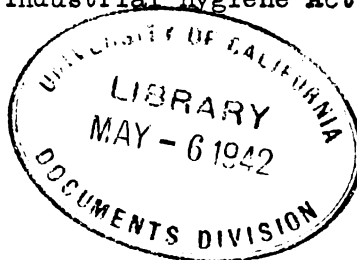


14.

INDUSTRIAL HYGIENE

Current News of Official Industrial Hygiene Activities



REPORT ON THE JOINT MEETING OF THE
NATIONAL CONFERENCE OF GOVERNMENTAL INDUSTRIAL HYGIENISTS
AND THE
SUBCOMMITTEE OF INDUSTRIAL HEALTH AND MEDICINE,
HEALTH AND MEDICAL COMMITTEE,
OFFICE OF DEFENSE HEALTH AND WELFARE ACTIVITIES

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NATIONAL CONFERENCE MEETS

Joint Meeting Largest Held

Conference members and their guests met, almost literally, at the heart of Washington's war effort.

As they came up the broad stone steps of the Social Security Building, they passed newsboys carrying papers whose heavy banners said: **BATAAN FIGHTS SIXTH DAY'S ATTACK.** Inside the block-square building, the marble halls were swarming with hurrying messengers; stenographers carrying urgent letters; men striding out with bulging brief cases; small knots of uniformed officers. (The Social Security Board, for whom this building was erected, never moved in. Here are located part of the War Production Board, the Office for Emergency Management, the Army Ordnance Department, the headquarters of the Federal Security Agency.)

The joint meeting of the National Conference of Governmental Industrial Hygienists and the Subcommittee on Industrial Health and Medicine, Health and Medical Committee, Office of Defense Health and Welfare Activities was called to order shortly before 9:30 a.m. in the high-ceilinged, air-conditioned, smoothly streamline-paneled auditorium on the first floor. Behind the members, and on the walls on each side of them, stood the famous "bits and pieces" exhibit which several months ago was sent through the country on a special train to bring particularly to small manufacturers some idea of the many parts of war material which they might be able to produce. There were plane propellers, radio walkie-talkie outfits, demolition kits carried by paratroopers, magnesium incendiary bombs. . . .

The symbolism was evident: during the two days of the Conference, every industrial hygienist present had a concrete reminder of the combat weapons whose production it was his job to facilitate.

Flanking the stage were two portable panels--exhibits of industrial health educational material--including photographs, posters, and the illustrated Workers' Health pamphlets.

Seated in the audience of two hundred were men and women from 34 states, 13 Federal agencies, 7 universities, 18 official and nonofficial organizations.

By the time the Conference members had recessed for lunch, they had heard six speakers. From the welcoming address of Surgeon General Thomas Parren and the paper of Federal Security Administrator Paul V. McNutt (read to the Conference by his assistant, Captain Watson B. Miller), to the final speech of the morning session, the members were able to get a national picture of Governmental activities tying in with industrial hygiene.

At lunch time the newspaper headlines had changed very little:
BATAAN HOLDS OFF JAP PRESSURE. . . .

As the Conference continued through its afternoon session and, later, on Friday morning, one single fact became increasingly evident. One speaker after another made the point from his own experience. Mr. J. J. Bloomfield, Secretary-Treasurer of the Conference, and Chief of the States' Relations Section, Division of Industrial Hygiene, National Institute of Health, stated the focal point compactly:

"Of the 52,000,000 workers enumerated in the 1940 census, nearly 49,000,000 live in States which have industrial hygiene services. During the past fiscal year, 25 State and local units (of the 43 in operation today) filed monthly reports. These show more than 6,000 war plant investigations covering about 2,000,000 workers. However, 30,000,000 work in those States from which these units reported. Half of these, it was found, were engaged in industries with potential health hazards. Of this group, then, only 2,000,000 workers were reached by the investigations. With present personnel and budgets this represents the peak load these industrial hygiene units can carry. Yet the need for their services continues to grow."

When the Friday afternoon session ended, the Conference members moved out of the auditorium slowly. That afternoon each man and woman there had seen the headlines: BATAAN SURRENDERS.

On the walls around them were the "bits and pieces" which had to be built, plenty of them, and in a hurry--to win the war. Ahead of them was the big job of helping to see that those "bits and pieces" were built by workers who could not only start them rolling, but keep them rolling.

With their own redoubled efforts, with the added support they were going back home to demand, they knew the big job ahead could be done.

SUMMARY OF THE CONFERENCE AND FUTURE OBJECTIVES

By

James G. Townsend, M. D.
Chief, Division of Industrial Hygiene
National Institute of Health

When this Conference opened yesterday, Dr. Parran said he believed industrial hygiene was reaching its maturity. I want to add that the wide range and careful deliberation of the speeches discussed here not only prove his point, but emphasize it.

