BABY-WEEK CAMPAIGNS

SUGGESTIONS FOR COMMUNITIES
OF VARIOUS SIZES

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LETTER OF TRANSMITTAL.

UNITED STATES DEPARTMENT OF LABOR,
CHILDREN'S BUREAU.
Washington, November 13, 1915.

SIR: Health authorities unite in saying that public interest is now needed to put into operation methods for infant welfare which are well ascertained and tested. The observance of a Baby Week is an expedient for securing attention to facts about the needs of babies which are well known by scientific authorities and which if popularized will greatly reduce the loss of infant life throughout this country.

The accompanying bulletin, entitled "Baby-Week Campaigns," has been prepared for the purpose of presenting in detail such practicable methods of organizing and carrying on a Baby Week as will be of general application and utility in cities, towns, and rural communities throughout the country. It has been requested especially by the General Federation of Women's Clubs, which has announced its purpose to promote a nation-wide campaign for the observance of Baby Week. The cooperation of many public and voluntary agencies in this nation-wide movement is already assured.

This pamphlet contains the gist of the practical methods used in various cities where successful baby-week campaigns have been carried on, references to sources of information and material, and suggestions for follow-up work. Among the important suggestions for follow-up work are those for the development of infant-welfare stations and of public-health nursing. Much of the material herewith presented has been taken from the publications of the boards and societies which have recently carried on baby-week campaigns in New York City, Pittsburgh, Chicago, Indianapolis, Topeka, and other cities, so that it is largely a record of actual experiences.

The bulletin has been prepared by Dr. Grace L. Meigs, head of the division of hygiene of the Children's Bureau, with the assistance of Mary Swain Rountzahn, of New York. Dr. Meigs desires to acknowledge valuable suggestions from many correspondents.

Respectfully submitted,

JULIA C. LAITHROP,
Chief.

HON. WILLIAM B. WILSON,
Secretary of Labor.
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BABY-WEEK CAMPAIGNS.

INTRODUCTION.

One of the developments of the profound and growing interest in the welfare of babies during the past few years is the Baby Week. The baby-week campaigns, which have been held in many cities, are primarily educational; their purpose is twofold—first, to give to the parents of a community the opportunity of learning the facts with regard to the care of their babies; second, to make known to a community the importance of its babies, the special facts relating to the babies of the community, and the need of permanent work for their welfare. These purposes it carries out in various ways—by newspaper and advertising publicity, by meetings and entertainments, and by such activities as a program of daily events, an infant-welfare exhibit, a baby health conference, plays, etc. In addition, there has been included in some cities the third purpose of gathering funds for infant-welfare work. The first Baby Week, which was held in Chicago in April, 1914, was of this type; also that of Grand Rapids, Mich., in 1915. The conditions and needs for securing money for infant-welfare work and the methods applicable vary so greatly in communities of various sizes that it has been thought best not to consider this type of campaign in the present general bulletin, which will deal only with Baby Weeks whose purpose is solely educational.

A Baby Week having the purpose of making known to parents and to the whole community facts which they should know about babies may be held successfully in communities of all sizes. The form that such a Baby Week may take will, however, vary greatly in different places. A rural community will probably not wish to carry out the elaborate program which would seem necessary in a big city to reach all the people. On the other hand, many large cities may not be ready at a certain time to carry on an elaborate program which will demand considerable expense and the constant labor of many people, but may be anxious nevertheless to bring the subject of babies to the attention of the public to an extent which will achieve substantial results. This bulletin, therefore, will give suggestions for a Baby Week of two different types:

1. A comprehensive baby-week campaign which will be appropriate only for communities of over 5,000 inhabitants, and in such commu-
1. Activities only when a preliminary conference has demonstrated the willingness of many different organizations and individuals to give considerable time and money to the campaign. (See p. 12.)

2. A baby-week campaign which will involve little expense and labor and which can be easily carried out in any community, whatever the size. (See p. 48.) A simple campaign such as this may include, besides the activities suggested, any of the features described for the more complete campaign.

In planning a Baby Week of either type two principal points should be remembered:

First. Baby Week should be a community campaign in which one organization—such as a woman’s club, the health department, the local infant-welfare or visiting-nurse society, or any other organization—may take the initiative, but in which all other organizations should be asked to cooperate. One of the greatest benefits to be derived from Baby Week is the fact that it brings together many organizations in a community for a common aim. Added to this is the fact that everyone has a far greater interest in work in which he has had a definite part.

Second. Baby Week should not be a temporary flurry and excitement, the effect of which is allowed soon to subside, but very definite efforts should be made by follow-up work to have it lead to permanent good for the babies of the community.

BABY WEEK IN NEW YORK AND PITTSBURGH.

Descriptions of two campaigns—New York Baby Week, held in June, 1914, and Pittsburgh Baby Week, held in June, 1915—are given below as illustrations of methods and program features of Baby Weeks, having an educational purpose. While the methods and many of the features of these two campaigns are useful only in a very large city, they serve to give a picture of a Baby Week.

NEW YORK BABY WEEK.

The purpose of the campaign in New York City was, first, to drive home to the public the fact that, while great advances have been made in New York in lowering infant mortality, much remained to be done; and, second, to create a widespread interest in the baby-welfare work under way and in the plans for increasing its scope. Such developments included additional milk stations; the development of prenatal care and of the supervision of expectant mothers; cooperation between infant-welfare agencies, public and private, and between these and hospitals; extension of the work of day nurseries, etc.

The decisive first steps for Baby Week were taken when the mayor appointed the Greater New York Better Baby Week com-
mittee, after a conference in which the following organizations took part at his request: Chamber of Commerce, Merchants' Association, Advertising Men's League, Advisory Council of the Board of Health, New York Milk Committee, Federation of Churches, Association of Catholic Charities, New York Board of Jewish Ministers, Federation of Women's Clubs, and New York City Conference on Charities. The personnel of this conference illustrates how broad was the interest in this movement from the very outset.

The slogan adopted for the campaign was "Better babies, better mothers, better city."

Official headquarters for the committee were assigned by the mayor in the Municipal Building, the office of which was temporarily equipped with furniture from other city departments. A paid secretary was put in charge of the office.

**PROGRAM.**

A detailed account of the features of the New York Baby Week has been published in a pamphlet entitled "Greater New York Baby Week" by the New York Milk Committee, 105 East Twenty-second Street, New York City. The following is adapted from this account:

The following program was made public in the early part of the week preceding Baby Week and all organizations and citizens were asked to visit the special agencies on their appointed days.

*Purpose.*—To call attention to needs met and needs not met in a campaign for “Better babies, better mothers, better city.”

*Saturday, June 20.*—Baby Sabbath to be observed in Jewish synagogues by reading of mayor's letter in pulpits, by special sermons, and other exercises.

*Sunday, June 21.*—Baby Sunday to be observed in churches. Illustrated articles in Sunday newspapers.

*Monday, June 22.*—Little mothers' day to be observed in the public and parochial schools of the city by the reading of a letter from the mayor and the distribution by the children of 1,000,000 pieces of educational literature to mothers.

*Tuesday, June 23.*—Milk-station day to be observed as "visiting day" in the public and private infant milk stations. Delegations from commercial and civic organizations to visit certain stations in official automobiles.

*Wednesday, June 24.*—Hospital and clinic day to be observed as above in the hospitals, clinics, and dispensaries.

*Thursday, June 25.*—Nursery and demonstration day to be observed in the morning at all institutions sheltering well babies, such as day nurseries, temporary shelters, convalescent homes, and asylums. Grand automobile ride for mothers and babies in the afternoon. Awarding of grand prize to winner of better-babies contest.

*Friday, June 26.*—Outing day, free ferry rides and steamboat excursions for mothers and babies, special music in parks, recreation piers, and playgrounds.

On little mothers' day exercises were held in 75 public schools. On milk-station day the 84 milk stations throughout the city were visited by delegations of citizens and officials, the aim being to make
better known the influence of these important factors in baby-saving work. The work of the health center of the New York Milk Committee was dwelt upon, as well as the need for further prenatal care. On nursery and demonstration day there were baby parades in Manhattan, Brooklyn, and Richmond. The prize was awarded to the winner among the 37 babies who had received prizes in previous contests. The babies were rated 60 per cent on their health and 40 per cent on home surroundings and mother's care.

Twenty thousand babies and their mothers were taken out on the river and bay on outing day. On the boats there were a physician and a nurse from the department of health for every group of 50 babies and mothers. Talks were given during the day on the proper care of babies.

PUBLICITY.

The publicity work was very ably carried on by a publicity committee in whose membership were members of the Advertising Men's League and of the press.

A letter was sent a week before Baby Week to the editor of each paper in New York describing the campaign and promising advance information with regard to the programs. For special stories different material was given out for each paper; for the small neighborhood papers an attempt was made to give the articles local interest. Cartoons, editorials, and special articles were secured through an invitation sent to special writers, cartoonists, and editorial writers.

The response was very satisfactory. All the leading dailies and the 200 smaller local and foreign papers published special stories during the week before and daily stories during the campaign. It was estimated that the 230 papers devoted nearly 1,500 columns of space to Baby Week.

Posters, large and small, with a picture of mother and baby and the slogan "Better babies, better mothers, better city," were displayed everywhere on billboards, cars, and in subway and elevated stations. Many illuminated signs were shown, and window cards were displayed in many windows.

Twenty-five thousand educational slips regarding the proper clothing of babies in summer were inserted in packages containing infant wear. (See Appendix, p. 53.) Slips on the care of the baby's bottle and nipples were inserted in drug-store packages. (See Appendix, p. 53.) Tags on the care of the baby's milk were distributed by milk dealers with every bottle of milk.

Slides were exhibited between films in 800 motion-picture houses of the city.
BABY-WEEK CAMPAIGNS.

PITTSBURGH BABY WEEK.

The purpose of Pittsburgh's Baby Week was thus summed up in the leaflets freely circulated among those who might be interested in taking part in the campaign:

Fundamentally, the purpose of Baby Week is educational. It seeks:

First. To bring to every Pittsburgher the fact that it is sound civic economy to reduce the sickness and death rates among babies and to improve the coming generation by measures which will keep the baby and mother well before and after the baby's birth. The community's responsibility for its babies is the central thought for Baby Week.

Second. To tell the people of Pittsburgh facts concerning the present status of infant mortality in their city and what is being done, both by public and private organizations, to improve conditions which injuriously affect the health of their babies.

Third. To give directly to the fathers and mothers, the brothers and sisters of babies such information about the care of babies as will result in better care and feeding during the summer months when the mortality rate is especially and needlessly high.

Fourth. To effect a better understanding which may coordinate the various agencies, public and private, which have baby welfare as their primary object, with a view to avoiding duplication and waste of effort and increasing the effectiveness and scope of their work.

The campaign was initiated by the department of health, with the assistance of a large and representative citizens' committee. Nine members of this larger committee were chosen by the chairman to act as a business committee. This smaller committee, working with a director, brought together hundreds of workers, who carried out a program of exhibits, talks, motion pictures, excursions, and widespread publicity designed to arouse the citizens to the importance of saving the 16,000 babies born annually in the city.

A feature of the Pittsburgh campaign was that its message was directed largely to the members of the family—the father and the brother and sister, as well as the mother; and the methods of the campaign made it possible to make sure that much of the educational matter reached directly the citizens for whom it was intended.

Fathers were honored by the setting aside of a fathers' day, when a message to fathers was published in the newspapers and distributed to men at meetings held in various parts of the city.

For brothers and sisters there were also a special day and a message. In advance of Baby Week, printed letters were sent by the committee to the school children of the entire city. Among other things, they were told what Baby Week was for:

It is to make everybody, old and young, think about the best things to do for babies and learn more about how to keep them well. If you keep your eyes and ears open that week you will hear about babies in the street cars, nickel-odeons, churches, parks, stores, and newspapers.
The girls who belonged to the little mothers' clubs were given an outing on brothers' and sisters' day, and the newspapers carried stories of some of the achievements of these little workers for better babies.

Every day was, of course, mothers' day, although one special day was set aside for an outing for the mothers who brought their babies regularly to the milk stations of the health department. There were meetings for the mothers in the eight district campaign centers scattered over the city, and thousands of pamphlets on the care of the baby were distributed.

To mothers whose babies had been registered with the health department, boys delivered gay little banners on flag day bearing the baby-week emblem, together with envelopes containing baby-week programs and this message:

The city of Pittsburgh presents you with this flag and asks you to display it in your window in honor of your baby. All homes where there are babies will receive flags, to show that all Pittsburgh is thinking and working for the best chance for the babies.

One means of making sure that homes of babies were reached was the use of district centers in the most congested parts of the city, with local committees in charge of meetings and distribution of literature in each district. Band concerts and motion-picture programs were given in parks in the various sections, supplementing the meetings held at the district headquarters. Committees from these centers also organized parties to attend the infant-welfare exhibition.

The central feature of the week was this exhibition, prepared under the direction of an exhibit expert and held on three floors of a railway station. The contrasting kitchens and bedrooms of the Do Care family and the Don't Care family aroused much interest. A special exhibit of panels and moving devices on the care of the baby was prepared for the occasion and for further use throughout Pittsburgh during the year.

A feature of the exhibition was the daily presentation of two little plays.

The publicity methods in Pittsburgh were largely those described elsewhere in the pamphlet.

SUGGESTIONS FOR BABY-WEEK CAMPAIGN NO. 1.

In this bulletin suggestions will not be given for campaigns in the largest cities, i.e., those having over 500,000 inhabitants. Such communities, if they undertake elaborate programs, without doubt will wish to work out original methods. The descriptions of the campaigns in New York City and in Pittsburgh, before given, may
be of assistance in making the first plans. Additional information with regard to these, as well as others, may be obtained from the following sources:

Chicago Infant Welfare Society, 104 South Michigan Avenue, Chicago, Ill.; Chicago Health Department, Chicago, Ill.; "Greater New York Baby Week," published by the New York Milk Committee, 105 East Twenty-second Street, New York City; "Good Fare, Good Care, and Fresh Air for Every Pittsburgh Baby," The American City, November, 1915; Children's Aid Society, 88 Baldwin Block, Indianapolis, Ind.; Division of Child Hygiene, Kansas State Department of Health, Topeka, Kans.

The following section will be devoted to suggestions for a Baby Week in a city of less than 500,000 but of more than 5,000 inhabitants. Many of the features here described will be appropriate in communities both larger and smaller.

ORGANIZING BABY WEEK.

THE FIRST STEP.

Probably the initiative in a Baby Week will come from an organization which has agreed that it would be a valuable undertaking. The first move should be to enlist the cooperation of representatives of all organizations and interests in the community. The organization beginning the movement may be a woman's club, the city department of health or other city officials, the local infant-welfare or visiting-nurse society, the chamber of commerce, or any other organization. This organization or a committee of its members should make a study of all the other groups in the community who might reasonably be expected to take an interest in the movement and call a meeting to consider the matter.

