part in guiding and instructing his or her own children.

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THE QUESTION OF PETTING

By M. J. EXNER, M.D.

DISTRIBUTED BY
GEORGIA DEPARTMENT OF PUBLIC HEALTH
12 CAPITOL SQUARE S.W.
ATLANTA 3, GEORGIA

AMERICAN SOCIAL HYGIENE
ASSOCIATION . . . Incorporated
1790 Broadway New York 19

A Participating Service of the National War Fund, Inc.

PUBLICATION No. 853

PRICE 10 CENTS

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Prepared and Distributed under the direction of
The National Council of the Young Men's
Christian Associations and The American
Social Hygiene Association

Fourteenth Printing

The Question of Petting

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IN the general trend in recent years toward freedom, there has been manifested among young people the impulse to taste life in all its phases, and in no respect more frankly than in their social relationships. So much so, that there has developed what some believe to be the chief diversion among young people—the promiscuous play-at-love, popularly known as petting. And with youth's exasperating way of asking embarrassing questions they have faced the protests of their elders with "What's the harm?" The question being met mostly with conventional taboo and evasion, the young people have kept on petting. The challenge is fair, and if we have no answer that can inspire youth to convinced personal choice, then we may not appropriately prove or condemn.

While, on the one hand, there is no need to attribute to young people the reckless frivolity that many do, on the other hand, the matter is not to be passed off so lightly as others are inclined to do, for essentially we are dealing with the supreme source of human happiness—love. On the cultivation of the affections in adolescent years depends, more than on anything else, the development of the permanent personality, happiness and social

reactions of the individual. Does petting enhance or hinder a fine culture of the affectional life?

Let me first say a word by way of encouragement of friendships and companionships between the sexes. Attraction toward the other sex and craving for their companionship are among the most deep-seated native impulses of every normal individual. They, above all else, give life flavor, meaning and inspiration. Each is to the other the complement, the "unsatisfied valence," without which life cannot reach its fullest realization no matter what may be its other compensations. Can any more ennobling, more inspiring influence come into the life of young people than well chosen and finely nurtured friendships with the opposite sex? In my opinion, the principle of co-education is thoroughly sound.

SEX companionship is necessary for normal growth of the personality. When of the right sort, it is the most effective aid to a wise control and refinement of the sex urge. Separation of the sexes does not minimize these impulses; it renders them more insistent—and more subtly so. The World War strikingly revealed this fact. When we took great masses of men out of their normal setting and placed them in military camps, away from wholesome companionship with women, sex tension among the men was greatly increased. In the moral conservation program which was developed in the army no measure

proved more fruitful than the service of fine women among the troops. The testimony of the extent to which their presence helped men to hold on to their ideals and resist the pull toward savagery is striking.

It is important that young people should have many companionships among the opposite sex rather than that they confine themselves too closely to single friendships. No two personalities are alike. The stimulus, the educative and refining influence and the satisfaction of natural social needs which come from companionships with a variety of well-chosen persons contribute generously toward a well-rounded personality. Such diversity in friendships will tend to bring to the affectional life an intellectual quality, one of fine discrimination, and will lessen the chances of being swayed by a blind, muddling infatuation—often mistaken for love. Young people whose range of companionship with the opposite sex has been too greatly restricted are seriously handicapped in the most vital of all life's choices—the choice of a mate.

Young men and young women need not be prudish in their friendships. They need not be afraid of one another. Many well-meaning parents and teachers seek to discourage sex companionships among young people on the assumption that each sex is a danger to the other. This is a great mistake. Much in the present tendency among young people toward

greater freedom in their sex-social life is wholesome. The only danger in freedom is the misuse of it. Such freedom as is consistent with full respect for the personality of the companion is desirable. Without having tested mutual responsiveness with a variety of persons of the other sex, how can a young man or woman be expected to make an intelligent choice of a mate? Moreover, the question may well be raised as to whether a limited degree of physical intimacy between young people, especially those who are engaged, when guided by a quality of character that stops short of the danger point, may not serve to release sex tensions and sublimate the whole relationship.