The scope of this Conference is wider than any other which preceded it. In point of numbers and variety of interests, this is the largest conference devoted exclusively to industrial health ever held in the United States. To begin with, our major issue has a life-and-death significance which we have not minimized. Our speakers have been frank. They have given us the facts and figures to back up one inescapable conclusion: All-out, day-and-night production for victory; and healthy safeguarded workers, are as inseparable as two faces on the same coin.

I am particularly pleased, not only at the large attendance, but more so because of the wide range of organizations represented here. More than 300 members and guests of the Conference have been present during these two days. Thirty-four States, 13 Federal agencies, 7 universities, and 18 additional official and nonofficial organizations have been represented. I am happy to note the attendance of the students from the Johns Hopkins School of Hygiene, especially those who are citizens of our Allies -- students from far distant China, the Philippines, from Canada, Peru, Chile, the British West Indies, and the Dominican Republic.

The presence of Dr. Selby and his Subcommittee on Industrial Health and Medicine has been a fine example of the kind of shoulder-to-shoulder cooperation which gets things done. We all know of times when organizations whose objectives were parallel, somehow never got together, somehow were always back to back facing in opposite directions. The kind of cooperation we have had at this Conference is evidence that given the right men and the great objective we can work efficiently together.

The presence of Dr. Cunningham of Canada has been both an honor and a reassurance. The important part he has played in the Canadian war effort, and the fact that he is, in a sense, an unofficial ambassador from one of the United Nations makes his presence an honor. The reassurance comes from the knowledge that industrial hygiene is not something restricted to the borders of the United States.

I want to take this occasion to thank the Gentlemen of the Fourth Estate. As much as they may object to that rather elevated title, their cooperation and willingness to bring the deliberations of this Conference before the public makes them gentlemen in every sense of the word.

Dr. Parran told us yesterday that industrial hygiene must increasingly gear in with the other health services available in our States and cities. Industrial hygiene is beginning and will continue to take its part in an all-over adult health program.

Captain Miller talked about people and production, too, when he warned us to steer clear of approaching the man on the job with a dehumanized "monkey-wrench psychology" with which engineers customarily handle machinery.

Almost every speaker here has emphasized the great need for medical and nursing services in small plants. When such unanimity exists among speakers from so many different areas, what they have to say becomes, in effect, a mighty shout for action.

Two-thirds of our industrial population is now employed in small plants, the majority of which do not provide medical or nursing services. The individual contribution of these small industries to the victory program is small. But together, their total contribution is enormous. The effort to inaugurate medical or nursing services in these many plants must be of equal size.

The problems which face us are few in number. You can count on the fingers of one hand the major issues raised for your consideration by one speaker after another. First, the worker, individually and collectively, is the fulcrum of all our efforts. Second, the efficacy of our medical, engineering and chemical controls of occupational hazards has been demonstrated beyond doubt. Third, we are equipped by knowledge, experience and organization to reduce greatly the time-loss due to disability. Fourth, threats to the health of war workers have increased; in many parts of the country to a critical or even desperate stage. Fifth, to meet these threats -- to do more than merely avert disaster and to make vigorous health among our workers a commonplace -- all of our facilities for prevention and restoration must be expanded.

Mr. Dooley, of the War Production Board, mentioned that during the coming year or two an important source of new industrial manpower will be womanpower. Although Mr. Dooley proved that women can run many of the machines men handle, we know that the sudden influx of 2,000,000 women workers during the next year will necessitate full and adequate protection for their health.

The War Production Board has just released some interesting figures. Seven million, five hundred thousand people are now employed in war production plants. That number will be doubled by the end of this year. Fifteen million men and women making the complex weapons of combat will need every safeguard we can devise.

Dr. Selby also pointed out that the accelerated use of toxic materials and the introduction of new ones, longer working hours with shorter periods of recuperation, are potential threats to workers' health and war production. These specific problems should have priority ratings in your industrial hygiene programs.

It was heartening to see these facts recognized by such representatives of management and labor as Mr. Fletcher and Mr. Hetzel. Although Mr. Fletcher's major point was that a sensible industrial health program pays dividends to management, and although Mr. Hetzel pointed out that labor is ready, willing, and able to cooperate, both these gentlemen are really telling us that we are all in the same boat together. Government, medicine, labor, management, public -- if one of us balks from cooperating to the limit in seeing that production goes into high gear and stays in high gear -- it is up to the rest of us to shout together: "Sit down, you're rocking the boat!"

Dr. Johnson's forthright speech on the coordination of industrial health work raised a further issue. To be successful, he said, the multiple efforts of industrial hygiene should not put first things first and disregard the rest, so much as put all our efforts in proper balance. I believe we have attained that balance here.