In cities of various sizes the number and names of the organizations to be called upon will vary greatly; in any community, however, the attempt should be made to enlist the help of all agencies naturally interested in child welfare and also of all organizations representative of the varied interests of the community. This would ordinarily include the mayor and city officials; the city health department, especially its division of child hygiene or child welfare, if this exists; all women's clubs; the school board and the principals and teachers of the schools; the local medical society; the local infant-welfare society; the local visiting-nurse society; the churches; all charitable organizations and settlements; the Camp Fire Girls; the Boy Scouts; the playground authorities; the newspapers; chamber of commerce; other business men's organizations; labor unions; fraternal orders, etc.
A meeting of representatives of these organizations should be called for the purpose of proposing the Baby Week and obtaining an expression of opinion as to the advisability of undertaking it and the strategic time for holding it. Such an expression of opinion is important, because a generous cooperation from all organizations is essential to the campaign and can be counted upon only if the various groups have registered their approval of the plan at the start.

The group which calls the meeting should have a clear idea as to a suitable time for holding Baby Week, certain results that they hope to accomplish, an approximate amount of money that Baby Week is likely to cost, and in a general way the scope of the campaign. It would be the business of the meeting to pass on these suggestions and to appoint an organization or executive committee to draw up a definite plan embodying the suggestions agreed upon. This committee (with the help of an adviser if the campaign is to be an extensive one) will map out a detailed scheme for the whole campaign, to be carried out under its own direction if the meeting has authorized this step, or to be submitted again to a second general meeting if that has been the general desire.

It has been pointed out that in coming to a decision to hold a Baby Week important considerations are the time for holding it and the cost.

Time.—Usually there is an advantage in holding Baby Week in the spring, for the reason that the death rate of babies is highest in the summer months, and the educational work therefore will have the greatest value if it is fresh in the minds of the people when the summer arrives. A comprehensive campaign should be set for a time at least two or three months, preferably six months, distant from the date on which the decision to carry it out is reached. This interval is necessary in order to allow ample time for careful selection of committees, for planning details, and for allowing clubs and schools to so arrange their programs that they will be in a position to cooperate when the time comes. A simple campaign may be arranged, however, in a shorter period.

Cost.—Although the most natural question to ask is “What will Baby Week cost?” it is the most difficult question to answer—partly because the circumstances under which Baby Weeks have been held in the past have been so varied that no one of them offers a precedent for other cities; and partly because, given a certain type of Baby Week, the cost will vary in different communities. In one place certain contributions of service and material will be available that cannot be obtained in another; for example, while New York spent only about $650 in actual cash, the committee estimated that an advertising campaign of the same scope conducted on a commercial basis would have cost not less than $200,000. Much of the service and the
advertising that made this campaign possible would not be available in a smaller city or in a city where the machinery for getting people together was not so well organized. In Pittsburgh it was estimated at the beginning that the campaign would cost $10,000; ultimately the actual cost was reduced to $6,000 through the omission of certain features and the obtaining of unexpected contributions of service and printed matter.

Even a small amount, if the committee can reasonably hope to raise only a limited sum, will pay for some sort of a campaign. As a guide for those who are uncertain as to how much they ought to invest a list is given below of the kinds of service and materials that should be obtained either through contributions or through money payments in order to carry out a campaign of the type to be described.

1. An item that is to be taken into account in any sort of campaign is the printed matter. Here, as can readily be seen, the cost will vary greatly, according to the size of the community, the extent of the campaign, and the amount that can be obtained as a contribution or as a deduction from the usual rates. The list of printed matter given under the publicity section may serve as a basis for estimating the kinds of printed matter which may be needed.

2. Another assured item of expense is postage, which will also vary greatly. This, however, is one of the places where it seems least advisable to save, since much can be accomplished through distributing widely the printed matter, requests for service, announcements, and invitations of the campaign.

3. The cost of program features, such as plays, meetings, and outings, should be small. In any campaign that is sufficiently enthusiastic to arouse the interest of large numbers of workers, almost all of the needed materials and service could well be contributed or lent.

4. The cost of administration is one of the items which, while adding to the expense in one direction, is quite likely to be a saving in others; that is, the employment of a secretary or director, unless such services are volunteered, means the saving of considerable confusion and waste that grows out of undirected effort; also sufficient stenographic assistance means that there is an opportunity to get out much material that will help to make the machinery of the campaign run smoothly. Probably the secretary and one or two stenographers will be needed for a period of five or six weeks, including the Baby Week. Allowance may well be made for the services of an outside adviser for advance consultation; even the smaller places would benefit by a one-day visit. Organizations referred to elsewhere as interested in social-welfare campaigns may be able to suggest some one for the position of director or adviser.

5. If an exhibit is held, there will be some expense for transportation of borrowed exhibits or for the construction of a small exhibit,
or both. The panels made up cheaply for temporary use are not likely to cost more than $2.50 to $3 apiece, including the lettering. There will be some expense for frame work and for incidental expenses, such as cartage. A saving can probably be made in the exhibit construction through obtaining the assistance of manual-training classes in the schools.

6. Such items as hall rent, office rent, telephone, office supplies, lighting, etc., may also be contributed, though some of them may prove to be items of expense.

COMMITTEE ORGANIZATION.

While it may be contended with some truth that multiplying committees often increases the work of the leaders and that in the end a few people may bear most of the burden, yet one of the chief purposes of the campaign is served by giving large numbers of people an opportunity to take part. The extent to which it is possible to make use of large numbers of volunteer workers depends largely on three things:

First. That there shall be time enough allowed for making up committees and assigning their duties before the actual work of preparation begins.

Second. That some one person or small group of persons shall direct the activities of the committees and from time to time check up what has been done.

Third, and most important. That each committee shall receive a very definite and clear-cut assignment of work. This assignment should be given in the form of a written statement, if possible, and should be so planned as not to overlap in any way the assignment of any other committee.

If there is time and supervision is available, it is often desirable to divide up the work into rather small units in order to increase the opportunities for participation in the campaign, and also because many people will respond to a request to do a little work who would not undertake any large responsibility.

A list of working committees that would seem desirable for carrying out the plan of campaign described later is as follows:

Executive committee with administrative subcommittees on finance, volunteer helpers, directory of organizations, automobiles, etc.
Committee on baby-welfare information.
Program committees, including a committee for each daily event and special feature.
Publicity committee, with subcommittees on press, printing, advertising, talks.

The desirability of employing a director or executive secretary depends largely on the extensiveness of the campaign and the avail-
ability of a competent volunteer worker who will give full time to directing the work for a period of weeks. Without such a worker it would not be advisable to undertake more than a few features of the plan given later, since there is certain to be more detailed work than can be carried out successfully through the undirected efforts of a group of committees. It is very important to have stenographic service for sending out directions to committees, requests for service and contributions, material for the newspapers, etc. The success of many of the publicity features, especially, depends on a generous amount of clerical work, part of which can of course be carried out by volunteer helpers.

**Executive committee.**—This committee should take the final responsibility in all matters of policy and detail of the campaign management. If it seems advisable to have a large committee, it is suggested that a few members, not more than seven, be made a subcommittee with power to act on all matters of detail, after the larger committee has adopted a general plan covering all the principal features of the campaign. At the close of the campaign the executive committee should not be dissolved until all the affairs of the campaign are finally settled and a committee on follow-up work is appointed.

**Finance committee.**—The finance committee should be appointed at the time it is decided to undertake the campaign. Methods for raising money for the campaign should be worked out on the lines which experience has shown are practicable in the community.

**Volunteer helpers.**—In addition to the workers on the committees who have definite assignments of work, there is sure to be a need for volunteer workers who are ready to give one day a week, or more, to performing various services, such as clerical work at the headquarters. They will be needed in the office for addressing envelopes, making lists, clipping newspapers, writing notices of meetings, receiving visitors, answering the telephone, arranging printed matter for distribution and performing other kinds of service. A simple and effective method of organizing the committee on volunteer helpers is for the chairman to appoint one member of his committee to be responsible for the necessary helpers for a certain day each week during the month or more of active preparation.

**Directory of organizations.**—One of the first needs of the organizing or executive committee will be a card catalogue of organizations of all kinds in the community. This will be used in selecting committees and later in sending out circular letters and for general reference.

The necessary information for the directory of organizations may be obtained from the city directory, the classified section of the telephone book, well-informed individuals, and many other sources, dif-
Serving as the methods differ. The lists should include church societies, civic and social welfare organizations and institutions, athletic, social, and literary clubs, lodges, business men’s organizations, trade unions; in fact, any organized group formed for any useful purpose.

Automobiles.—Both during the preparation and during the week itself automobiles will be needed for various purposes, particularly for the parades and the outing. It will probably be found more satisfactory to have one committee in charge of making up lists and of obtaining the use of automobiles for all purposes than to have each committee that has some need for automobiles make its own requests. The committee should begin early in the preparation to make up a list of owners of automobiles or other vehicles who would be willing to loan them, either occasionally or once for a special occasion.

Baby-welfare information.—A committee should be in charge of gathering the facts as suggested in the section of the pamphlet entitled “Baby-welfare information.”

Program committees.—Each of the program features that are planned for the week should be in charge of a separate committee, who should receive an outline describing the plan for the event or special feature agreed upon by the executive committee.

Publicity.—In a small campaign probably one publicity committee can readily take charge of all the work. If the campaign is extensive, however, it would be advisable to have at least the divisions suggested in the outline of separate committees on press, printing, advertising, and talks. An advantage in the division is partly that the people most needed would not have time to attend to all the features, and partly because different kinds of publicity require different types of workers. For example, for the press committee it would be well to have the editors or owners and other representatives of all the local papers. This committee should be called upon to advise on questions of policy. Much of the actual newspaper work would probably be done by the secretary, by a specially employed press representative, or by volunteers with newspaper experience who would agree either to prepare copy or to meet the reporters from day to day and give them material.

GENERAL PROGRAM.

The scope of the program to be decided upon in each community will depend upon the available resources. From the following suggested features, or others which may be proposed, those which appear practicable for the particular community may be selected.

The general baby-week program to be decided upon by the executive committee may follow one of three general plans:

1. All the interest may be centered in some one place where exhibits, motion pictures, plays, and meetings serving to draw large
numbers of people are held. In this case practically all the publicity will be directed toward bringing the people to the central place, and in fact all the methods will largely follow those used in conducting a social-welfare exhibition.

2. The second method may be that of spreading the educational work of the campaign throughout the city by means of printed matter, news articles, meetings in schools, churches, and parks, and of daily events, none of it being related to any central place. In this case the headquarters will simply be the office from which the work is directed and the news stories and other information given out.

3. A third plan would be to combine the features of both the first and the second; that is, to have a central feature, not necessarily extensive, together with daily events and with publicity work spread throughout the city. On the whole the third plan seems best, since it combines the advantages of bringing people together with those of carrying much of the educational matter directly to the homes and the neighborhood of the people whom it would be hard to bring to the central place.

The central feature in this case should not be so elaborate as to require the efforts of a large number of people. On the other hand, it should be a place from which the campaign goes out to the city and where people will get a sense of great activity and enthusiasm. One of the following plans for the central feature may be used; it would not seem advisable, however, to use both. (a) Either a headquarters would be maintained in a vacant building in the heart of the business district, where space is set aside for an information booth, a small exhibit, and informal talks with stereopticon slides or motion pictures, and a rest room; or (b) a babies’ health conference, supplemented by a small exhibit, may be held, also in a central location.

Some features suggested for central headquarters are:
1. An attractive window display, such as a moving device, a miniature nursery or milk station, or some other object.
2. An information booth just inside the entrance, with large placards on the wall telling of the aims and program of Baby Week. Several people should be present here constantly to answer questions and should have on hand a generous supply of all kinds of printed matter used for Baby Week.
3. A small exhibit, particularly on baby-saving work, rather than an exhibit giving direct instructions on the care of the baby, is a good feature of the headquarters, as the attendance here will be composed largely of people drawn in from the street, as well as of people brought by the general interest aroused through the baby-week publicity. For exhibit suggestions, see page 31.
4. If the size and shape of the headquarters permit, a separate room or a space curtained off may well be used for brief meetings held at intervals throughout the day. At these meetings talks may be given about the objects of Baby Week, illustrated by stereopticon slides, and if the conditions of the hall permit, these may be supplemented by motion pictures on subjects relating to public welfare. In such meetings no one group of people should be held for more than 20 or 30 minutes, as the greatest advantage will come from reaching large numbers of people with a brief message.

5. A rest room with toilet facilities for women will be a useful addition, especially in communities which are the centers of rural districts. Women coming in town to see the exhibit will be very glad to have the use of such a room.

The office for the director or secretary or persons in charge of the campaign should be in the campaign headquarters, if possible, but should be in a separate room, or at least partitioned off in a space where the work may be carried on without interruption from the visitors to the headquarters.

For the second type of campaign center, in which the chief feature is a baby health conference, the following features may be included:

1. An infant-welfare exhibit, dealing either with the care of babies or with the need for infant-welfare work, or both.
2. Equipment for demonstrations in the care of babies and in cooking for babies and young children.
3. A lecture room.
4. A rest room.

PUBLICITY.

As the whole campaign consists of educational publicity, the term as used here may be misleading. The program features and the work of committees, in fact everything that is done in connection with the campaign, has a value in spreading the interest and the news equal to that of the features that are classed for convenience under "Publicity."

The chief avenue of publicity is of course the daily papers. In almost any community the cordial cooperation of the newspapers may be counted upon. It is due the newspaper, however, that the committees planning the campaign furnish material that is really "news," and that they make their campaign so interesting that people are glad to read about it. Probably the first step to take is for the committee to confer with the editors of the daily papers and receive their suggestions as to the methods to be pursued in supplying material. The employment of a press agent depends largely on the question of funds and the availability of some one who can write up the material both sympathetically and in a readable manner.
Following are some of the possibilities of interesting newspaper publicity:

First. A news story when the Baby Week is first decided upon, followed by other stories at intervals. Then daily stories should appear during Baby Week. If the events are made interesting, generous space can probably be counted on each day.

Second. Some papers may be willing to carry a special department during Baby Week, such as a series of articles on the care of babies; a “Question and answer” department; or a series of special stories on baby-welfare work and the local conditions and plans.

It has everywhere been found that the campaign serves to “make news” of the facts about baby welfare, and every article connected with Baby Week, whether it is about the work of a committee or an event of the week may give an opportunity for saying something that adds to the educational work of baby welfare.

For examples of newspaper articles on Baby Week, see Appendix, page 53.

Newspaper syndicates, syndicates sending out material in matrix form, and “ready-print” companies may have material with definite release dates on these subjects which they are ready to furnish to editors.

The Children’s Bureau will send on application articles on various subjects connected with Baby Week, which may be adapted for local use.

PRINTED MATTER.

The printing may be divided into three groups: (1) Educational; (2) advertising; and (3) printed forms. If an official emblem and a slogan have been adopted, they should be used on all printed matter. A good slogan is an important feature of the campaign. A local competition for design and slogan gives an excellent bit of publicity when Baby Week is first being planned.

