BABY-WEEK CAMPAIGNS
(REVISED EDITION)

MISCELLANEOUS SERIES No. 5
Bureau Publication No. 15

WASHINGTON
GOVERNMENT PRINTING OFFICE
1917
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Baby-week campaigns. Approximate situation of communities which took part in the nation-wide baby-week campaign, 1916. Reports have been received from a few additional communities since the map was prepared.
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Provided by the Maternal and Child Health Library, Georgetown University
LETTER OF TRANSMITTAL.

U. S. DEPARTMENT OF LABOR,
CHILDREN'S BUREAU,

Sir: Herewith I transmit a revised and enlarged edition of the bulletin entitled “Baby-Week Campaigns,” which was first published by the Children’s Bureau in 1915.

Part I gives an account of the nation-wide baby-week campaign of 1916, held under the joint auspices of the Children’s Bureau and the General Federation of Women’s Clubs, with descriptions of certain typical campaigns and of features which proved of special value. Part II gives in outline form detailed practical suggestions for planning and carrying out baby-week campaigns.

The bulletin contains also an appendix, with a list of exhibit material and educational pamphlets supplied by various Federal and State agencies and by national organizations. It includes a circular of information about infant mortality and the text of a few leaflets. It also gives a list of plays and certain other material which has been used in baby weeks in various localities.

The history of the celebration of 1916 shows a remarkable degree of public-spirited cooperation, in which officials, private organizations, and individuals joined. Each community paid for its own observance. The total expenditure was small, and some of the best celebrations cost only a few dollars. The bureau is already in receipt of much information showing permanent work for child welfare resulting from these celebrations.

This bulletin has been prepared under the direction of Dr. Grace L. Meigs. The new material has been compiled by Mrs. Constance Leupp Todd, with the assistance of Miss Anna Rochester and Mrs. Etta R. Goodwin.

Respectfully submitted.

JULIA C. LATHROP, Chief.

Hor. William B. Wilson,
Secretary of Labor.
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PART I. BABY WEEK IN 1916.

INTRODUCTION.

Baby week was inaugurated by Chicago in 1914, and a second baby week was celebrated by New York City in June of the same year. Following their lead, Pittsburgh, Indianapolis, Topeka, Grand Rapids, and a few other cities held similar celebrations, consisting of a week dedicated to the welfare of babies. Lectures, exhibits, baby-health conferences and contests, school programs, parades, plays, the distribution of pamphlets, leaflets, and other printed matter on the care of the baby, newspaper publicity, and other expedients were used to concentrate attention for seven days on the baby’s needs, with an emphasis calculated to inspire a popular response and result in permanent work for the reduction of infant mortality and for improvement in conditions affecting the welfare of babies and young children.

Preparation for the nation-wide baby week.

In the fall of 1915 the General Federation of Women’s Clubs and the Children’s Bureau announced their purpose to cooperate in promoting a nation-wide baby week to be held in the spring of 1916. March 4 to 11 was suggested as the date, but it was made plain that a baby week at any other period would be regarded as part of the nation-wide campaign.

The President and the Secretary of Labor gave public endorsement to the plan; many governors and mayors issued proclamations on the subject.

The General Federation of Women’s Clubs and the Children’s Bureau urged all appropriate national, State, and local organizations and all individuals interested in infant welfare to participate. From the general federation the message was carried to the officers of the State federations. Through the General Federation of Women’s Clubs Magazine, through the publicity department of the federation, through press material issued by the Children’s Bureau, and through the active interest of numerous periodicals and news bureaus the baby-week idea not only reached the more than 2,000,000 women identified with the general and State federations of women’s clubs but received wide publicity throughout the country.
Interest in the movement led the United States Reclamation Service to devote a generous amount of space in one issue of the Reclamation Record to an appeal to "project women" to respond to the call of the federation. The plans adapted themselves well to the policy of the Commissioner of Indian Affairs in urging employees in the Indian Service to use every occasion to work for the preservation of infant lives. The Public Health Service was one of the largest contributors of material on the care of the baby for distribution in communities in all parts of the country. The Office of Home Economics of the Department of Agriculture prepared a special bulletin on Food for Young Children, which was widely circulated. The National Congress of Mothers and Parent-Teacher Associations cooperated actively in State and local campaigns. Many other national organizations responded and took means to interest local branches. Secretaries and members of State boards or departments of health and State registrars of vital statistics approved the plan and took an active part in the campaign. Extension divisions of State universities and agricultural colleges gave great assistance. Child-welfare organizations, visiting-nurse associations, churches, schools, libraries, and other civic bodies, magazines and newspapers, department stores and other commercial organizations, and a score of other agencies helped.