Captain Miller made teamwork the keynote of this Conference. If each one of us can carry the teamwork and the frank give-and-take evidenced during these two days back to our own jobs, our balance sheet of accomplishment will be written in black next year -- not in red. As industrial hygienists we know the importance of men and equipment. Our accelerating national industrial hygiene program has demonstrated that men can be trained and equipment can be procured to do the jobs we have insisted must be done. We do not lack the raw materials.

Mr. Bloomfield has told us of the wartime work of our governmental industrial hygienists -- Federal, State, and local. He has shown us that the men concerned with workers' health throughout the country have done a remarkable job, but that they have been taxed beyond the limits of efficiency. Other speakers have given us communiques from the advancing battlefront of industrial hygiene research. What they have said adds up to one splendid fact: We have the "knowhow" to make every job in this country a safe job.

But several of our speakers who came here to tell us about their State activities have shown us that the spirit is willing but the coverage is weak. Yes, we have the "knowhow" these men have said, now give us the tools and we'll do the job! Before we can bring industrial health service into every war plant, we have to have the physicians, the engineers, the chemists and the technicians, the nurses and the health educators -- to do the job.

I once heard a story about a family in a seashore cottage who weathered one of the worst hurricanes that ever hit the Atlantic Coast. When the waves started to wash right into their living room, the husband, trying to bolster his wife's spirits, stuck his head out of the window and then passed the remark: "Looks like the water around our house is going down a little." "It's not this little water outside the house that's bothering me," his wife called back. "It's those 3,000 miles of water out there leaning up against this little water right here that's on my mind!"

Modesty need not preclude our extending the implications of this little fable. Many, many people -- 52 million of them -- are leaning not against this Conference, but leaning on the services this Conference can inaugurate, the services we can strengthen, the services we can and must extend until every American job and the communities depending on those jobs are safer, better, healthier to work and live in.

The contribution to human dignity and worth is unquestionable. But today we have a more immediate task. We have a war to win. I believe that the contribution of such a program to victory is of utmost importance.

Governmental industrial health men should see that their State health departments realize that although Federal funds carry the load of most of today's industrial hygiene programs, the present trend of the States to increase their share of financing these vital programs must continue. The end of the emergency should not also bring the end of what must become a basic service to our millions of workers.

Industrial hygiene is the riveting gun which can help connect the many overlapping plates of an adult health program. We can begin to immunize against such diseases as typhoid fever and smallpox immediately. With the machinery for venereal disease control already in action, we have an unparalleled chance to lessen the incidence of those diseases.

We must advance programs of medical care. Rehabilitation of handicapped workers presents an opportunity to use the badly needed skills of many men who today sit on the sidelines aching to get into the fight.

The quality of the work we have already accomplished is high. But this Conference seems unanimously agreed that the amount of work we have done is weak. We will never cure that weakness by continuing to spoon-feed services to less than ten percent of our working population.

In time of peace, industrial hygiene is a tool. In time of war, we must make it a weapon.

RESOLUTIONS ADOPTED BY
NATIONAL CONFERENCE OF GOVERNMENTAL INDUSTRIAL HYGIENISTS,
APRIL 10, 1942

- WHEREAS: The continued health and efficiency of the industrial population of the United States is a vital factor in the Nation's Victory Program; and,
- WHEREAS: The acceleration of production to meet the demands of the President for victory has increased the disability due to sickness and injury among war workers; and,
- WHEREAS: The health of the industrial population is the concern of Federal, State, and local health agencies; and,
- WHEREAS: Immediate application of the known means of public health control and prevention of industrial disease and accidents would substantially reduce the serious time-loss and cost due to disability; and,
- WHEREAS: The efficiency of the measures already employed by existing governmental industrial hygiene services to safeguard the workers' health and safety has been demonstrated; and,
- WHEREAS: The existing personnel, facilities, and technical resources of the National industrial hygiene program have been taxed beyond the limit of efficient service and have as yet reached but a fraction of the constantly expanding labor force in war industries;

BE IT NOW, THEREFORE, RESOLVED:

That, the National industrial hygiene program of research, training, and technical assistance to industry through the Division of Industrial Hygiene of the National Institute of Health, U. S. Public Health Service, and other governmental industrial hygiene divisions, be expanded to meet the existing and future needs in war industries;

That, Preventive services be supplied by medical, engineering, and nursing personnel for that two-thirds of the industrial population now employed in plants of small size (500 workers or less), the majority of which provide no such service; and to this end,

BE IT FURTHER RESOLVED:

That, The Division of Industrial Hygiene of the National Institute of Health, U. S. Public Health Service, in cooperation with the Subcommittee on Industrial Health and Medicine of the Office of Defense Health and Welfare Services, assume the leadership in developing plans for the extension of such services in small industries and in promoting the voluntary establishment of such programs by management.