In most cases the educational printed matter, consisting of leaflets and pamphlets on baby care, will not need to be printed locally. Many city and State departments of health, and certain Federal departments, have prepared such material for distribution free of charge or at a small cost. Lists are given on page 55 of the Federal departments and the private organizations from which pamphlets may be obtained. At least 23 State departments of health have issued, and many more are planning to issue, pamphlets on baby care, so that it would be worth while in every case to inquire of the State department of health. As the Baby Week is so largely an educational campaign, the opportunity for the widespread distribution of good pamphlets and bulletins on the care of the baby is a great one and should be made the most of. On the other hand, these pamphlets
should not be wasted. If the special messages to fathers and to
brothers and sisters of babies suggested by the Pittsburgh Baby Week
are to be used, they will have to be prepared by the local committees.
A copy of such a message is given in the Appendix, page 60.
The advertising printed matter may include some of the following.
It is hardly likely that any campaign would care to use them all.
First. An advance bulletin of from 4 to 6 pages giving the plans
and purpose of the campaign. This is for distribution among possible
workers and contributors. This should be of a size to enclose in a
letter-size envelope without folding.
Second. A program of events, on a single sheet; for wide distribu-
tion.
Third. Large cloth pennants with the baby-week dates and slogan,
to be hung from wires across the principal streets.
Fourth. Inclusion slips, stickers, window cards, street-car cards,
and billboard posters, circulars, tags, mimeographed letters, cam-
paign buttons, or pennants should be provided by the printing com-
mittee in accordance with the plans of the advertising committee.
Such printed forms as are needed in connection with a baby health
conference, a school day, or other special features, should be secured
through the printing committee.

ADVERTISING.

The advertising is largely a matter of the good distribution of the
printed matter and of the carrying out of a series of special features
of which the local committee will undoubtedly devise more than are
given here. Practically all of the advertising should be without cost
to the baby-week budget except for printing. Some of the following
features are suggested:
Mention of Baby Week in the advertising space of theater pro-
grams.
Two or three slides shown in every motion-picture theater; one to
announce Baby Week, one to tell of the special central feature such
as the exhibit or health conference, and possibly a third giving a
list of the events of the week.
The following uses may be made of the printed matter listed above:
(a) Department stores, drug stores, and other large stores may be
asked to include slips in all bundles sent out during Baby Week and
several days preceding its opening.
(b) Automobilists and firms having delivery wagons may be
asked to display pennants.
(c) School children may be given some of the literature, such as
the programs and the folders, to take home to their parents.
(7) The company controlling the inside space for street-car ad-
vertising may give space for cards announcing Baby Week; if not, it
is possible some of the advertisers will either give the use of their space for a week or mention Baby Week in their own advertisements. Letter writing can be carried out indefinitely if there are good committees to follow it up. This is especially useful if it is desired to interest people throughout a county or rural district in Baby Week. For example, the school children may be asked to write letters as composition work, in which they will tell their parents or relatives or friends in the county about Baby Week and invite them to attend. Members of various local organizations may be asked to write letters to the other branches of their organizations in near-by towns inviting them to send in delegations to celebrate Baby Week.

**TALKS.**

A subcommittee of the publicity committee may do a great deal of advertising of the campaign through 5 or 10 minute talks at all sorts of places where people gather. By using the directory of organizations they can probably learn of many weekly meetings where they can present the subject in a brief talk. By watching the daily papers they will note many meetings at which a speaker ready to fill in with emergency talks can appear for a few minutes.

Permission may be obtained from the managers of theaters and motion-picture theaters for good speakers to deliver short addresses between the acts or reels.

**BABY-WELFARE INFORMATION.**

An important part of a baby-week campaign is the gathering of accurate information with regard to the death rate of the babies in the community and the conditions especially affecting babies. This information will be useful in the campaign in a variety of ways—for the preparation of exhibit material, for newspaper stories, for printed information to be sent to ministers preparing baby-week sermons, for speeches and talks at mass meetings and informal meetings throughout the campaign.

The committee in charge of obtaining this information should include in its membership the local health officer and registrar and other individuals who have had the opportunity of studying local conditions, and should secure the following data:

1. The baby death rate.

It has been pointed out repeatedly that one of the primary necessities in work for infant welfare is an accurate knowledge of the number of births and deaths of babies. As is well known the United States lacks such complete records. The test of birth registration carried on by many women’s organizations in the country in coop-
eration with the Children's Bureau has demonstrated the great need for better laws and for the better enforcement of the existing laws. In most communities, therefore, accurate statistical data with regard to the baby death rate can not be obtained. Where this is the case, the need for better vital statistics should be emphasized throughout the campaign.  

The facts, as far as disclosed by the records, should be studied. The following figures should be compiled:

(a) The number of live births during the last calendar year of which records are obtainable at the time of the campaign.

(b) The number of deaths of babies under 1 year of age during that year.

(c) The baby death rate, or infant mortality rate, which is the relation between the two. The rate is expressed as the number of deaths of babies under 1 year of age per 1,000 live births during the same year. In the smaller communities the number of babies born alive during a year may not reach 1,000; the rate is then obtained by reducing the ratio to terms of the number of deaths per 1,000 live births. For instance, if the number of babies born alive during the year is 200, while the number of babies under 1 year of age dying during the year is 25, the baby death rate will be 125 per 1,000.

(d) Compilation of the figures relating to the number of deaths of babies during the year from various causes: as from diarrhea and enteritis, bronchitis and pneumonia, and from diseases due to causes acting before or at birth.

A useful method of studying and portraying conditions in the community is through the preparation of two spot maps, one showing the location of the births and the other that of the deaths of the babies during the year studied. Maps for this purpose should be large and should contain very little detail. The spots should be made at the location of the address where the birth or death occurred. The spots may be drawn by hand or put on with a rubber stamp, or they may be represented by short pins with colored glass heads.

2. Data regarding all infant-welfare work being done in the community by the department of health or by private organizations, including:

(a) Infant-welfare or milk stations or other types of permanent stations.

(b) Work by visiting or public-health nurses.

(c) Educational work by pamphlets, lectures, etc.

(d) Provision for sick babies at hospitals.

(e) Prenatal care, supervision of expectant mothers, proper obstetrical and nursing care of mothers.

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1 See Birth Registration, United States Children's Bureau publication No. 2.

Provided by the Maternal and Child Health Library, Georgetown University
(f) Summer camps or tents for babies.
(g) Ordinances, enforcement, and work done for the prevention of blindness among babies.
3. A study of the local milk supply.
4. A study of the sanitary conditions of the community which affect the babies.

These studies may be made preparatory to Baby Week or may be included in follow-up work (see p. 43). They may form part of the program of women's organizations during the winter.

PROGRAM OF DAYS.

The feature of Baby Week that affords the best opportunity for interesting newspaper publicity and for enlisting large numbers of volunteer workers is a series of special events for each day in the week. Some of those mentioned in the following list may be suggestive.

BABY SUNDAY.

Baby Sunday may well begin the Baby Week.

The committee in charge of this part of the campaign should secure a list of the leaders of the religious bodies of the community. The members of this committee should call upon or write to each, explaining the purpose of Baby Week and asking each to preach on that subject. In order to aid in the preparation of such sermons, a copy of an outline of information on the subject of Baby Week should be furnished.

In the Appendix, page 56, will be found a copy of the letter sent by the mayor to the clergy of New York City, and on page 57 considerable material on the subject of infant welfare and Baby Week which may be incorporated in such an outline.

A letter from the mayor of the city indorsing the baby-week movement may be read from the pulpit; in the Appendix, page 56, is a copy of such a letter from the mayor of Indianapolis, used in this way during the Indianapolis Baby Week.

If the governor or State health department has issued a proclamation or a letter indorsing the setting aside of a certain week for Baby Week, this may also be read from the pulpit on this day.

Sunday schools may arrange special programs for their meetings on that day. The committee may send a request to the superintendent of each Sunday school that such a program be arranged.

Church societies of men may arrange that their meetings held during the week shall include a short discussion of the subject. The discussion should have as a leader some one with special knowledge of baby welfare. Suggestions for programs are given on page 29. Church societies of women meeting during the week may plan similar programs.
A mass meeting may well form a very useful feature of Baby Week. It may be held at the beginning or end of the campaign. The committee in charge of this meeting undoubtedly will be able to secure a public hall, theater, or school. In planning a place it is well to choose one barely large enough to accommodate the size of audience which may reasonably be expected to attend. A meeting which fills a small hall, even to overcrowding, is more inspiring than one in a large hall which is half empty.

A suitable presiding officer should be chosen. An interesting speaker from another city may be secured for this meeting; many State departments of health are able, on application, to send out speakers for meetings if the expenses of such a speaker are paid. Short talks by representative people of the community should be included. The talks at this meeting should be on subjects of general interest. Such subjects as "The purpose of Baby Week;" "What a city owes its babies;" "After Baby Week, what?" "This community's baby death rate;" "What other cities have done for their babies," might be included.

Talks on technical and medical subjects are not appropriate for this meeting. Lantern slides and motion pictures might form part of the program. Some entertainment feature, such as band or orchestra music, a children's chorus, or a short play, may be used.

Ample publicity and advertising should be given the meeting; in case the community draws from a surrounding rural population, special effort should be made to secure the presence of people from the country. Speakers from the men's and women's rural organizations should be asked to present the subject of the community's responsibility for its babies from the point of view of those living in the country.

On this day, which may come either on the Saturday before Baby Week opens or on Monday, banners with the baby-week emblem are distributed to the homes of all the babies under 1 year of age that have been registered with the health department. These banners may be made up very cheaply of muslin with the emblem printed in appropriate colors. A good size for the banner is 18 inches long by 12 inches wide, with a stick long enough to be tacked to a window frame. In planning for the delivery of the flags it is a good thing to have the boys carry small hammers and tacks, so that they may put the pennants in place when the householders are willing. Printers and novelty makers can make these banners. The advantages of flag day are that with the banners flying from the windows the sections where
BABY-WEEK CAMPAIGNS.

there are the most babies are made particularly aware of the fact that it is Baby Week, and also that the flags are a direct recognition of the fact that these babies have been registered. With each pennant should be delivered a program of Baby Week and a leaflet on the care of the baby. Special announcements of the infant-welfare exhibit or baby health conference, if these are held, should also be distributed. (See p. 39.)

The preparations for flag day require considerable care and plenty of time. Committees of women, assisted by committees of boys, should make the distribution. Several days in advance a central committee on flag day should receive from the health department envelopes bearing the names and addresses of the registered babies. These will then be sorted by districts and the appropriate number of flags sent out to the various headquarters from which the different teams will start out to make the canvass. All those engaged in the distribution of flags must be able to make a clear and brief explanation of Baby Week and flag day. In making up the list the health department must check the birth registration with the death registration list, so that no flags will be sent to homes where babies have died. One of the elements in making flag day a success is a generous notice of it in the press, both the day before and on the morning of flag day. If there are papers printed in foreign languages, particular care should be taken to see that an explanation of flag day is printed in the issue of the week before.

SCHOOL DAY.

On one day during the week special exercises may be held in the schools throughout the city. These may come as a regular part of the school work or be held in the afternoon as a special entertainment to which parents are invited. Some of the following features may be included in the program for this day:

1. The reading of a letter to the school children from the mayor or other official telling them how they can help to save the babies.

2. A talk by the principal or teacher on what the children can do for their baby brothers and sisters.

3. The reading of one or several compositions on "How to keep baby well," which have been selected from among the compositions written by the children in a certain room or school. It is quite likely that the newspapers will publish one or more of the best of these compositions.

4. In schools where Little Mothers' Leagues (see p. 47) are organized the program may consist of compositions and demonstrations by members of these leagues and of talks by their teachers. If no Little Mothers' Leagues are at present organized, the school day may afford an opportunity for their organization in many schools.
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5. The performance of a play. (See p. 30.)
If it is desirable to have daily programs at the headquarters, some of the best programs presented in the schools may be repeated at the central headquarters later in the week.

FATHERS' DAY.
One day in the week may be devoted especially to the fathers of babies. On this day such statements as the "Message to fathers," printed in the Appendix (p. 60), or, still better, a message prepared locally should be widely distributed in whatever ways are practicable. Newspaper articles will be especially valuable.

The responsibility of the city's fathers and of all individual fathers for the welfare of the city's babies should be pointed out and emphasized by reference to the facts regarding the particular community which have been brought out in the studies described on page 23.

OUTING DAY.
If the weather permits, an outing day for mothers and babies forms an attractive feature. This may take the form of an automobile ride, a morning or an afternoon spent in the park, or an excursion on the water. If it is possible, an alternative in-door program for bad weather should be planned.

VISITING DAY.
On this day a tour of inspection of all of the places where any work is done for babies may take place. Such a day is very important in communities where infant-welfare work has been begun either by the health department or by private organizations and where it is desirable that the public shall know of the work being done and the need for further work. This will include infant-welfare stations, day nurseries, baby hospitals, and any other place where something is done for babies. City officials and representatives of men's organizations and of societies for civic and mutual benefit should be invited to take part in the tour.

BIRTH-REGISTRATION DAY.
In communities where there is a special need for better birth registration it may be well worth while to concentrate the attention for one day on the importance of registering babies' births. On this day all the physicians might be sent a letter asking their aid in securing prompt and complete birth registration for their city.

The newspapers should be furnished with incidents showing the practical value of birth registration. The general suggestion may be made that parents will do well to ascertain whether the births of their children have been duly recorded.
BABY-WEEK CAMPAIGNS.

SPECIAL FEATURES.

INFORMAL MEETINGS.

Aside from one mass meeting or rally to be held during Baby Week, it is not likely to be desirable to hold a series of formal meetings in connection with such an extensive program as has been outlined. Two reasons for this are:

First. That such meetings require considerable time and effort to plan, and most of the workers will be too busy with other features to give the meetings the attention necessary to make them successful.

Second. That probably it will be difficult to provide enough separate publicity for the meetings to advertise them sufficiently.

Informal meetings are, however, very desirable in connection with the exhibit or the health conference.

If there is no central headquarters and the city is large enough to justify the use of neighborhood committees, it may be worth while to plan for meetings in public halls or schools in all parts of the city. These meetings may be held either in the afternoon for mothers especially, or they may be evening meetings for parents. The programs may include brief talks, music, stereopticon slides, and possibly motion pictures. In such meetings also the short plays may be used.

A special effort may be made to have each organization which meets during the week devote part or all of the meeting to discussion or talks on subjects related to baby welfare. In communities where it has been decided that it is impossible to send out messages to individual fathers a copy of such a message may be sent to each man's organization in the community with the request that the message be read at a meeting of the organization if such occurs during the week. (See p. 60.) A similar message to women's organizations may be prepared and sent to each women's organization with the request that an informal discussion of the problems and lessons of Baby Week be included with the reading of the message. The following are a few suggested topics for discussion:

"How can this community better the conditions for the babies?"
"What can this society do to improve conditions for the babies?"
"Birth registration."
"Infant-welfare work: Infant-welfare stations, public-health or visiting nurses, and what they have done for babies in other communities."
"Rural public-health nurses."