Such tensions are a price of civilization. Animals, and man on the savage and barbarian levels do not experience these tensions. When the sex urge periodically arises it is gratified like any routine want. With the advance of civilization came a more gradual approach to, and progressive postponement of, marriage and sex relations. With this postponement of physical culmination came also the growth of courtship, of the finer psychic qualities of love, the considerate restraints, the uplifting substitutes, and thereby the delicate social graces, ideals and virtues which raise love-life infinitely above the animal and savage levels and give it high esthetic and spiritual meaning. But these higher types of affection and of social life are bought at the price of self-discipline, of conscious postponement of

satisfaction of natural desires. It means tensions and strains which create for youth no high problem of self-control. It may be that greater freedom in sex-social relations of young people than has been sanctioned in the repressive training of young people in the past may serve to give a degree of wholesome release to sex tension and to render companionships more wholesomely social. It brings the fight for self-mastery into the open as a definite intelligent repression of recognized desires for equally recognized and tremendously rewarding goals. To win in such a fight is the highest possible use of the new freedom.

But the testing of love's responses between a young man and a young woman does not call for a full abandonment to physical impulses such as petters are inclined to indulge in. Love's impulses lie close to the surface. It does not require abandonment to physical expression to reveal hidden fires, to sense the magnetism of the personality and to discover natures that are attuned to one another. Indeed it is such abandonment that tends at first to blind one against discrimination in the higher personal values and in the end to bring disillusionment and misery to both. Intelligent choice of a mate must look not only to mutual physical attraction but more so to harmony of tastes, feelings, desires, aspirations, appreciations, and of temperament. It must weigh spiritual more than physical values. The sheer physical gratifications require none of the in-

dividuality needed for true mating. Physical gratification can be given and received, as a rule, by anybody and everybody. The life-mate, however, must possess characteristics more individualized than the capacity to gratify physical hunger. But this consideration is likely to be swept aside when the merely physical urges are over-stimulated. The best marriages are not begun because of physical attraction alone. But many marriages that end in failure do begin in just this poorer way. Petting is likely to lead to such mis-mating by over-stimulating the merely physical urges and blinding one to the more essential personal qualities and the more subtle harmonies which are required for a life-long companionship and enduring happiness. These necessary gifts of discrimination and appreciation are not inborn. They must be cultivated and developed in friendships and companionships in the years of the teens when love is developing from bud to bloom. And they are not to be cultivated by promiscuous petting.

Young people often seek to justify petting by the simple statement, "It is natural," implying that what is natural is right and good. They are supported in this by a group of present-day writers who are seeking to develop a philosophy and ethics of naturalness. They insist upon freedom from repression and social restraints for the individual, and advocate full and free expression and satisfaction of natural impulses.

Obviously the course of civilization has been one of progressive departure from the natural to the artificial. Hunger for food is one of the most powerful natural urges. Nature provides the material for satisfying that urge. The natural way to satisfy it is to eat food raw as nature has served it. Yet man has learned to cook it, to combine its varieties, to blend its flavors, and to decorate it in numberless ways to tease the appetite and enhance the pleasure of eating. Man has learned to make food not only good but beautiful.

Again, the "natural" way to eat is to grab one's bone, away from others if necessary, and run into a corner or on top of a rock to devour it with all speed until it is safely down. That is the normal response to the natural urge, and it gives full satisfaction *on that level*. But man has learned to enhance the pleasure of eating by exercising self-restraint and eating socially. He has added to the mere satisfaction of physical hunger the pleasure of social intercourse, of companionship, of sharing with others, until today the act of eating has come to be the central feature of our sociability. By departing from nature, and in this sense becoming artificial, man has gained in eating, a greater, richer, more enduring satisfaction *on a higher level of life*.

THE sex urge, which is the basis of love, is another powerful, human hunger. Its *natural* satisfaction is found in the savage, in

whom sex expression takes the shortest route between desire and satisfaction on a physical plane, unembellished by the artifices of love. It is the way of the animal. But in this, too, man has learned to increase his satisfactions by the art of courtship, by long-circuiting sex expression through the whole wide range of esthetic, affectional and social appeal of which he has become capable. By self-restraint, by delay and limiting sex satisfaction on the animal level he has gained an infinitely richer and more lasting satisfaction of his natural impulses.