WHEREAS: Community facilities for the conservation of health bear as direct a relation to the physical fitness and productive capacity of our war workers as does their working environment; and,

WHEREAS: Nine-tenths of the annual industrial disability is due to nonoccupational sickness and accidents; and,

WHEREAS: The shortage of physicians, nurses, and hospital facilities for civilian medical care is widespread and acute in war industry areas, and in many communities is, indeed, desperate; and,

WHEREAS: Failure to assure the availability of medical facilities to war workers and their families, under present conditions, constitutes a National emergency equal to the threat of enemy action among civilian populations; and,

WHEREAS: The U. S. Public Health Service is equipped by experience and organization to effect a solution of this problem;

BE IT NOW, THEREFORE, RESOLVED;

That, The U. S. Public Health Service assume the leadership to develop and administer the immediate mobilization of medical, nursing, and hospital facilities in critical war industry areas; and,

That, Governmental industrial hygiene services, industrial medical services, and private physicians effect closer working relationships with State and local departments of public health for the extension of general public health services to war workers and their families.

CONFERENCE OFFICERS FOR 1942-43.

The following officers were elected by the Conference membership on April 10, 1942:

Chairman	-	Mr. M. F. Trice
Vice Chairman	-	Dr. P. A. Brehm
Secretary-Treasurer	-	Mr. J. J. Bloomfield
Members of the Executive Committee	-	Dr. C. A. Nau Dr. J. L. Jones Dr. L. W. Spolyar Mr. R. T. Homewood

C O N F E R E N C E N O T E S

NURSING ROUND TABLE

On Saturday morning, April 11, a round table was held for nursing consultants of State divisions of industrial hygiene and their guests at the National Institute of Health, Bethesda, Maryland. The first part of the meeting was held with representatives of the Committee on the Development of Industrial Hygiene in Local Areas, and directors of State divisions of industrial hygiene. The informal discussion centered on ways and means of developing part-time nursing services in small plants, augmented by brief descriptions by State directors of progress in industrial nursing in their areas. The consensus was that there can be no set rules for giving such service, as needs and facilities vary greatly in different communities; a general procedure can be outlined to give guidance in the promotion and establishment of this service.

As a result of the discussion, a resolution embodying the points of such an outline, was prepared by the Committee on the Development of Industrial Hygiene in Local Areas.

At the second part of the session, special reports of effective nursing programs were made by State consultants.

C O N F E R E N C E N O T E S

E D U C A T I O N A L M A T E R I A L S A V A I L A B L E

Film

"Save A Day," the industrial hygiene film shown at the Conference, is now available for distribution. This dramatic one-reel film shows a mobile unit in action, a before-and-after industrial hygiene sequence, and highlights the need for expanded health service.

Securing prints on time for scheduled showing dates will be greatly facilitated if requests are made as far in advance as possible.

Exhibition Panels

The two portable panels seen at the Conference, on which are mounted photographs, posters and pamphlets, are also now available. These panels are made up of three sections: the center section is 6 feet long and 2-1/2 feet high, and is flanked by two side panels, 3 feet long and 2-1/2 feet high. The side sections can be set at almost any angle to the long center section. The entire panel, when mounted on the tubular stands, which are also supplied, stands 6-1/2 feet high.

Photographs

A set of three dozen 8 x 10-inch photographs, illustrating good and bad plant practices, protective clothing in use, exhaust systems, enclosure of fumes, and plant clinic facilities are available on request. A second set of three dozen similar photographs will be made available shortly.

NOTE: To obtain prints of the moving picture and the other educational material, write to Assistant Surgeon General E. R. Coffey, Division of Sanitary Reports and Statistics, U. S. Public Health Service, Washington, D. C.

Pamphlets

"Bill Gets the Works," No. 6 in the Workers' Health Series, has just been issued. This color-illustrated, pocket-size pamphlet explains the need for thorough pre-employment physical examinations, and describes a proper examination step by step. The pamphlet, which is written as a rather humorous monologue by "Bill" who is "getting the works," points out that a pre-employment examination is good health insurance, whether made by plant, union, or family doctor. Copies are 5¢ each, and may be obtained in quantity at \$1.50 per 100, \$12.50 per 1000. Orders accompanied by check, money order, or cash should be sent to the Superintendent of Documents, Government Printing Office, Washington, D. C.

News items for publication in INDUSTRIAL HYGIENE should be submitted to Sanitary Engineer, J. J. Bloomfield, Division of Industrial Hygiene National Institute of Health, Bethesda, Maryland