The Children's Bureau will furnish lists of references on these subjects.
BABY-WEEK CAMPAIGNS.

LANTERN SLIDES.

Slides illustrating the care of babies, and also different types of welfare work, may be prepared locally or may be borrowed from various sources. Many State boards of health have sets of lantern slides on appropriate subjects which they send out with or without outlines for an accompanying lecture if the cost of transportation is paid and broken slides are replaced. (See Child-Welfare Exhibits,1 p. 49.) On page 61 of this pamphlet will be found a list of other sources from which slides may be obtained.

MOTION PICTURES.

While motion pictures are among the most popular forms of education and many communities desire to use them, unfortunately there do not seem at present to be enough films available on baby welfare, either from commercial exchanges or private organizations, to make up a list that would be useful. There are comparatively few films on subjects pertaining to baby welfare, and some of these are not easily obtainable. The Children's Bureau, on request, will give as much information as possible in relation to available motion pictures and films.

PLAYS.

Some entertainment feature, such as a short play, in which children can take part will add greatly to the interest of Baby Week. Short plays, written by the people in the community and acted by school children, have proved very successful. The play should have as its theme the health and happiness of babies. The play should probably not last more than half an hour and should be used as a feature of some other program either at the campaign center, at the exhibit, at neighborhood centers, or at the schools on school day.

In the Appendix (p. 61) are given details with regard to two plays written for the Pittsburgh Baby Week; also the names of several other short plays on other subjects which may give suggestions to those wishing to write original plays for Baby Week.

In producing the plays it is a good plan to have a number of different casts trained to act the same play. The larger number of children taking part will interest more of the parents in seeing the production; moreover, the larger number of casts will make it possible to give many more performances, as it is impracticable to have the same group of children take part every day during Baby Week.

INFANT-WELFARE EXHIBIT.

In the general discussion of the subject of the program for Baby Week the statement has been made that in a baby-week campaign it probably is not best to make an infant-welfare exhibit a very elaborate feature, as the time and resources of workers are usually so much engaged with the other features of Baby Week that a large infant-welfare exhibit can not be made a success. A small exhibit, either borrowed or prepared locally, may, however, very well form a central feature of even a comparatively simple baby-week campaign. It may be part of the program at a general headquarters or meeting place; it may be combined with lectures and demonstrations on the care of the baby; or it may be carried on in conjunction with a baby health conference. A committee appointed by the executive committee should be in charge of the exhibit.

Object of exhibit.—An infant-welfare exhibit may have either of two objects—to give mothers information regarding the proper care of babies or to show the importance and need of infant-welfare work in the particular community. Sometimes both objects may be combined. It is well to decide as a first step what the object of the exhibit planned is to be. In general, when the object is primarily to teach the principles of infant care, the panels may well be borrowed from one of the traveling exhibits; when, however, the object is to show the local conditions with respect to babies, the need for infant-welfare work, and the ways such work should be carried on, the material must largely be prepared locally.

Different features which may be included in an infant-welfare exhibit are (1) wall panels, (2) exhibit of objects, and (3) demonstrations.

An exhibit on teaching infant and prenatal care may include:
1. Panels on prenatal and infant care and the care of the eyes.
2. An exhibit of articles to be used in the proper care of the baby.
3. An exhibit of articles which are harmful to the baby.
4. Demonstrations by nurses or teachers of domestic science on the preparation of milk for the baby and of food for the young child; and on dressing and bathing the baby, etc.
5. Lectures, possibly illustrated by lantern slides, on the care of the baby.

An exhibit having the object of showing the need for infant-welfare work may contain:
1. Panels dealing with the facts relating to the infant mortality rate of the community, the need for infant-welfare or milk stations, of visiting nurses to do infant-welfare and prenatal work, of better birth registration, of a better milk supply, of better sanitary conditions, etc.
2. An exhibit of the equipment necessary for an infant-welfare or milk station.

3. Demonstration of the work of an infant-welfare station.

4. Lectures (illustrated by lantern slides) on infant-welfare work. An infant-welfare exhibit may combine the two forms of exhibit; in this case the two sections should be distinct.

Wall panels.—The many excellent traveling infant-welfare exhibits deal chiefly with the care of babies. Many State boards of health and extension departments of State universities and agricultural colleges have exhibit material which they will send out anywhere in the State to an organization paying transportation. On pages 49 to 51 of Child-Welfare Exhibits is a list of these departments and a general outline of the material available. These departments are adding rapidly to their supply of exhibit material; several also intend preparing special material for infant-welfare exhibits for Baby Week. Therefore it would be wise in all cases to make application to these State departments for exhibit material.

Several national organizations and Federal departments have traveling exhibits on the subject of infant care and welfare. For a list of these organizations and departments, and for details regarding their exhibit material, see Appendix, page 61.

If no exhibit material on the care of infants in the form of wall panels is found to be available, the exhibit committee may wish to prepare their own panels. The subject matter for these panels may be obtained from one of the pamphlets published by State boards of health on the care of the baby. Reproductions of a few typical panels on the care of babies are given in the Appendix of Child-Welfare Exhibits. In the Appendix of this bulletin, page 62, are given lists of the subjects of the panels in several infant-welfare exhibits. In preparing panels it is well to remember that it is best not to attempt to include too much on one panel and that each panel should be on one subject or idea and should not be a miscellaneous collection of statements and pictures.

Preparation of panels.—A small temporary exhibit may be made at rather small expense, if cheap materials are used. In a temporary exhibit there is no need of providing frames for the panels. Unframed panels, however, should have a border painted in a color contrasting with that of the panel. A good size for a large panel is 3 by 5 feet, the panel being hung 20 to 30 inches off the floor.

The material of which panels may be made will vary somewhat with the size. In addition, panels which are to have photographs pasted upon them need a stiffer ground than when these are not used. For larger panels the materials most generally available are beaver board, Upson board, and compo board. For smaller panels corrugated
gated strawboard, heavy cardboard, and binder's board may be used. The last two are usually easily obtainable in all communities.

**Lettering.**—Plain upright letters are best, varying in height from three-fourths of an inch to 2 to 3 inches for special display. The sloping italics favored by sign writers are very difficult to read. The type of lettering known as gothic is very clear and easily read. Lettering may be done on some gray backgrounds, in both white and black letters. A color variation for important words or to lend variety is desirable when used in moderation. It is well to remember that the cheap red which produces a glare is ineffective.

The best substitute method is the use of pasted paper letters. These paper letters, having gummed backs, may be ordered at stationery shops.

In using these the signs should be designed by a person with a sense of artistic balance and then pasted with great care.

**Illustrations.**—Panels are much more attractive and interesting if they are illustrated by photographs, drawings, colored pictures, or maps. It is well, however, to avoid the use of diagrams and charts that require close study. Photographs should be enlarged to at least 10 by 12 inches to be effective.

**Exhibit of objects.**—1. A very interesting part of an infant-welfare exhibit is a collection of model articles for use in the care of the baby. These may be borrowed from the stores, but should be carefully chosen by the committee. The exhibit may show outfits at minimum cost and homemade substitutes, as well as good ideas for standard use.

The exhibit may include proper clothing, sleeping and bathing arrangements, articles used in the modification of milk and preparation of food for older children. (See Appendix, p. 64, for a list of articles forming part of the exhibit on infant care at the exhibit of the Children's Bureau, Panama-Pacific Exposition, and for other articles which may be used.)

2. Objects which are injurious to the baby may be shown, such as pacifiers, long-tubed nursing bottles, etc.

3. A model infant-welfare station may form part of the exhibit.

4. An exhibit of proper foods for babies over 1 year old.

5. Homes of the Do Care and Don't Care families. (See Appendix, p. 64.)

**Lectures.**—Short lectures on the care of the baby and on infant-welfare work may be given by physicians or nurses. These may be illustrated by lantern slides. (See p. 30.)

**Demonstrations,** accompanied by short talks by physicians, nurses, or teachers of domestic science, form an extremely interesting accom-
Preparation of modified milk.
Preparation of food for older babies, 1 to 6 years.
Bathing the baby.
Dressing the baby, showing proper costume in summer and winter.
Protection from flies, etc.

Demonstrations of infant-welfare work may show the work of an infant-welfare or milk station and of public-health nurses.

Explainers.—Explainers, whose task is to draw in visitors to the exhibit as well as to explain its details, are extremely important for any exhibit. (See Child-Welfare Exhibits, p. 42.) They are especially important for a small infant-welfare exhibit. Arrangements should be made to have at least one explainer continually at each section of the exhibit. All explainers should receive instruction in the subject matter of the exhibit from a representative of the committee which has arranged it; meetings of the explainers once or twice during the week, at which they may ask advice with regard to questions which have puzzled them, may be of advantage.

Nurses as explainers are especially desirable, particularly if the exhibit is one largely on the care of babies. Besides explaining the panels they may give demonstrations in the preparation of milk, in bathing the baby, etc. It is well to have one or more nurses present as explainers at each session of the exhibit. Their help may be obtained through the local infant-welfare society, the local visiting-nurse association, or the local hospitals. At the Pittsburgh Baby Week the cooperation of the hospitals did much to make the exhibit a success. The chairman of the explainers' committee invited the superintendents of the leading hospitals to serve on her committee. Each of the superintendents took the responsibility of providing nurses as explainers for one or more sessions. The nurses came in uniform, and 10 to 12 of them were present continuously. The nurses themselves felt that the experience was a valuable one in many ways.

Publicity.—It is extremely important that the exhibit should be given proper publicity. The publicity committee of the Baby Week will have this in charge (see p. 20). but the exhibit committee will have to see that correct information with regard to the exhibit is furnished to the committee on publicity.

Extremely important is the effort to secure the attendance of the particular people to interest whom the exhibit has been designed; for instance, if an exhibit on the care of infants has been prepared, an especial effort must be made to bring to the exhibit the mothers of the community; if one on the need for infant-welfare work has been arranged, those organizations and individuals who will be use-
ful and influential in helping such a movement should, if possible, be brought to the exhibit. Different methods must be devised in order to reach different types of people. In Pittsburgh many mothers were reached through their children in school. Personally conducted parties were organized in different neighborhoods and taken to the exhibit.

Additional information which will be useful to those planning an exhibit may be obtained from Child-Welfare Exhibits, Children's Bureau publication No. 14; A B C's of Exhibit Making, Department of Surveys and Exhibits, Russell Sage Foundation (in preparation); Report of the Philadelphia Baby-saving Show, Child Federation, Weightman Building, Philadelphia, Pa.

BABY HEALTH CONFERENCES.

"Living features"—that is, features in which grown people, children, or babies take part—are the most interesting divisions of any exhibit or celebration. In the baby-week campaign much of the work is necessarily of this character. The committees are centers of activity and arrange the many features which have been suggested in this bulletin—celebrations by school children, parades, outings, etc.

The whole campaign, however, revolves about the baby himself; he is its most interesting feature. Various types of what may be called baby health conferences have been devised; all have one common aim—to focus attention on the individual baby. There is a growing tendency to minimize the competitive element in these events and to make the conference of assistance to the mothers of the baby examined by pointing out the needs of each baby and the ways by which his physical condition may be bettered.

The conference, moreover, is a valuable demonstration to all the people of a community of the value of a periodic physical examination for all babies as well as for older children and of guidance to mothers in the care of their babies. The conference may therefore be a potent means of showing to a community how such examinations may be carried on and the benefits of such work in "keeping the well baby well." The organization of infant-welfare or milk stations or other forms of permanent stations often follows the holding of such conferences.

A conference is best combined with a small infant-welfare exhibit. Held in conjunction with an exhibit on the care of babies, it shows the practical application of the advice given on the panels, while if the exhibit deals with the need of the community for infant-welfare or milk stations, the conference illustrates the methods and benefits of such work.

All the different forms of conferences to be described have in common the following features: Thorough physical examination of the
babies by competent physicians according to some definitely outlined plan, a record of the examination being given to the parents; personal interviews between physicians and parents, in which the needs of the baby are pointed out and the general hygiene best suited to the baby under consideration is dwelt upon. No treatment or prescriptions are given; where there is need for either, reference is made to the family physician or dentist, to specialists, or, where the parents can not afford private care, to clinics and hospitals. The information with regard to the proper care of the baby given to the mother is much strengthened by reference to the exhibit material of the infant-welfare exhibit, by demonstrations and lectures (with lantern slides) on the subject, and by the giving out of bulletins and leaflets. The help of nurses is an important feature. Conditions for the conference which are safe and comfortable for the baby must be provided.

The following suggestions for the organization, equipment, and arrangement of a baby health conference of any type held during Baby Week are adapted from methods used in many successful conferences. The pamphlet of the American Medical Association on Baby Health Conferences has been of great assistance in drawing up this outline. Different communities may develop modifications of detail in accordance with local conditions. The Children's Bureau will be glad to receive reports of any important modifications which prove successful.

Organization of conference.—The conference should be in charge of a special committee—the baby health conference committee.

The duties of this committee will be to secure a suitable place for holding the conference, provide equipment and record sheets, make appointments, cooperate with the medical staff, secure the help of nurses, procure educational literature for distribution, and superintend the carrying on of the conference. These duties may be apportioned among members of the committee or may be delegated to subcommittees, such as subcommittees on arrangements and equipment, on appointments or registration, on educational literature, etc. Certain work, such as publicity, printing, etc., naturally will be delegated, after consultation, by the committee to those committees of the baby-week campaign in charge of publicity, printing, etc.

In some communities the baby health conference committee may desire the help of some one who has had experience in organizing these events. Application may be made to the State board of health and to the extension departments of the State university and of the agricultural college. In many States one or more of these departments are able to recommend people for this service.

Medical staff.—The cooperation and interest of the local medical society, city or county, should be sought. The president of this so-

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1 Pamphlet No. 5, for use in baby health conferences, American Medical Association.
Baby-week Campaigns.

Society may be consulted in the selection of the medical staff of the conference, consisting of the physicians to carry on the examinations and substitutes to take their places in case of need. Physicians specializing or particularly interested in children's diseases who have had experience in giving advice to mothers with regard to the hygiene of infancy and young childhood should be selected. Specialists to make the mental examinations and the examinations of the teeth and of the nose and throat will be necessary in certain forms of conferences. Where these are needed they should be selected after conference with the presidents of the local dental society and medical society.

Nurses.—The help of nurses in carrying on the conference is very desirable. Nurses will be needed to assist the physicians and to weigh and measure the babies; a nurse should be in constant attendance in the dressing room.

Place.—Any large central meeting place having sufficient accommodation may be used; the use of rooms for this purpose should be obtained free. Rooms in a public school are most satisfactory, but except during the vacation period may not be available. Clubrooms or rooms in the courthouse are often available. An empty house or store may be used. An infant-welfare station may be used in cities where these exist. The following rooms are desirable:

Examination rooms.—A large room with space for examinations of two children at one time may be satisfactory. Where many children are examined, or examinations by specialists are made, several rooms for examination are necessary.