**Extent of the celebration.**

As a result of this widespread cooperation several thousand American cities, towns, and rural communities organized and celebrated baby weeks. The number of local campaigns held in the United States of which the Children's Bureau afterwards received authentic reports was 2,100. Requests for pamphlets and directions as to how to hold a baby week came to the bureau from 4,234 communities. Just what proportion of these inquiries actually resulted in celebrations can not be estimated. After baby week the bureau sent to each of the communities with which there had been correspondence a special request for a report on the local celebration. Less than one-half of these replied, but these replies and authentic reports received from other sources gave the bureau a record of 2,100 celebrations. Indefinite reports, too vague to list, indicate that this number is far below the total.
BABY-WEEK CAMPAIGNS.

Campaigns were reported from every State, as is shown in the frontispiece map and in the following statement:

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<thead>
<tr>
<th>State</th>
<th>Number of communities reporting a baby-week campaign.</th>
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<tbody>
<tr>
<td>United States</td>
<td>2,100</td>
</tr>
<tr>
<td>Alabama</td>
<td>30</td>
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<tr>
<td>Arizona</td>
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<tr>
<td>Arkansas</td>
<td>43</td>
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<tr>
<td>California</td>
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<td>Colorado</td>
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<td>Wyoming</td>
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The names of the communities reporting celebrations of baby week are given in a list in the appendix, pages 101 to 108.

Of the 50 cities in the United States which are recorded in the census of 1910 as having a population of 100,000 or over, only 3 failed to report celebrations. Nearly 700 of the celebrations took place in small villages or rural districts. The idea was adopted in a few instances even in territory outside the limits of the United States; three campaigns were reported from Canada and one from the Isle of Pines, West Indies. Rumors, but no definite reports, were received about a baby week in Alaska, and a detailed report came from Honolulu.

Much that is interesting and picturesque is reported from remote communities, and the baby-week idea found an eager response everywhere. The Indian reservations held their baby weeks. In Colorado a town 40 miles from the railroad celebrated; in California one in the middle of the desert. One mother brought her two children on an all-night journey to the conference in a Pacific coast city. A report of the successful celebration in Honolulu says: “We were
afraid no Orientals would enter their babies, but they did.” And
the report goes on to tell of the great interest of the native mothers
after they once understood the meaning of the celebration.
Most interesting of all the reports are those from places where one
person or a small group of persons has worked against great odds to
make a community see the value of baby week and has succeeded in
stirring a genuine interest and holding a successful celebration.
From one such town on the Pacific coast comes the record of a
modest celebration whose promoter, fully conscious of its shortcom-
ings, adds: “Next year we hope to have a baby week right.” In one
northern New York town a dauntless woman initiated the idea and
and carried it through practically without help and against great odds
because of bad weather. Bad weather and illness on the part of
the committee members were frequent obstacles triumphantly over-
come. One California town with a favorable climate and a negligi-
ble baby death rate showed a praiseworthy modesty, appreciating
the fact that there was much to be learned about infant welfare, and
and held a baby week which was well attended. Towns where the one
logical obstacle to a celebration existed, namely, a shortage of babies,
held celebrations nevertheless for all children under school age. In
two or three towns where it was impossible to find people to under-
take committee work involving time, simple but effective campaigns
were made merely by securing and distributing leaflets. This method
of awakening interest will doubtless bear fruit another year. A
South Dakota town holds the record for speed; work started on a
Wednesday, and the celebration began on Saturday of the same week.