In his departure from the natural to the artificial, man has in one direction developed perversions which tend to make him more beastly; in another direction, he has developed lust into love. Even so, all that we boast of in civilization as an advance over the life of the savage has been achieved by passing from natural to artificial modes of life.

Is then the petter's reply, "It is natural," a valid justification? Does it not rather imply an acceptance of the lesser for the greater gift?

Petting is, as I have said, play at love. It is mock love. It stimulates the intimacies of genuine love which in marriage normally find their culmination in the rarest of all intimacies—the full physical and spiritual union of two personalities.

I indicated in a previous article that love on high levels is characterized by a fine balance

between its physical and spiritual elements, and also by freedom from promiscuity, because love is the most definitely personal of all human relationships.

The object of love is full identification of oneself with another personality. To this there is no satiety, no end of progress, no imposition, no regrets. This is the acid test of its genuineness. When love shifts its objective from a personality to a variety of casual and shallow experiences it becomes a mockery. Love's symbols and intimacies lose their psychic and spiritual meaning and minister, mainly, to the animal sense. Necessarily then, mock love tends to limit the development of the most precious elements and capacities of the personality, and often becomes the beginning of disillusionment, and cynical disregard of honor. In genuine love the deepest physical intimacies may serve love's highest spiritual ends. There need be no limit to such intimacies so long as they serve the spiritual enrichment of life. Indeed, it is the failure to cultivate and utilize these love capacities of mates in marriage to the full, the failure to cultivate "the art of love," that renders many marriages beyond the honeymoon stage dull, and progressively unsatisfying. Anything which enhances the vividness of love's expression and enriches life is legitimate and fine.

No intimacy which serves these ends, even though stimulated by those who have perverted

love to base and commercial purposes, need offend the esthetic sense of lover mates. It is not that the lover has borrowed from the prostitute; rather that all those who make such mockery of love have prostituted the art of the lover to serve primitive passion on a plane lower than that of the animals. But the physical intimacies, which in genuine love become esthetic and spiritual to the highest degree and which serve to reveal to lovers the wealth of love's resources, become unlovely, vulgar and degrading when employed in the promiscuous travesty of love. They lose love's meaning. It is because of this that young men and women should be prepared by education both to seek with singleness of purpose the highest uses of love, and to shun the casual indulgences which inevitably shut out the best.

LOVE'S intimacies are, then, neither good nor bad in themselves. It is the conditions under which, and the ends for which, they are employed that determine their personal value and their ethics.

The drifting tendency of petting seems to head steadily towards a rather careless promiscuity. Physical thrills are the object sought, not the interplay of the whole of two personalities. Love made thus casual, and hence impersonal, is robbed of any lofty or permanent meaning. For young people who are disposed to consider these matters thoughtfully, it is also important to realize that all love expressed

on a physical plane alone is self-limiting. It can never satisfy the higher psychic longings and needs. It is subject to the law of diminishing returns. Is this not likely a reason why petters seek a variety of experiences?

This impersonality which is found in promiscuous petting must mean in the end that one person comes to exploit another for purely selfish conquest regardless of the consequences of that person. This is, of course, particularly true of prostitution, and it is one of the principal reasons why prostitution is so degrading to the individual and so destructive to society. But do we not have very much of the same element of exploitation in petting? Real love seeks to give, and finds its supreme satisfaction in the giving. It seeks the happiness and the good of the object of love, and it suffers at an injury to the person loved. The real lover aspires to personal development and perfection in order that he may the more richly contribute to the happiness of his mate in love. The petter seeks chiefly his own pleasure and uses other persons to that end as he would use a thing, each to be cast aside when it has served its purpose. Such exploitation of others must necessarily be destructive to the personal character of the exploiter. Being essentially selfish it must in a measure lower self-respect. And we recognize self-respect as a first requisite to a soundly integrated personality.

Of course, there would probably be in most cases a mutual loss of respect, for, naturally,

each assigns to the other the same selfish motives which actuate him or her. One is bound to lose respect for the partner he exploits.