Spectators will be extremely interested in watching the conference. It is also often desirable that they should be admitted, one of the objects to be attained by the conference being the demonstration to the public of the methods and benefits of a periodic physical examination of babies, such as that carried out. On the other hand, a private conference is more valuable for the mother and safer for the baby. Therefore, for the safety of the babies and comfort of mothers and examiners, the spectators, if admitted, must be separated from the space used for examination. When no adequate provision can be made for this, it is probably best to exclude spectators. The arrangement which was used in the children's health conferences held in Knoxville and at the Panama-Pacific Exposition was an examination booth, with walls composed largely of glass. This arrangement, however, is too expensive to be used in most conferences. A door fitted with a panel of glass may be placed in the doorway of the rooms used for examinations. Other methods of separating spectators from the examining space may be devised.

If any mother objects to a public examination of her baby a screen should be placed around the table.
A lavatory or substitute is necessary in the examining rooms, as the physicians will wish to wash their hands before examining each baby.

A waiting room for mothers where the babies are undressed is desirable. If possible, this should be equipped with a toilet room.

Adequate arrangements must be made for proper ventilation and lighting, and for keeping all rooms warm enough to allow for the fact that the babies are kept undressed for some time.

**Equipment.**—Most of the equipment can be borrowed or made by the members of the committee. The following are required for the examining rooms:

1. Two or more tables for the examination of babies, the number depending upon the number of physicians carrying on the examinations. A kitchen table covered with a folded blanket, then with rubber sheeting, and over this a clean sheet is suitable. A clean towel or napkin is spread over the sheet and changed after each examination is made.

2. Table for scales.

3. Accurate scales which have been tested; preferably a scale with a platform and a beam balance. A suitable pan or basket, which can stand on the platform, should be provided for holding the baby. A clean towel or napkin should be placed in the scales before each baby is weighed.

4. Four or five linen tape measures; a measuring board, which is very convenient for measuring babies, is described in Pamphlet No. 5 of the American Medical Association.

5. Calipers or pelvimeter.

6. Supply of sheets, baby blankets, towels, etc.

7. Paper towels, soap, bichloride tablets, provision for boiling instruments, etc.

8. Electric flash light.

9. Box of wooden tongue depressors.

10. Stethoscopes.

11. Toys to amuse frightened children. On account of the possible spread of contagion from one child to another through toys, it is advisable, if possible, to provide a new, inexpensive, unpainted toy for each child examined. These may be donated; otherwise they would add somewhat to the expense of the conference. If the same toys are used they should be washed after each use.

12. Flesh pencil for measurements.

13. One or more screens.

14. Objects needed for mental tests.

For the waiting or dressing room, plenty of chairs and tables and a supply of paper hat bags.
BABY-WEEK CAMPAIGNS.

Record sheets.—These will vary according to the different types of conference. (See below.)

Time.—The conference should be held during the morning or early afternoon, never in the evening.

Publicity.—The committee should confer with those committees of the baby-week campaign in charge of newspaper and advertising publicity, so that as great publicity as possible may be given the conference.

Accounts of the purpose and organization of the conference should be included in all the newspaper stories published for several weeks before the Baby Week begins. Information about the conference should also be widely distributed in all the other ways which are being used—by posters, signs, leaflets, etc. The conference may be announced on baby Sunday and at meetings of various organizations.

Means should be devised of making known the conference to the mothers of young babies in the community some weeks before Baby Week, in order to insure the making of appointments. The following are a few methods which may be adopted:

The names of all babies whose births have been registered during the past two or three years may be obtained from the local registrar, and leaflets or cards announcing the conference may be sent to the mothers of these babies.

The mothers may be reached through the school children. This plan was carried out in Pittsburgh. Announcements may be made in the schools or leaflets may be distributed among school children, with the request that they deliver them to parents or neighbors.

If flag day is included in the baby-week program, leaflets announcing the conference may be distributed with the flags.

Registration and appointments.—The examination of children should be by appointment only. The making of appointments should be in charge of one member of the committee or of a sub-committee. The name, address, and telephone number of the person in charge of this matter should be made known in all the advance publicity material. Appointments are made for a certain hour and a card is given or sent to the mother with the name of the baby and a memorandum of the day and hour of the appointment. It is well to include on this card a request that the mother should bring a baby blanket with her, and that she shall not bring the baby to the conference if he is ill in any way on the day appointed, or if there is contagious disease in the home. If young babies are admitted to the conference a warning may also be included not to bring out such a baby in very bad weather.

In planning the appointments ample time should be allowed for each examination. Twenty minutes is the minimum to be allowed, 30 minutes is preferable. The number of appointments to be made
will vary with the number of physicians examining the babies and the hours in which they work.

Age limits of the conference.—These will be decided by the committee and will depend upon the conditions under which the conference is held. In a small conference, where the babies can be protected in every way from exposure to cold or to infectious disease, young babies of any age may be admitted. It is especially desirable to reach the mothers of young babies. Where the above conditions are not fulfilled, it is better to make the lower age limit 6 months or even 1 year. The upper limit may be 3, 4, or 5 years, according to the conditions.

Procedure.—The details of procedure will vary according to the type of the conference. The following general suggestions may be given:

Several members of the committee should be in constant attendance at the conference. They or a subcommittee on examiners and assistants should be responsible for the presence of the physicians to make the examinations, of the nurses, and other assistants.

The nurse in the dressing room receives the mothers bringing their babies for examination and should be careful to exclude any baby with a cold, rash, red or sore eyes, cough, or any other evidence of a communicable disease. The mother is given a numbered tag; the baby's clothes when removed are placed in a milliner's paper bag numbered with the same number.

VARIOUS TYPES OF CONFERENCES.

The above suggestions may be found useful in carrying on any baby health conference. The following deals with three different types of conference which have been developed.

Baby health conference without score card.—This type of conference has been held as part of a children's health conference at Knoxville, Atlanta, Jacksonville, Toledo, Peoria, and during the past year at the exhibit of the Children's Bureau at the Panama-Pacific Exposition. (See Child-Welfare Exhibits, p. 14.)

In these conferences a full physical examination, including one of the teeth, nose, and throat, is made of each baby; a printed blank is filled out, giving a record of the results of the examination and notes with regard to the individual needs of each baby. This record sheet is given to the mothers. If treatment or medicine is needed the mother is referred, as above stated, to her private physician, to a specialist, or to other sources of help, as the case requires. No score card is used.

The record sheet used in these conferences gives space for notes on the age, height, weight, previous history, and any physical defects found in a thorough physical examination. It has a page on which
the examining physician gives advice to the mother on the general hygiene necessary to better the physical condition of the baby or to keep the baby well. In a conference of this type no attempt is made to compare the development or condition of different babies; the object of the conference is rather to center the attention of the mother on the qualities and needs of her own child; to teach in a practical way the facts with regard to the care of babies; and to point out the sources of assistance in making or keeping the baby well. These purposes should be made plain in the publicity material given out.

The organization or management of such a conference may in general be that already given.

The number of babies to be examined and the number of physicians to be asked to serve as examiners will be decided by the committee. In general a small conference, with not more than two physicians making examinations, will answer best the purposes of the conference. In this type of conference one physician makes the whole examination, referring the mother for treatment or further examination of the baby to the family physician or specialist.

The record sheets should be provided by the committee on printing of the baby-week campaign. Any simple form which is decided upon by the medical staff and which gives space for notes on the physical condition of the child and advice on hygiene may be used. Appendix 2, Child-Welfare Exhibits, page 52, shows a copy of the record sheet used in the children’s health conference carried on by the Children’s Bureau at the Panama-Pacific Exposition. The cover of the record sheet may have a statement of the purpose of the conference. An ornamental seal or picture will add to the attractiveness of the record as a permanent possession of the mother.

Duplicate record sheets for the physician should be provided and filled out for each baby. These are to be retained by the physician as a record of the examination. The information on these record sheets should afterwards be entered upon large summary record sheets, each column of which corresponds to one heading on the mother’s record sheet.

The obtaining of these records will be an interesting part of the work of the conference; the conclusions to be drawn after the records have been tabulated will furnish an interesting paper for local medical meetings.

Tables giving the average height, weight, and measurements of babies of various ages will be desirable for the use of the examining physicians, in order to form an estimate of the development of each baby examined. Such a table has been published by the American Medical Association. A number of copies, at least five or six, should be obtained for the use of the examining physicians.
Baby health conference with score card.—In such a conference the physical condition of the baby examined is recorded on a score card. For each defect found a certain amount is deducted from the perfect score of 100. When the examination is finished and the score computed, the latter expresses the general physical condition and development of the child. Many successful conferences have been held throughout the country during the past few years according to this method. The American Medical Association has prepared a standard score card which may be obtained for use at baby health conferences. This organization has also prepared a pamphlet giving instructions for organizations wishing to conduct a baby health conference according to this score card, suggestions on the use of the score card to physicians making the examinations, and suggestions upon the computation of the score. (See Appendix, p. 56.) Sample copies and a price list of score card, pamphlet, and anthropometric table may be obtained on application to the secretary, council on health and public instruction, American Medical Association, 535 North Dearborn Street, Chicago, Ill.

Baby-improvement contests.—Another form of baby health conference is that in which the babies are first examined and scored as in the above conference, and after an interval (1 to 12 months) are again examined and scored and a diploma, medal, or prize is given to the babies showing the greatest improvement in score. The following resolutions were adopted by the council on health and public instruction of the American Medical Association February 24, 1914:

That if the awarding of any medals or prizes seems judicious in the baby health conferences, they shall be given to the babies showing the greatest improvement in health between the various examinations rather than to the naturally healthy child who scores high at the first examination.

A baby-improvement contest was held by the Child Federation of Philadelphia in 1914. In this contest the babies examined and scored at the first examinations were kept under observation for four weeks and their homes were visited at frequent intervals by trained nurses. At the end of this time the baby was again examined and scored. The final score, upon which prizes were awarded, was based 50 per cent on the improvement shown in the physical condition of the baby between the two examinations and 50 per cent on the improvement shown in the cleanliness and general sanitation of the home, the care of the baby in the home, and the degree of cooperation shown by the mother. All babies were examined by appointment. At the close of the first examination the physician prepared a slip containing the special form of instruction he desired the mother to have, and this was given to the visiting nurse having the case in charge. Many organizations have held a baby health conference according to a score card and a year later have held an improvement contest, the
BABY-WEEK CAMPAIGNS.

same babies being entered for a second examination. In Pittsburgh the first examination in a baby-improvement contest was a feature of Baby Week.

FOLLOW-UP WORK.

Just as important as the campaign of Baby Week is the “follow-up” campaign which should succeed it. One of the two main objects of a Baby Week as sketched in the preceding section is to bring before the public a realization of the facts relating to the baby deaths in the community and the need of greater efforts on the part of the community to protect its babies. If this has been successful, at the end of the Baby Week the time will be ripe for the urging of specific programs for the welfare of babies.

In the section on “Organizing Baby Week” the statement was made that, before dissolving, the executive committee of the baby-week campaign should appoint a committee to make plans for follow-up work. The local department of health should be represented on this committee.

The work will vary greatly according to the conditions of the community and according to the amount of work for the welfare of babies already being carried on. In communities where the city health departments are already carrying on good medical and nursing work for mothers and babies, where the milk supply is properly safeguarded, where birth registration is prompt and complete, the follow-up work will naturally develop general interest in giving these public activities continued intelligent support and will direct attention to the need of studying the city’s responsibility for bettering sanitation, housing, and industrial conditions. In cities where private organizations are carrying on infant-welfare work, but where little money is allowed the city departments for this purpose, a follow-up publicity campaign may help in obtaining such popular support that these departments can take up this work. The follow-up work here will also help private organizations. The stimulation of better cooperation between all agencies interested in infant welfare should be one of the important results of Baby Week.

Many communities have as yet no work, public or private, for the welfare of babies; here the follow-up campaign will be directed toward beginning some work of this kind according to the local needs.

INFANT-WELFARE STATIONS.

These stations have proved their great value for infant welfare. The Children’s Bureau has information regarding 534 stations maintained, at least during the summer months, in 1915, in 141 cities in the United States having a population of 10,000 and over in 1910. In 33 of these cities the work is carried on by the health department,
in 21 by the department in cooperation with private organizations, and in the remainder by private organizations. There is an increasing tendency for health departments to take over the work.

To infant-welfare stations the mothers bring their babies at least once a week. A physician sees the baby, advises the mother about the feeding, and urges her to nurse the baby if possible. Through such advice many mothers are able to nurse their babies who otherwise would wean them. If nursing is impossible, the doctor advises the mother how the bottle feeding shall be prepared. The doctor and the nurse tell her of the methods by which she can keep her baby well throughout the hot summer weather. The nurse then visits her in her home and shows her how to carry out the doctor's instructions.

Very often pure milk is sold at these stations. Experience has proved, however, that this is not necessary for the success of the work.

Prenatal care, or the care and instruction of women before confinement, in many cases is carried on through the stations. This work has lately increased rapidly. We have records at present of prenatal work being carried on in 183 different localities.

The Public Health Commission of New York State in 1913 recommended that "each city with a population in excess of 10,000 and having an industrial population should have one infant-welfare station, and larger cities with an industrial population should have one such station for approximately each 20,000 inhabitants."

The work of a committee or organization planning to begin infant-welfare work, after the task of gathering funds to carry on the work has been accomplished, is thus outlined by the director of the division of child hygiene, New York State Department of Health:

A committee on welfare stations should select the location of the station after careful study of local conditions. It should appoint a medical director and secure the services of an experienced infant-welfare nurse. The responsibility for the equipment and maintenance of this station lies with this committee, and the station should be under its careful personal oversight while in operation.

**STAFF.**

A medical director is appointed to have direct charge of the work. The staff should consist of at least one nurse for each station, and if necessary several volunteer physicians, who have charge of the weekly clinics.

**LOCATION.**

The station should be opened near the center of the district which it is to serve. A study of the location of infant deaths in a city will show where a station should be placed. Rent may be saved if the cooperation of a settlement.

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house can be secured and the station installed there, as was done in Albany. In Syracuse, Rochester, Little Falls, and several other cities rooms in the public schools have been utilized during the summer vacation for this purpose. Where such plans are not practicable for housing the station the renting of a store is necessary, as has been the case in several cities, notably Yonkers and Schenectady.

**SIZE OF STATION.**

Two rooms at least are necessary for the station. One should be a fairly large milk-dispensing room, suitable for holding classes for mothers. Camp chairs are excellent for use here, as, when the class is over, they may be folded up and put aside, allowing free use of the floor space. A smaller room at the rear of the dispensing room will serve for a consultation and weighing room. In this the doctor in charge and the nurse examine and weigh the babies at the weekly clinic. This room should be supplied with running water and with arrangements for heating water, and a toilet, etc. The consultation room may also be utilized for demonstrating to mothers methods for the modification of milk.

**EQUIPMENT**

For the dispensing room, the principal equipment required is an ice box (one in which the milk bottles can be placed in direct contact with the ice is preferable to one where the ice is kept in a separate compartment), a table for the nurse, and sufficient chairs for nurse and mothers. If classes are held, a number of folding camp chairs will be necessary. The consultation room contains the doctor's desk or table, a table for weighing scales, a cabinet for supplies and for the utensils used in bathing the baby. Suitable record blanks for the registration of the babies and mothers are needed. These should show the gain or loss in weight, the condition of the baby, the milk prescribed, the dates of attendance, etc.