Probably the most remarkable example of a baby week held under
difficulties was a campaign which was launched and carried through
by a tuberculosis patient in a Tennessee mountain town. She se-
cured literature from the State health department and several of the
national organizations and left it for distribution in the two stores
of the town, where posters advertised the church and school meetings
she had arranged. She furthermore helped two other towns—one
by providing a speaker, and the other by donating the leaflets which
were left over from the campaign in her own town.

Two closely adjoining towns in New Jersey, with a large industrial
population and varied races, solved the problem of mixed elements
in the community by a plan so simple and yet so unusual that it
deserves special mention. They arranged a joint celebration, and
their original program was the comprehensive and fairly elaborate
one appropriate for a community of 30,000. A month later an
exhibit went out in search of those people who had not come to see
it when it was shown in the high school or in a window in the shop-
ing district. For a week this exhibit was held in the heart of the
BABY-WEEK CAMPAIGNS.

most congested district, and the committee reports that it thus succeeded in interesting many people whom even the visiting nurses had before been unable to reach. Later the exhibit was shown at the different schools in turn. Local doctors were also enlisted to help with the examination of babies.

Altogether the experiment of 1916 goes to show that there is no community too large or too small, too remote or too indifferent, for its smallest citizens to reap the benefits of a baby-week campaign.

Plans for 1917.

Baby week has been the means of launching so much of permanent good to the baby, it has proved so unexpectedly popular everywhere, and at the same time it has so generally aroused a determination to regard the 1916 baby week as only a beginning, that the General Federation of Women's Clubs and the Children's Bureau have decided to advocate a similar celebration in 1917. Not all of the 2,100 communities reporting a baby-week campaign in 1916 may find it wise to repeat the celebration in 1917; but the United States includes 14,186 incorporated cities, towns, and villages, and it is doubtful if among the thousands which have never had a baby day or baby week there is a single town or village which would not profit from such a campaign.

New and interesting features of baby-week celebrations reported from various communities are briefly described in the following pages. They are given merely as examples, suggestive for those who are preparing a campaign. It has been impossible to mention all the good campaigns reported to the Children's Bureau.

TYPICAL LOCAL CAMPAIGNS.

Organization.

The local initiative in organizing baby weeks usually came from the women's organizations, although where baby-saving societies were already well established these often took the first step. In one town that had no club nor organization whatsoever to initiate the campaign, a group of individuals simply came together and formed themselves into a committee. Occasionally, as has been said, it was one woman in a town who put through a program successfully.

The importance of cooperation was generally recognized, and the following statement from the report on a suburban baby week is typical:\footnote{Many of the quoted reports have been slightly changed or condensed.}

Our baby week was quite successful. The best feature was, I think, the spirit with which the community as a whole entered into it and did their part—
BABY-WEEK CAMPAIGNS.

the churches, the doctors, schools, stores, and private individuals, both rich and poor, young and old. This is an unusual feature in this locality, where the general spirit is not always cooperative.

COST.

Expenses varied all the way from about $4,000 spent by one middle western city to 35 cents spent by a southern village, $2 spent by a Pacific coast town, and nothing at all spent for a baby week which had an enthusiastic constituency from both city and country.

Many campaigns were paid for in part or altogether by public funds. In South Carolina the State board of health contributed $100 toward the campaign. The city of Los Angeles, Cal., subscribed $500 toward the expenses of its celebration, and the county of Los Angeles appropriated $1,000 more; private subscriptions brought the total a few dollars higher. In Sioux Falls, S. Dak., the city commissioners and county commissioners appropriated $200 toward the celebration, the remainder coming from club contributions and benefit performances. The San Francisco committee received $250 from the city. In Miami, Fla., the city council made a contribution, and in Salem, N. J., the city council gave $25. Elsewhere the local health department not uncommonly contributed service, material, or money to the campaign.

Some committees were so successful in raising money that after they had paid the expense of the celebration they still had a good sum remaining with which to launch permanent work.

Campaigns in small towns and rural districts.

Small towns displayed even more ingenuity than the larger towns and cities in planning inexpensive devices and arranging programs which contained all the pith and value of the national idea without overtaxing the resources of the community. The reports from small towns in different parts of the country admirably illustrate the possibilities of baby week for small communities. From North Dakota, for example, comes the following:

BABY DAY IN A SCHOOLHOUSE.