MANY times, when discussing these matters with college men who have sought to rationalize their petting experiences, I have said something like this:

"You realize, do you not, that these girls with whom you engage in petting do as a rule pet also with other men?" "Yes, of course."

"Is this the sort of girl you expect to marry?"

Usually the impulsive answer is, "Well, I should say Not!" and the answer is followed by confusion and embarrassment when they realize how they have exposed their ignoble motives and the selfishness of their position. They are willing to make a plaything of the girl who will permit it but when it comes to choosing a love mate, they set for their choice a higher, more discriminating ideal. Whether or not we admit such an attitude to be altogether sound, it is, nevertheless, significant that men very largely take this attitude.

Even more serious than these effects is the possible irreparable damage to marriage that may result from this casual expression of the affections. Is it not a degrading of the marriage ideal? The most important factor in the development of human personality and character

is the cultivation of tastes. The quality of the tastes which the individual cultivates will measure the level and quality of his life and his happiness, and none so much as his tastes in love. These are cultivated and determined during the years of the teens. Petting means the cultivation of low tastes and ideals in love. He whose musical tastes have been fed on jazz is not likely to rise to a full appreciation or rendering of a masterful symphony. Young people whose affectional capacities are cultivated by the mock-love of promiscuous petting and who, thereby, come to identify it with married love, are training for an order of marital life that tends to follow an ill-fated course through an exciting honeymoon, disillusionment, growing distaste, disharmony, maladjustment and divorce. *The essential harm of petting lies in the fact that it is a cultivation of a low order of love.*

Another important consideration is the fact that petting is playing with fire. We humans are so constituted that one cannot indulge in intimate physical contact with one of the opposite sex toward whom he has a natural attraction without arousing deep responses over which he has but partial control. This is especially true in the developing years of adolescence when sex impulses are strong and the powers of self-control still immature. In petting, each is assuming responsibility for creating for the other as well as for himself

a serious problem in self-control. The great majority of departures from chastity do not occur with deliberate intent, but result from loss of self-control under the spell of imperious forces aroused by unwise intimacies.

As I have already intimated, deliberately to forego an immediate, limited satisfaction for the sake of reaching a fuller, more lasting one on a higher plane of life is the essence of human progress. It is the way to self-realization. It is the way to the fullness of life. Petting offers the immediate reaping of love thrills on a physical plane that are undeniably pleasurable and fascinating. But are they worth the price? And what is the price? The progressive limitation of power to carry life to the high altitudes of love's experience. Anyone who fritters away his emotional capacities in the cheap and limited adventures of promiscuous petting, who cultivates the love capacities on a cheap emotional level is never likely to know the ecstasy, the richness, the expanding, compelling power of love at its best, such love as alone can give to life its fullest meaning. As Luther Gulick said: "The deepest love and passion is so engrossing that there is no room for the many. The man who rushes up each little ascent will never get the great all-inclusive view. The mountain-top is reserved for those who give themselves to it with single heart and utter devotion."

Suggestions for Further Reading

BOOKS

- Bigelow, M. A. *Adolescence: Educational and Hygienic Problems*. New York, Funk and Wagnalls, 1937. 60 p. Special price 25¢. (National Health Series.)
- *Sex Education*. New edition 1936. New York, American Social Hygiene Association. 307 pp. Special price 75¢ postpaid.
- Dickerson, R. E. *Growing Into Manhood*. New York, Association Press, 1933. 100 p. \$1.00.
- *So Youth May Know*. New York, Association Press, 1930. 255 p. \$2.00. (Paper ed. \$1.25.)

PAMPHLETS

- Health for Man and Boy*
Health for Women and Girls
Marriage and Parenthood } William F. Snow, M.D.
 25¢ per set

Three pamphlets for older boys and girls and adults, dealing with the venereal diseases and other problems of everyday life

- Choosing a Home Partner*. Newell W. Edson—10¢
 Practical advice to young men and women contemplating marriage

- Preparing for Marriage*. Paul Popenoe—25¢ (plus 40¢ express charges)
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