**DISPENSING OF MILK.**

Milk is bought by the station management and sold to the mothers. In stations where certified milk is used the market price is usually prohibitive, so that it must be sold at less than cost. Milk not certified but of good grade is dispensed in many stations, and in cities where there is an efficient system of milk inspection this milk attains a high standard. Where there are many stations the method employed by the New York City Health Department for dispensing the milk may be employed. There a milk of approved quality is sold for the dealer in each station at a fixed price by matrons who are responsible to him for the daily receipts.

Proper instructions should be given for the scalding or pasteurization of the milk, since no milk, unless certified or of the highest grade, should ever be given to infants raw.

**MANAGEMENT OF STATION.**

The nurse should be in attendance at the station from about 8 a. m. to 12 noon, for the purpose of instructing mothers and distributing milk. In large stations a matron should be employed to dispense the milk, so that the nurse may have more time to devote to her other duties. Mothers are given advice in these morning hours, and on clinic days the babies are weighed and new babies examined by the physician in charge. In the afternoon the nurse visits the mothers in their homes, teaching them to modify the milk if necessary. The use of dirty bottles or utensils renders the purest milk unfit for the baby.
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VISITING NURSES.

The visiting nurse is perhaps the most important factor in the work of the infant-welfare station. The first step in establishing a station should be to procure the services of an experienced nurse. Under the present public-health law of New York State the health officer has power to employ public-health nurses for the reduction of infant mortality:

"SEC. 32-c. Public-health nurses.—Each health officer or other official exercising similar duties, by whatever official designation he may be known, shall have power to employ such number of public-health nurses as in his judgment may be necessary within the limits of the appropriation made therefor by the city, town, or village. They shall work under the direction of the health officer and may be assigned by him to the reduction of infant mortality, the examination or visitation of school children or children excluded from school, the discovery or visitation of cases of tuberculosis, the visitation of the sick who may be unable otherwise to secure adequate care, the instruction of members of households in which there is a sick person, or to such other duties as may seem to him appropriate."

The nurse should be supplied with daily or weekly reports of births in the community by the local registrar or health officer. She should at once communicate with the attending physician and offer her services, or if no physician is in attendance should visit the home and instruct the mother in the care of the baby. She should also ascertain whether a nitrate of silver solution has been dropped in the infant’s eyes after birth to prevent any infection.

MEDICAL ADVICE.

The physician in charge of the station holds at least one clinic a week, when babies are weighed and new babies are examined. Sick babies are referred by him to the family physician or to a hospital or dispensary, and the mothers of sick babies are instructed in their proper care. When the baby is too ill to be brought to the station the doctor visits with the nurse and takes charge of the case if the family can not afford to pay for the services of a private physician. Mothers should always be referred first to their own physicians and encouraged to go to them. The services of the nurse should be free to all the physicians of the community when they have sick babies which need such care.

LITERATURE FOR DISTRIBUTION.

Leaflets on the care of milk and on the care of the baby are given to the mothers at many stations.

COST OF OPERATION.

The monthly cost of operating the welfare stations depends on many conditions. The principal expenses are:

1. Salary of nurses and matrons.
2. Rent of station.
3. Equipment.
4. Supplies (bottles, ice, printing, etc.).
5. Loss on sale of milk (if sold at less than cost).

In many cities the use of public schools during the summer solves the rent problem. In others, rooms in settlements and church houses may be secured free of charge. The equipment of a new station is often donated or paid for by special subscription.
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Some communities may not find it practicable at first to support stations of this type. Less expensive forms of stations are the two described in Child-Welfare Exhibits, page 18. Additional information regarding infant-welfare stations may be obtained in many States from the State departments of health. The publications of the American Association for Study and Prevention of Infant Mortality, 1211 Cathedral Street, Baltimore, Md., will be of assistance. A bulletin to be published by the United States Children's Bureau will give details with regard to this work.

PUBLIC-HEALTH OR VISITING NURSES.

In many communities neither form of infant-welfare station is practicable. Here the greatest good for the babies, for the older children, and for everyone in the community can be obtained from visiting or public-health nurses. Such nurses, besides the instruction and help of mothers with young babies, also may carry on prenatal work, work for the prevention of tuberculosis, work in the schools, the organization of Little Mothers' and Junior Health Leagues, and the care of the sick in their homes under the direction of their private physicians. In many communities the follow-up work of Baby Week may be the organization of an association to support such a nurse. Such associations may obtain much information with regard to organization and cost of maintenance from the Red Cross Town and Country Nursing Service, 1624 H Street, Washington, D. C. This society will recommend nurses who have special training in nursing work in small towns and rural communities and will affiliate with local organizations carrying on this work. The National Organization for Public Health Nursing, 25 West Forty-Fifth Street, New York City, will also cooperate in any way in helping local organizations to plan visiting-nurse services and in securing visiting nurses or public-health nurses. The Public Health Nurse Quarterly, published by the National Organization for Public Health Nursing, 612 St. Clair Avenue, Cleveland, Ohio, gives information with regard to the problems and activities of public-health nursing.

INSTRUCTION OF GIRLS IN THE CARE OF THE BABY.

In some cities such instruction is given as a regular part of the school work; in others it frequently takes the form of Little Mothers' Leagues, which are self-governing organizations of the girls of the higher grades in the schools. The girls are given lectures and demonstrations by physicians, nurses, or teachers. On joining they receive a certificate and often a badge or button. In at least 97 cities some instruction of this kind is reported. Further information with regard to this work may be obtained from the Children's Bureau, the divi-
sions of child hygiene of the New York and Kansas State Departments of Health, and from the Child Federation, Weightman Building, Philadelphia.

Several organizations of women living in the country have been formed with the object of studying the problems of the care and protection of babies and children. Much may be hoped from such clubs. In time many of these may be able to employ nurses. New Zealand has developed a successful type of rural health work for mothers and infants which affords suggestions for American communities.

SUGGESTIONS FOR BABY-WEEK CAMPAIGN NO. 2.

The fact that a community does not feel ready at a certain time to carry out a somewhat elaborate baby-week campaign such as that suggested in the foregoing pages need not prevent its taking part in a general or nation-wide Baby Week. Every community, including those in the country, may carry out at very little cost a simple Baby Week which will yet accomplish great good for its babies. This may be done by choosing from the various activities before described those which may be easily and cheaply carried out, and by devising others of this sort. Many communities may find it unwise perhaps to devote an entire week to the campaign; every community could give one or two days. Such a short campaign may include baby Sunday, with one day devoted to exercises in the public schools, informal meetings, and a rally. For a community wishing to give a week to the campaign but to carry it on very simply the following program might be outlined:

1. A campaign of newspaper publicity.
2. Collection of baby-welfare information.
4. A mass meeting.
5. Celebration in the schools.
6. Message to women’s societies.
7. Message to fathers.
8. Follow-up work of the campaign.

The activities may be divided, if it seems best, into separate days, such as school day, fathers’ day, women’s-society day; other days may be added or the above activities may be spread over the entire week.

Some communities may wish to include, in addition to the above program, one or more other features, such as an infant-welfare exhibit, a baby health conference, etc. Any single feature may be chosen from the more comprehensive baby-week campaigns previously outlined.

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1 See New Zealand Society for the Health of Women and Children, United States Children’s Bureau publication No. 7.
In carrying out a program such as the above the sections of this bulletin dealing with each feature (such as newspaper publicity, p. 20, "Baby Sunday," p. 25, etc.) may be consulted.

The following additional suggestions may be useful to those carrying on a baby-week campaign in small towns and rural districts:

**Organization.**

It has already been stated that to be successful the campaign should be a community celebration; that the help and cooperation of all organizations and interests in the community should be gained.

The suggestion for the organization of the more complete baby-week campaign given on pages 13 to 18 may be followed in a general way but in a greatly simplified form.

Any organization may initiate the movement for Baby Week. Such an organization, after reaching a decision to begin the movement, should appoint a committee to draw up a list of organizations which should be asked to cooperate and to call these to a meeting for organization. On page 13 are given suggestions as to the organizations which in a town of average size should be included. In rural communities the campaign may be one either of the county as a whole, or of a small town with the country district surrounding it, of a township, or of a single neighborhood or school. In other words, any group of people living in the country may organize to hold a Baby Week. In a county campaign the efforts should be made to obtain, in addition to the above-mentioned organizations in the county seat, also the help and interest of all of the county officials, the farmers' organizations, all teachers of the rural schools, and all organizations of rural women and the rural churches. The following committees will probably be necessary: A general or honorary committee composed of representatives from the various cooperating organizations, a small executive committee, and subcommittees on publicity, baby Sunday, school celebration, women's societies, baby-welfare information. In small rural districts the organization may, of course, be still much simpler than this. Here one committee may be in complete charge, or each subcommittee named above may be represented by only one or two people. As the expenses of the campaign, if any, will be small, the task of gathering funds for the campaign may be left to the executive committee. The subjects following are treated more in detail in the preceding pages and will be found under similar headings in the table of contents.

**Newspaper Publicity.**

Each issue of each newspaper may contain stories about Baby Week, articles on the care of the baby, especially in summer, on the milk supply, and on conditions affecting babies in that community.
BABY-WEEK CAMPAIGNS.

On application the Children's Bureau will furnish press bulletins on Baby Week and on the care of the baby in summer. The press service of many State boards of health will furnish material to local newspapers. Newspaper syndicates, syndicates sending out material in matrix form, and "ready-print" companies may have material with definite release dates on these subjects which they are ready to furnish to editors. Where only weekly or semiweekly papers are issued, the newspaper publicity may begin in advance of Baby Week, as may be determined after conference with the editor. Newspapers published at the county seat or at the largest near-by city are likely to be interested in giving the news regarding baby-week plans in all near-by country neighborhoods and rural schools.

BABY-WELFARE INFORMATION.

A special effort should be made that the figures given on page 23 should be compiled for the community.

BABY SUNDAY.

In addition to sermons on infant welfare in the churches, meetings in Sunday schools and of men's and women's church societies may be held.

MASS MEETINGS OR RALLIES.

If the campaign is a county affair, it may be wise to hold several meetings in different parts of the county.

SCHOOL CELEBRATION.

This may be the most important part of such a campaign. At this meeting parents, principals, teachers, nurses, or physicians may give short talks on the subject of the baby; children may read compositions; Little Mothers' Leagues may give demonstrations. An effort may be made in rural communities to have such celebrations in the schools combined with meetings of the mothers of the children who are invited to the meetings. The school celebration may be held in the early evening and mothers and fathers invited. The message to fathers and that to mothers, which have been prepared by the committee, may be read here. Such meetings may take the place of rallies.

MESSAGE TO WOMEN'S SOCIETIES.

All women's societies which hold meetings during the week should be asked to give time to the consideration of Baby Week. A message to women's societies, which has been prepared by the committee, dwelling on the important place that women's organizations have in all work for the protection of babies, should be sent with the request
that it should be read at the meeting. Informal discussions may be held.

MESSAGE TO FATHERS.

An especial effort may be made to bring home to the fathers of the community their place in protecting its babies. This may take the form of a request—similar to that sent to the women's societies—sent to all organizations of men meeting during the week, accompanied by a "Message to fathers." Informal discussions and talks may be planned.

FOLLOW-UP WORK.

The follow-up work of baby-week campaigns is treated on page 43. Special consideration is given on page 47 to such follow-up campaigns in the smaller communities.
REPORTS ON BABY-WEEK CAMPAIGNS.

The Children's Bureau is very anxious to obtain information with regard to the baby-week campaigns carried on throughout the country. It therefore requests each baby-week committee at the close of a campaign to send to the bureau as complete an account as possible of the campaign. In drawing up the account the following outline may be useful:

1. Name of city.
2. Organizations cooperating in the campaign.
3. Number of people on all the committees.
4. Outline of week's program.
5. Total expense.
7. Was a baby health conference held? Number of babies examined?
8. Was an infant-welfare exhibit held? Rented? Borrowed? Constructed?
9. Number of meetings and talks.
10. Were plays used? Titles? Number of times given? Plays written locally?
11. Special features.
12. Follow-up work planned.

In addition the bureau will be glad to receive copies of printed matter used during the campaign. On request the bureau will send a franked envelope, which may be used in forwarding the material.
APPENDIX.

CARD INCLOSED WITH PACKAGES OF CLOTHING IN NEW YORK BABY WEEK.

Better Babies.
Better Mothers.
Better City.

Light, loose clothing, and cool sponge baths make the baby comfortable on hot days.

Mayor's Baby Week Commission.

SLIPS ON CARE OF BABY'S BOTTLE.

[From New York City Better Baby Week.]

Care of Bottles.
After using bottles, wash with cold water, then clean with borax and hot water, using brush. (One teaspoonful of borax to one pint of water.)
Keep clean bottles upside down upon clean shelf.
Bottles before using again.

Care of Nipples.
After using rinse with cold water, then turn inside out and scrub well with brush and hot water.
Keep them in a cup of borax water between feedings.
Before using, always rinse them in boiling water.

BETTER BABIES.
BETTER MOTHERS.
BETTER CITY.

Mayor's Baby Week Commission.

NEWSPAPER ARTICLES ON BABY WEEK USED IN VARIOUS CITIES.

NEW YORK CITY BETTER BABY WEEK.

This is the last day of Baby Week, but it isn't the last day of the importance of the baby. Baby Week has done to New York's attitude toward babies what a large, active firecracker placed under the chair of a drowsing grandfather might be expected to do. Not that New York hasn't been alive right along to the rights of the baby, but the poignancy of the realization has heretofore been centered among certain organizations and individuals. Baby Week has given every individual in New York a baby consciousness that isn't likely to slumber again in a hurry.
BABY-WEEK CAMPAIGNS.

This last day is outing day for mothers and children, and pretty nearly every steamship company in the city volunteered craft which will steam over river, bay, and ocean all day long with burdens of babies.

This afternoon at 3 o'clock Mayor Mitchel is to receive the better babies committee at the city hall and will tender them the thanks of the city for the work accomplished during Baby Week.

No request for money has been made during the entire week of the baby campaign, but members of the committee say that a little money has come in, nevertheless, and, better than money, a spontaneous interest and desire to help things along has been shown by hundreds of people. The telephone in the better babies' office in the Municipal Building has been busied all week by men and women who wanted to know, "How can I help?"

Now that New York has awakened to a realization of its babies, there are many plans on foot for additional baby work. It is hoped that the city will appropriate needed money for activities which have heretofore been held up for lack of funds. Only 65 milk stations are maintained by the health board, and a survey of the birth and death rate, block by block, shows that at least 75 are needed. Workers among the mothers of children have found that many babies die because of ignorance of the mother in regard to proper care of herself, and nurses regard the prenatal work as one of the strongest and most necessary factors in a better baby campaign. There are at present, however, only 6 nurses doing the prenatal work; 40, according to health board workers, would be none too many.