We certainly observed baby week in our township. As you know, we are a rural club and only a dozen strong. We all live in or near school district No. 4; but most of the babies of our township are in district No. 2, so we held the examination of babies there. Our local editor gave us space for notices for five weeks before this. The school board let us have the schoolhouse and fuel free, and the merchants in town gave everything we needed from boards to safety pins. The arrangement committee loaded themselves and stuff on two spring wagons and drove up Saturday morning. The Methodist Church loaned us their Sunday-school screens. We used one-third of the schoolroom lengthwise.
BABY-WEEK CAMPAIGNS.

for the examination and clerks' rooms and left the seats as they were in the rest for the folks who might come.

We had white curtains, with green paper festooning and paper roses at the top. We put posters on the outside of the screen and over the side of the blackboards. The booklets we put on a stand and told folks to help themselves.

There were 27 babies in the township, from 6 months to 3½ years. Many people came to see it all, and 13 children were entered. The highest score was 98½ per cent and the lowest 83 per cent. Our three local doctors from town gave us the afternoon and we had one nurse in the township who helped. The doctors had never seen a scoring before and were much interested. Our clubs sent out invitations to the parents a week beforehand.

While the meeting was not large, we know it was a good beginning. The roads were a cross between snow banks and lakes, so we look for a better crowd next fall.

In our own corner we will use schoolhouse No. 4 for a social center this summer. Will have flower gardens for the children and are planning an open-air theater. The children will have a story hour once a week, and the evening of that day we are free to take our families and supper to the schoolhouse.

We have the Federation Magazine. If any other rural club thinks it can not hold a baby examination refer them to us; for it wakes up a township better than a presidential election.

The report from a New York town shows how committee work may be divided when one person takes the initiative. The writer is the president of the Women’s Civic Improvement League.

GETTING READY FOR BABY WEEK.

First, I appointed a special baby-week celebration committee of five of my club members and drafted a tentative plan for the committee to use as a basis for its work.

One member of the committee was responsible for the press or publicity campaign. We sent to the Children’s Bureau for material to use in this work. Another member was responsible for the musical part of the special Friday afternoon celebration. Two members looked after getting the merchants to decorate their windows. Two looked after securing speakers.

We asked the merchants to have windows decorated with baby things all the week. They responded enthusiastically.

THE CELEBRATION.

In the school two physicians gave talks on what the brothers and sisters could do for the little baby; this in the grades.

In the churches the ministers responded readily to our request that they preach on the subject of the baby.

On Friday, March 10, we had a special celebration at 3 p. m., open to all women of the village. We had some good music—singing by 10 tiny girls and lullabies by two of our best soloists; recitations, as a bit of humor, about the baby; two splendid talks by local physicians, one on the expectant mother and the other on the new mother with the new baby. As a member of the child-welfare board I gave a brief explanation of the welfare law and its workings in our county. We had two trained nurses in uniform, who displayed a complete but simple layette and dressed a big doll many times to show young mothers how the little baby should be dressed; they also showed the simple
BABY-WEEK CAMPAIGNS.

remedies and appurtenances of all kinds that should be kept on hand for the baby and mother. The day of this meeting was one of the worst of the winter—sleet and snow and very cold—but we had 200 women present. We gave out quantities of excellent literature on children and their care.

The doctors both had many individual inquiries on the days following the celebration, which showed that attention had been given to what they said.

From the Pacific coast comes the following report of a two-day celebration, showing one of the most carefully worked out programs of the year in a town of 500 inhabitants.

COMMITTEES APPOINTED.

Ours is a small community, comprising about 500 people. We held our first baby-week campaign, combined with a child-welfare exhibit, on March 10 to 12, 1916. The Camp Fire Girls sent invitations to the other organizations of the place to join them in undertaking the campaign. The Rebekas, the Grange, the Ladies' Improvement Club, and the Ladies' Aid Society each responded by appointing one of their members to represent them on a central committee. The cradle-roll superintendent of the Sunday school, the local physician, the principal of the school, the local cartoonist, the local editor, and all other people interested enough to attend the meetings completed the membership of this central committee.

SENDING FOR LITERATURE.