We want every mother in New York City to feel that she can come to the health board for help just as freely as her children go to the New York City Better Baby Week.

Today is Little Mothers' day, and in every school in the city the mayor's proclamation to the school children will be read and the kindergarten and first-grade classes will take the pledge to the baby:

I pledge to be a baby's friend
And everybody tell;
Clean air, clean clothing, and clean food
He needs to keep him well.

It is a particularly proud day too for the Little Mothers for they are to have special exercises in a score or more of public schools. Of course you know who the little mothers are. At least you would if you had ever tried walking down the street with your baby dressed all wrong or if you had carelessly let him have a lollipop to suck, or perhaps a baby pacifier. I guarantee that you wouldn't go five steps before a little fury would stand in your path and with blazing eyes and imperious mein demand that you take off those tight wrappings or throw away that pacifier.

Special lectures are given each year near the close of the school to these Little Mothers by board of health physicians who tell them just how to dress the baby, how to bathe baby, how to feed him, and all the many other "hows" which mean a better baby.

PITTSBURGH BABY WEEK.

Pennants flying from many homes feature Baby Week—thousands of streamers distributed among homes where are little ones—Boy Scouts are assisting—milk companies send out booklets giving advice on feeding babies.

The second day of Baby Week, 13,005 attractive and appropriate pennants were distributed this morning throughout the city and are now flying from homes where there are little ones under 1 year of age.

To almost every street and alley in the city squads of Boy Scouts, Camp Fire Girls, members of boys' brigades, and club women went this morning with the pennants and messages of cheer and instruction.

The pennants are to be flown from the homes each day of Baby Week, which ends Saturday with the registration of babies for the improvement contest.

With each pennant went a leaflet giving simple instructions and hints on the proper care of babies, particularly during the summer months, and this message:

"The city of Pittsburgh gives you this flag to hang from your window for a week in honor of your baby. The flags mean that all Pittsburgh is thinking and planning for the welfare of the thousands of babies."

Provided by the Maternal and Child Health Library, Georgetown University
BABY-WEEK CAMPAIGNS.

The pennants, or flags, are attractive little affairs, white, with blue emblems, showing a healthy baby and the slogan: "Save the Kiddies!"

To make more complete the educational campaign, a booklet containing helps on the conservation of infant lives was distributed this morning with each bottle of milk sent out by the various milk companies of the city.

Plans have been about completed for to-morrow, which will be known as "brothers' and sisters' day." The chief feature will be a parade of hundreds of "Little Mothers" who, as volunteers, have done great work in saving babies. An outing will follow the parade.

CHICAGO BABY WEEK.

BEING A BABY IS HAZARDOUS BUSINESS.

In the Kerguelen fire the toll was 600 lives. The Pelee volcanic eruption cost 40,000 lives. When the Titanic went down 1,100 were sacrificed. Everyone knows these facts. They are so big that they strike us like blows which we never forget.

But—do you know how many babies die in Chicago every year?

Do you know in what part of Chicago the infant mortality is greatest?

Do you know how the big cities rank in the care of their babies?

Have you read how the whole world is taking up the conservation of babies?

Here are some facts: During 1913, 7,054 babies under 2 years of age died in Chicago. The health department estimates that 30 per cent of these deaths were preventable. Six thousand one hundred and fifty-five babies died who might have grown up into good citizens. Six thousand one hundred and fifty-five inhabitants make a large-sized town. When we estimate this in national figures the amount makes disasters like Pelee and Messina shrink into insignificance. Out of every five deaths in the United States last year one was a baby under 1 year old. Unenforced birth registration makes comparative statistics difficult. But one-quarter of a million babies under 1 year died last year.

CONSERVATION.

We are conserving our forests, our mines, our water power. What are we doing to conserve human life, our greatest national asset?

Is this conservation worth while to us as a State? If so, let us work for better woman and child legislation, expert laboratory service, State traveling infant-welfare exhibits.

Is it worth while to us as a city? If so, let us pass and enforce ordinances for clean streets and alleys; more infant-welfare stations, dispensaries, and hospitals; more parks and playgrounds.

BABY WEEK.

Is it worth while for you as an individual? Then ally yourself with the infant-welfare movement before April 19, 1914.

EDUCATIONAL PAMPHLETS AND LEAFLETS ON THE CARE OF THE BABY.

United States Public Health Service, Washington, D. C.:


Summer Care of Infants. Public Health Reports, Supplement No. 10. 15-page leaflet.

Office of Home Economics, States Relations Service, United States Department of Agriculture, Washington, D. C.:

Farmer's Bulletin on meals for young children.

Children's Bureau, United States Department of Labor, Washington, D. C.:

Prenatal Care. A bulletin dealing with the care of the mother during pregnancy. 35 pp.

Infant Care. A bulletin dealing with the care of babies up to 2 years of age. 81 pp.

According to the rules of the department these bulletins can not be sent out in large numbers for redistribution. Small numbers of each can be sent to be used as

Provided by the Maternal and Child Health Library, Georgetown University
BABY-WEEK CAMPAIGNS.

American Medical Association, Council on Health and Public Instruction, 535 North Dearborn Street, Chicago, Ill.:
- Score cards for use in baby health conferences.
- Baby Health Conferences. Pamphlet No. 5. Description of the methods of holding baby health conferences according to the score card of the American Medical Association.
- Anthropometric table.
- Sample copies and price list are furnished on application to the secretary; also price list of packages made up with the number of each of the publications named above, necessary for baby health conferences of various sizes.
- Requests for material should be made as long in advance as possible.

American Association for Study and Prevention of Infant Mortality, 1211 Cathedral Street, Baltimore, Md.:
- Motherhood. 6-page leaflet on prenatal care.

Russell Sage Foundation, Department of Child Helping, 130 East Twenty-second Street, New York City:
- The Care of the Baby. 6-page leaflet.

National Committee for the Prevention of Blindness, 130 East Twenty-second Street, New York City:
- Needlessly Blind for Life. 4-page leaflet on the prevention of blindness from babies' sore eyes.
- What Women's Clubs and Nursing Organizations Can Do to Prevent Blindness. 4-page leaflet.
- Summary of State Laws and Rulings Relating to the Prevention of Blindness from Babies' Sore Eyes.

LETTER FROM THE MAYOR OF INDIANAPOLIS INDORSING THE BABY-WEEK CAMPAIGN.

To the citizens of Indianapolis:
A large number of public-spirited men and women of the city have arranged to cooperate with the department of public health and other organizations especially interested in the welfare of little children and have designated the week beginning October 3 as a time in which to make a special effort to interest all citizens in doing those things which tend to the improvement of conditions and influences surrounding the little children of the city.

I therefore ask all citizens of Indianapolis to cooperate with the committee in charge of the work of arranging for this Baby Week, and I direct that the department of public health and charities of the city shall make a special effort to render a helpful service in this behalf.

In witness whereof I have hereunto set my hand and the seal of the city of Indianapolis this 21st day of September, 1915.

(Signed) J. E. Bell, Mayor.

LETTER FROM THE MAYOR OF NEW YORK CITY TO THE CLERGY OF THE CITY.

To the clergy of New York City:
The week of June 20 to 26 has been set apart by a committee of citizens cooperating with the health department as a week for considering the needs of the infants of this city. It has been suggested that the clergy of the city call to the attention of their congregations the plans of the committee in charge of this excellent undertaking. Their purpose is to fix the attention, especially during this week, of the whole city on the proper care of babies, particularly during hot weather, in order to further reduce infant mortality.

It is hardly necessary for me to say that this program seems particularly fitting for the churches' support. Much has been accomplished within the last few years in the saving and protecting of child life in New York. In order that

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BABY-WEEK CAMPAIGNS.

we may progress still further in reducing infant mortality and promoting the welfare of the children of the city, we must have the active cooperation of all citizens, and especially of the religious and civic organizations, which have so much concern for the city's welfare. I ask, therefore, that you bring this matter to the attention of your congregations, urging their cooperation with the committee in charge.

(Signed)  

J.A. PIERCE MITCHELL,  
Mayor.

JUNE 17, 1914.

SUGGESTIONS FOR A CIRCULAR OF INFORMATION ON INFANT MORTALITY AND BABY WEEK, FOR USE IN THE PREPARATION OF SERMONS AND NEWSPAPER ARTICLES.

INFANT MORTALITY RATE.

What is an infant mortality rate? The terms "infant mortality rate" or "baby death rate" mean the relation between the number of babies under 1 year of age who die in one calendar year to the number of babies born alive during that year. This is usually expressed as the number of deaths of babies which occur for 1,000 live births.

Each country, each city or town, and each rural community should know first of all what its infant death rate is and then should do all it can to lower this rate by all methods that have proved successful elsewhere.

What is the infant mortality rate of the United States? On account of the incomplete birth registration of this country the mortality rate can only be estimated. The Census Bureau estimated in 1911 that 124 deaths of babies occurred for 1,000 live births (this being the rate in that portion of the country known as the registration area). The estimate has been made that about 300,000 babies die yearly in this country. About one-fifth of the deaths occurring each year at all ages are of children under 1 year.

How does the infant death rate of other countries compare with that of this country?

Deaths of infants under 1 year of age per 1,000 live births in foreign countries.¹

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"The same conditions which cause the death of 13 out of every 100 babies born throughout the civilized world leave more or less permanent stamps on perhaps two or three times as many more babies who somehow manage to crawl over the infant dead line, many of whom will be the fathers and mothers of the next generation. The problem of infant mortality, therefore, is far more than one of decreasing the number of infant deaths. Its scope is world wide, and on its partial solution at least depends the welfare of posterity. The call for action on such a problem may fairly be called urgent."—E. B. Phelps.

Provided by the Maternal and Child Health Library, Georgetown University
It was formerly believed that the rate of mortality among children who had not reached the first anniversary of their birth was a wise dispensation of nature, intended to prevent children with weak constitutions becoming too plentiful. To-day we know that a great infant mortality is a national disaster, on the one hand because numerous economic values are created without purpose and prematurely destroyed, and on the other because the causes of the high rate of infant mortality affect the powers of resistance of the other infants and weaken the strength of the nation in its next generation."—Prof. Dietrich.

CAUSES OF A HIGH INFANT MORTALITY RATE.

"The fundamental causes of infantile mortality are mainly the result of three conditions—poverty, ignorance, and neglect."—Dr. L. Emmett Holt.

A study of the relation of social and economic conditions to infant mortality is now being made by the United States Children's Bureau. Reports of the findings of this inquiry in a steel-manufacturing town and in a residential suburb have already been published and show a coincidence of underpaid fathers, overworked and ignorant mothers, and those hazards to the life of the offspring which individual parents can not avoid or control because they must be remedied by community action. The introduction to one of these reports says: "All this points toward the imperative need of ascertaining a standard of life for the American family, a standard which must rest upon such betterment of conditions of work and pay as will permit parents to safeguard infants within the household."

There are three groups of diseases which together cause about three-fourths of all the deaths among babies. These three groups are:

1. Digestive diseases, which cause most of the deaths of babies in summer. Bottle-fed babies are most often affected.
2. Diseases of the lungs.
3. Diseases due to conditions affecting the child before or at birth.

Some of the causes which lead to these are:

1. Of the digestive diseases: Lack of breast feeding; improper feeding; impure milk; carelessness of mothers; hot weather; overcrowding, bad housing, and bad sanitary conditions.
2. Of the diseases of the lungs: Infections, bad air.
3. Of the diseases due to conditions affecting the child before birth: Sickness in the parents, overwork of the mother, improper care before or at birth.

Because the United States differs from other civilized countries in having no general system of birth registration it is impossible to state with accuracy our proportionate loss, but we have the estimate of the Census Bureau that our actual loss last year was about 300,000 babies under 1 year of age, of whom at least half would now be living had we, as individuals and communities, applied those measures of hygiene and sanitation which are known and available. Here is a vast and unmeasured loss of infant life due solely to individual and civic neglect. The economic and industrial significance of such a loss in the general scheme of social well-being is beginning to be realized. It was once thought that a high infant death rate indicated a greater degree of vigor in the survivors. Now it is agreed that the conditions which destroy so many of the youngest lives of the community must also result in crippling and maiming many others and must react unfavorably upon the health of the entire community."—First Annual Report United States Children's Bureau.

"Infant mortality is the most sensitive index we possess of social welfare and of sanitary administration."—Sir Arthur Newsholme.

HOW TO PREVENT A HIGH INFANT MORTALITY RATE.

We are told that about one-half of the deaths of babies under 1 year may be prevented. How can this be accomplished?

PART PLAYED BY THE PARENTS IN PREVENTION.

1. Intelligent care by the mother.—Every mother has a right to know the facts which science has made certain as to ways in which it is possible to protect babies from sickness and death.

"Give me intelligent motherhood and good prenatal conditions, and I have no doubt of the future of this or any other nation."—John Burns.
“In the education of the mother in the care of herself and her baby we have the strongest weapon for fighting infant mortality.”—New York Milk Committee's Report.

2. Prenatal care of the mothers.—The great group of deaths of babies from causes acting before or at birth can only be prevented by intelligent care by the mother of herself before birth; protection of the mother by her husband from overwork; skillful care at the time of confinement; health of both parents.

PART PLAYED BY THE COMMUNITY.

1. Infant-welfare work.—“Community action can remedy many conditions dangerous to the lives of infants. The purity of the water, the milk, and the food supply; the cleanliness of streets and alleys; the disposal of waste—all these are within the control of the community. But the public responsibility does not end merely in remedying physical conditions. There is a growing tendency on the part of municipalities to accept responsibility for furnishing information and instruction to its citizens through instructive visiting nurses, baby-welfare and consultation stations, and the distribution of literature for the guidance of others. Work for infant welfare is coming to be regarded as more than a philanthropy or an expression of good will. It is a profoundly important public concern which tests the public spirit and the democracy of a community. There is, perhaps, no better sign of the modernness of a city's administration than the proportion of its income which is assigned to the protection of infancy and childhood, though it is fair to remind ourselves that a large amount of invaluable volunteer work is going on in many cities whose budgets show no item for this purpose. But whether by public or private effort the community increasingly accepts its share of responsibility for the healthfulness of individual dwelling places and their fitness for the rearing of children.”—Second Annual Report, United States Children's Bureau.

The instruction of mothers through infant-welfare or milk stations and visiting nurses is the most important immediate work for the prevention of infant mortality.

“Infant-welfare stations afford an opportunity to give poor mothers the benefit of personal advice by experts in the care and feeding of infants. Wherever these have been in successful operation the infant mortality has been materially reduced. At these centers the mother receives instruction in the care and feeding of her child, both in sickness and in health. The necessity for breast feeding is emphasized and, where this is impossible, the nurse on her visits to the home teaches the mother how to prepare the feedings. The importance of clean pasteurized milk is demonstrated and at many stations such milk is furnished at a moderate cost. Germany now has 655 infant-welfare stations in 345 different localities; England has over 200, and there were before the war 77 in Belgium. In the entire State of New York, outside of the city of New York, there were in 1913 only 32 such stations in 12 different localities. The public-health commission appointed by the governor, which drafted the present public-health law, recommended that ‘each city with a population in excess of 10,000 and having an industrial population should have one infant-welfare station, and larger cities with an industrial population should have one such station for approximately each 20,000 inhabitants.’”—Circular of the New York State Department of Health, 1915.

2. Public-health or visiting nurses.—Where communities can not afford to support infant-welfare stations even during the summer months help given to the mothers in their homes by visiting nurses, under the direction of the family physician, does much good. Little Mothers' Leagues are associations of girls in the upper grades of schools to whom instruction is given in the proper care and feeding of babies. Much good has been accomplished by them.

3. Improvement of the milk supply.—Each community should make certain that the milk provided for its babies is pure. This can be done only by the appropriation of sufficient money to insure a proper inspection of the milk supply.

4. Sanitary conditions.—Overcrowding, insanitary houses and streets, bad water, bad sewers, are potent factors in causing a high infant mortality rate. The community is responsible for the protection of its babies from these dangers.
BABY WEEK CAMPAIGNS.

BABY WEEK.

A Baby Week is a campaign with a twofold purpose: (1) To give the mothers and fathers of a community the opportunity of learning the most important facts with regard to the care of the baby. (2) To bring home to the community a knowledge of the facts regarding the needless deaths of its babies and a realization of the ways in which it must protect them.

A Baby Week should be a community campaign; each person in the community should feel that he or she has a part in it.

A Baby Week should not be a temporary flurry and excitement, but should lead to permanent work for the babies.

Chicago held the first Baby Week, April 19 to 25, 1914; New York City the second, June 29 to 26, 1914. This year they have been followed by Pittsburgh, Grand Rapids, Detroit, Staten Island, Youngers, Indianapolis, Topeka, and many other cities.

LETTER TO FATHERS.

[Adapted from message sent out during the Pittsburgh Baby Week.]

Tradition has, in the past, left all the care of the baby to the mother. The conditions of our present-day society require that, in addition to providing food, shelter, and other material things, the father must share with the mother the responsibility for the health of his baby.

The following are some of the things that he should understand and do:

He should understand the importance of prospective mothers having good care and advice at as early a period as possible so as to insure the health of the mother and protect the coming baby.

He should see that the mother has adequate care during and after the birth of the baby, so that the mother's health may be continued or restored as quickly as possible, both for her own sake and that she may be able to give proper care to the baby.

He should know the importance of the mother nursing her baby. Breast-fed babies have a much greater chance of living and becoming strong, healthy children than have bottle-fed babies. This is so important that anything that would alter or lessen the mother's milk supply, such as overwork, excitement, shock, or worry, should be avoided.

If, after every effort is made, the mother’s milk supply is not adequate, the father should know that clean, fresh cows' milk is the best substitute, and should see that the baby gets such milk and that the mother has the advice of the doctor on its preparation.

He should know that nearly one-third of all infant deaths occur as the result of digestive disturbance brought on chiefly by faulty feeding.

He should know that soothing syrups are dangerous, that pacifiers are both needless and injurious, that the baby needs rest and regular hours of sleeping, and should not be kept up late nor handled too much.

He should know the importance of good surroundings to the baby. The baby needs fresh air and sunlight as much as any plant. Like a plant, the baby will droop and die if kept in a dark, close room, deprived of nature's best health tonics—fresh air and sunlight.

Cleanliness in and about the home is even more important to the baby than to the adult. Baby can not protect itself against dust, dirt, and flies. Flies bred in the open garbage can or in the rubbish heap in the yard may carry germs to the baby's mouth or milk and cause diarrhea or other diseases.

The father should not fail to have his baby's birth registered at the health department. A certificate of birth will be necessary for school attendance, going to work, inheritance, and citizenship.

Lastly, every father should know of and take an active part in promoting conditions in our city which will give every baby a better chance. Some of these things are better industrial conditions, better housing, improved municipal sanitation, improved milk supply, milk stations, and visiting nurses, settlements, nurseries, and other agencies for the protection and conservation of infant life. He should know what his own health department is doing.
PLAYS FOR CHILDREN.

ON BABY WELFARE.

(By G. W. P. Balm, University of Pittsburgh, for the Pittsburgh Baby Week. Published in the Journal of the Outdoor Life, November, 1915, 230 Fourth Avenue, New York City.)

The Theft of Thistledown.
The Narrow Door.
Plays may be produced if the author is notified in advance and is sent a copy of the program.

ON VARIOUS SUBJECTS.

(By Herbet D. Jenkins, bureau of charities, Brooklyn, N. Y.)

Mother Goose Up to Date (Health).
Judith and Ariel (Fresh air).
Our Friends the Foods (Food).
In a Tenement (Tenements).
Killing Giants (Juvenile court).

TRAVELING EXHIBITS AND LANTERN SLIDES ON INFANT AND PRENATAL CARE, INFANT WELFARE, AND PUBLIC HEALTH NURSES.

Material in many cases is loaned free if transportation is paid. In some cases a small rental fee is asked in addition. In most cases the condition is made that broken lantern slides shall be paid for by the borrower. Further information may be obtained from the secretaries of the organizations. Applications for exhibit material and lantern slides should be made as long as possible in advance.

UNITED STATES PUBLIC HEALTH SERVICE, WASHINGTON, D. C.

Lantern slides.—Two thousand views dealing with various public-health problems; 50 slides on the subject of milk.

CHILDREN’S BUREAU, UNITED STATES DEPARTMENT OF LABOR, WASHINGTON, D. C.

Exhibit material.—Twelve wall charts on infant welfare mounted on linen: 20 by 40 inches. Sent under frank.
Lantern slides.—Set of 50 lantern slides on infant care, each slide having an appropriate label of explanation; no outline for lecture. Sent under frank.

OFFICE OF HOME ECONOMICS, STATES RELATIONS SERVICE, UNITED STATES DEPARTMENT OF AGRICULTURE, WASHINGTON, D. C.

Colored food and diet charts, useful in exhibits on the subject of food for young children. To be obtained from the Superintendent of Documents, Washington, D. C.

AMERICAN ASSOCIATION FOR STUDY AND PREVENTION OF INFANT MORTALITY, 1211 CATHEDRAL STREET, BALTIMORE, MD.

Exhibit material.—Scope: Illustrates causes and extent of baby sickness and death; how to keep the baby well; right food for the baby; baby life-saving stations. Contents: 35 panels; 5 single introductory panels; 6 cabinet screens, each of which holds 5 panels; no wall attachments. Space required: 80 linear feet; 4 feet from wall to exhibit; walls must be at least 10 feet high. Weight: 1,550 pounds; packed in 8 boxes; usually shipped by freight.
Lantern slides.—Collection of 50 slides, based on traveling exhibit, accompanied by brief descriptive statement.

NATIONAL CHILD-WELFARE EXHIBIT ASSOCIATION, 36 EAST FORTY-SECOND STREET, NEW YORK CITY.

Exhibit material.—Four exhibit sections dealing with infant care, each section composed of 5 panels, 3 by 6 feet. When packed ready for transportation each section weighs about 240 pounds.
NATIONAL COMMITTEE FOR THE PREVENTION OF BLINDNESS, ROOM 510, 130 EAST TWENTY-SECOND STREET, NEW YORK CITY.

Exhibit material.—Two sizes of exhibits on babies' sore eyes: Large exhibit, 5 panels, 34 by 68 inches, standard raising the exhibit 2 feet from the floor; wall space required, 14 feet 2 inches long, 7 feet 2 inches high; weight, ready for shipment, 230 pounds. Small exhibit, 5 panels, each 5 by 10 inches; wall space required, 7 feet 6 inches by 3 feet 4 inches; weight, ready for shipment, 20 pounds. Lantern slides.—Seventy-seven on babies' sore eyes; outline for a lecture or a complete lecture supplied, according to request.

RUSSELL SAGE FOUNDATION, DEPARTMENT OF CHILD HELPING, 130 EAST TWENTY-SECOND STREET, NEW YORK CITY.

Exhibit material.—Ten panels 3 by 6 feet on infant care; weight ready for transportation, two cases, each 225 pounds. Lantern slides.—Sixteen lantern slides on visiting nursing.

PUBLIC HEALTH NURSE QUARTERLY, 612 ST. CLAIR AVENUE NORTHEAST, CLEVELAND, OHIO.

Lantern slides.—Fifty lantern slides on public health nursing; descriptive lecture accompanies the slides.

RED CROSS TOWN AND COUNTRY NURSING SERVICE, 1624 H STREET, WASHINGTON, D. C.

Exhibit material.—Thirteen panels, 2 by 2½ feet, descriptive of the activities of the visiting nurse in rural communities and small towns; 2 panels on infant-welfare work; to be hung in tiers of three; requires 13 by 6 feet wall space; exhibit of 6 cabinets, each 8 feet 6 inches by 34 inches by 10 inches; one cabinet on infant-welfare work; weight ready for shipment, 1,200 pounds. Lantern slides.—Fifteen to 20 on the same subject. Motion-picture film on the subject of the work of the visiting nurse in rural communities and small towns.

AMERICAN MEDICAL ASSOCIATION, COUNCIL ON HEALTH AND PUBLIC INSTRUCTION, 535 NORTH DEARBORN STREET, CHICAGO, ILL.

Cartoons on infant welfare and public health available for exhibits; cuts of the same.

TITLES OF PANELS IN SEVERAL INFANT-WELFARE EXHIBITS.

CHILDREN'S BUREAU.

Baby's Rights.
Care Before Birth.
Nursing the Baby.
Mother's Milk.
What Mother's Milk Did for This Baby.
Artificial Food.
Baby Needs Air.
Colds and Pneumonia.
Baby's Poos.
When Mother Works.
Low Wages.
Mothers' Pensions.
In the Same Town.

NEW YORK STATE DEPARTMENT OF HEALTH.

The Necessity of Healthy Parents.
Birth Registration—Importance of birth certificates.
Birth Registration—Proof of age required by civil service and some employers.
Infant Mortality—Electric flash light going out every time a baby dies in the civilized world.
Necessity of Breast Feeding.
Health Creed for a Well Baby.
Pasteurized Milk.
BABY-WEEK CAMPAIGNS

Care of Milk in the Home.
Dangerous Soothing Syrups.
Dangerous Foods.
Fresh Air for the Baby.
Where Babies Die (housing conditions).
The Fly Pest.
Vaccination—Prevention of blindness in babies.
Common Colds—What they may lead to.
How Colds are "Caught."
How to Handle the Baby.
Bathing the Baby.
Education of the Mother Will Reduce the Infant Death Rate in Your City.
Infant Welfare Stations—Their value.

PITTSBURGH BABY WEEK EXHIBIT.

Prenatal care:
How to Save the Babies.
Care Before Birth.
The Working Mother.
Why the Baby Died.
Father Pitt Offers the Mothers Advice and Help in Caring for the Babies.

Birth:
Babies' Sore Eyes.
Prevent Sore Eyes.
Regulation of Midwives.
Baby's Rights.

Feeding:
Why Baby Should Be Nursed.
Mother's Milk.
Nursing the Baby.
What a Patent Food Did for This Baby.
Artificial Food.

Milk:
Dangerous Milk.
Dairy and Milk Inspection.
Certified Milk—What it is.
Certified Milk—Method of supervision.

Care of mother and baby:
Causes of Baby Deaths.
Catching Diseases.
Measles and Whooping Cough.
Light and Air.
Flies.

Saving babies:
Baby Welfare Week.
Little Mothers.
Work of Nurse.
The Nursing Bottle.
Happy Babies.

RUSSELL SAGE FOUNDATION, DEPARTMENT OF CHILD HELPING.

All Births Should be Registered.
Our Country's Faulty Records.
A Baby Dies in the United States Every Time This Star Fades.
Baby's Pilgrim's Progress Through the Valley of the Shadow of Death.
How to Save Babies.
The Beginning of Life.
Mother's Milk.
What Mother's Milk Did for These Babies.
What a Patent Food Did for These Babies.
Artificial Feeding.
Feeding the Baby.
Flies are Carriers of Disease.
Colds.
Whooping Cough.
Measles.
LIST OF ARTICLES IN EXHIBIT ON INFANT CARE AT THE EXHIBIT OF THE CHILDREN'S BUREAU, PANAMA-PACIFIC EXPOSITION.

CLOTHING FOR THE BABY.

Hot-weather costume.—Cotton bad and diaper.


Two dolls dressed in these costumes.

SLEEPING ARRANGEMENTS.

Homemade crib for young baby.—Clothes basket, mattress of silence cloth, mattress cover, rubber sheering, sheets, blankets. Such a crib is described and illustrated in Infant Care, United States Children's Bureau publication No. 8, page 12.

Crib for older baby.—Iron crib with high sides, mattress, bedding as above, mosquito netting to cover bed.

BATHING ARRANGEMENTS.

Asbestos hospital doll, which may be used by the nurse in demonstrating the baby's bath, low table and chair, bath tub, pitcher for warm water, bath thermometer, towels and wash cloths, bath apron, bath accessories—good soap, vaseline, talcum powder, boric acid, absorbent cotton.

OBJECTS NEEDED FOR PREPARATION OF MODIFIED MILK.

Portable gas stove, two burners (electric plate may be used), nursing bottles (8 ounces—cylindrical), nipples, covered glass for nipples, clean cork, bottle brush, graduated measuring glass, two quart pitchers, one funnel, long-handled spoon for stirring, pail or kettle for pasteurizing milk and sterilizing utensils (for home pasteurizers and use, see Infant Care, pp. 40 to 46), tablespoon, double boiler for cooking cereals.

SCALES FOR WEIGHING BABY.

Scale having balance beam and platform; suitable basket or pan on platform for holding baby.

PLAYPEN FOR OLDER BABIES.

For description, see Infant Care, page 24.

OTHER ARTICLES WHICH MAY BE SUGGESTED.

Homemade icebox. (See Infant Care, p. 41.)

Homemade iceless cooler. (See Circular 776, States Relations Service, United States Department of Agriculture.)

Homemade iceless refrigerator. (See Circular 778, States Relations Service, United States Department of Agriculture.)

HOMES OF DO CARE AND DON'T CARE FAMILIES.

An interesting feature of an exhibit is the display of good and bad kitchens or good and bad nurseries, which reproduce typical rooms to be found in the town where the exhibit is held.

Two rooms, approximately 8 to 10 feet square, are constructed and furnished to represent two contrasting kitchens or nurseries. The furnishings must be similar, but while that belonging to Mrs. Do Care is shown in model order the other, belonging to Mrs. Don't Care, is carelessly or ignorantly cared for. It is not advisable, however, to make the contrasts so extreme that both seem unreal.

CONTRASTS.

Do Care.  
Neat and clean wall paper.  
Windows screened.  
No flies.  
Milk covered.  
Clean stove.  
Dust cloths, etc.

Don't Care.  
Ugly and untidy wall paper.  
No screens.  
Flies.  
Milk uncovered.  
Dirty stove.  
Feather duster, etc.