In January the guardian of the Camp Fire Girls sent for the publications of the Children's Bureau on baby-week campaigns and child-welfare exhibits and followed this up with letters asking for advice or literature from the following: State superintendent of public instruction, the Children's Orthopedic Hospital of Seattle, the Washington State Board of Health, the State federation of women's clubs, the children's department of the Seattle Public Library, the extension departments of the State university and the State college, State Sunday-school workers, and the three Federal agencies—Bureau of Education, Children's Bureau, and the Department of Agriculture. A good supply of literature was received for distribution. The Department of Agriculture sent 50 of the following bulletins, which applied especially to the rural conditions of this vicinity: Nos. 480, 463, 478, 255, 393, 373, 330, 607, 608, 692, 363, 595, 679, 444, 377, 256, 520, 170, 335, 432, and 182.

SURVEY, EXHIBITS, AND CONFERENCE.

The Camp Fire Girls made a survey of the children in the community, enlarging the term "babies" to include all children not old enough to go to school. Fifty-two were reported.

Next came the assigning of exhibits to the different organizations.

The Ladies' Improvement Club assisted the local physician in undertaking the baby-health conference. Appointments for examinations of the babies were made by the club and circulated by the school children. In response to these appointments the mothers brought the babies from long distances and seemed glad to have the opportunity of knowing more about their babies' physical condition. The score card, without the contest, seemed especially attractive to the mothers. Twenty-one children were examined, the large majority of whom proved to be healthy country children, although several cases of adenoids were reported.
BABY-WEEK CAMPAIGNS.

The Ladies' Aid Society was responsible for exhibiting the meals for one day for a child from 2 to 4 years old. One of the Camp Fire Girls made an exhibit of a glass of milk and its equivalents in other foods. The class in animal husbandry at the school performed the test for fat in milk, which proved very interesting to the adults.

The Rebekas took charge of the playroom and had an exhibit of good and bad toys. These proved especially attractive to the country children, who do not have the toy departments of the large city stores to stimulate their imagination. A long panel for decorating children's rooms was labeled "Children's Pictures for Children—Teach children through pictures," and consisted of an attractive row of colored magazine pictures of children and their interests.

The Camp Fire Girls had two dolls dressed to represent babies properly clothed for winter and summer, together with a trained-nurse doll. Besides this exhibit, two of the Camp Fire Girls presided over the homes of Mrs. Do Care and Mrs. Don't Care. They dressed the parts and had all their doll furniture properly fitted up, and fitting pictures on the wall. The neatly set table and the doll carriage screened with fly netting were in sharp contrast to the dirty table and the doll unprotected in the other carriage.

Along with this, the Grange had an exhibit of Mrs. Do Care's Thrifty Market Basket and Mrs. Don't Care's Thoughtless Market Basket. These were compiled from the table of food values sent out from Pullman, and were made up of the usual amounts bought at the store. The thrifty market basket cost $1.86 and contained 532 protein grams and 36,913 calories, these foods being one 16-ounce loaf of homemade bread, 1 pound corn meal, 1 pound oatmeal, 1 pound raisins, 1 pound prunes, 1 package dates, 2 pounds fresh peaches, 1 quart milk, ½ pound butter, ½ pound cheese, ½ dozen eggs, 1 pound potatoes, 1 pound navy beans, 1 pound carrots, 1 pound veal shoulder, 1 pound lamb loin, ½ pound sugar, ½ pound peanuts, and ½ pound cocoa. The thoughtless market basket cost $1.90 and contained 135 protein grams and 4,382 calories, or one-fourth as much food as the other basket at a cost of 4 cents more. In this basket were 2 packages prepared cereal, 1 dozen oranges, 1 can peaches, ½ pound tea, ½ pound coffee, 1 can tomatoes, 1 can dried beef, 1 half-pint jar pickles.

The bulletin desk was presided over by the guardian and some of the Camp Fire Girls, and was an exhibit in itself.

FORTY POSTERS AT SMALL COST.

The main part of the exhibit was made up of 40 posters prepared by the Camp Fire guardian. The rubber stamping outfit of the school was used, and a roll of butcher's paper 20 inches wide was secured. The posters varied from 3 to 4 feet in length and were illustrated with magazine pictures, photographs, copies of cartoons, and striking phrases printed in large type. A few cartoons were made by the local artists; among these were: How High is the Wall in Our Town? Is Your Farm Like This or This? and Adenoids and Their Effect.

The posters dealt with general information about baby week and about the Children's Bureau; the baby-health conference and the benefit of physical examination; contagious diseases, flies, typhoid, milk, teeth, general health; patent medicines and other fake cures; children's books, and books on story telling for mothers, and the older child's good and poor books; the Children's Bureau publications, Prenatal Care and Infant Care. A pad was provided for the signatures of mothers desiring to secure these last two bulletins.
BABY-WEEK CAMPAIGNS.

INFORMAL TALKS AND DISCUSSIONS.

The baby-week program and the child-welfare exhibit were held at the schoolhouse, the exhibit being open Friday evening, all day Saturday, and Sunday afternoon. The program Friday evening consisted of a talk on milk and teeth by the local physician, a talk by the local lawyer on the State laws as they affect the homes and the children in the homes, especially birth-registration and quarantine laws, and then a talk on the What, Why, and How of Story Telling by the local primary teacher.

The cradle-roll program for Baby Sunday was held at the church, and six questions given out to the parents the week before were discussed by them at this meeting. The questions had to do with problems of child life that puzzle all mothers and educators. The primary department had a special song, and there was special music throughout the service.

It is felt that the very newness of such work in a rural community is something of a handicap in itself. While much was accomplished by this first attempt, it has opened the way for similar work along still broader lines.

TOTAL EXPENSES, TWO DOLLARS.

Our expense account of $2 was apportioned as follows: Butcher's paper, 25 cents; postage, 75 cents; and freight on the educational charts loaned by the State superintendent of instruction, $1. Butcher's paper is cheap, and a good color, and heavy enough so that it does not curl easily. There were several advantages in using the paper on one long roll, as we could use different lengths easily. We used the photographs in the pamphlet on exhibits to illustrate our posters, and other similar photographs were taken from other publications.

COMMUNITY NEEDS AND GENERAL RESULTS.

We feel that the danger from contagious diseases, the need of a strict quarantine, the danger from flies, bad milk, unclean stables, and bad farm sanitation need publicity in rural communities. Our whole county does not boast of one kindergarten, and the idea of the value of play for children, both young and older, is very poorly understood. A popular proverb in these parts is, "Only babies and monkeys need amusing." It was very interesting to see the play-hungry children hover over the toy exhibit and to watch them as they listened to the primary teacher tell them stories. The average farm mother has so much to do that she often feels she has not time to tell stories to the children, feeling that their undirected outdoor play should suffice.

The older people of the community were apt to be skeptical about this new campaign, thinking that country children were so much healthier than city children that there was no need of a campaign on their behalf. The examination of the babies proved that they did rank very high, but adenoids and other troubles presented themselves from time to time. The young mothers who brought their children seemed so interested, and so frankly acknowledged the helpfulness of the work, that it seemed altogether worth while.

From a small town in Wisconsin, where much preliminary work needed to be done to stir the people's interest, comes this report of work courageously undertaken:

A city federation has been organized here and we have started the better-baby campaign, March 5 to 11.
We only had a committee of seven and no funds to work with, but we had free use of the newspapers, and our posters one lady kindly had printed at her own expense. Each of our churches had a Baby Sunday. The merchants decorated their windows. A local doctor gave a talk to mothers in each ward school and the program was furnished by the children. One ward had music.

Now we are having community singing in the high school to get the fathers and mothers both out, singing old songs, which are proving very popular, and everyone seems to enjoy the singing, the second meeting calling a larger crowd than the first.

We are also getting the mothers out evenings, a ward at a time, and have talks, music, little stories played out by the children, and serve light refreshments. We are going to work to get a visiting nurse now.

In Illinois a successful baby week was carried on by a club of farm women covering seven school districts. As a result of their work together, they plan to secure medical inspection of the schools and a school nurse. From a rural district in the State of Washington, comprising but 40 families, comes the report of a successful program. This community was represented by two or three clubs of a dozen members each, whose members lived sometimes 4 miles apart.

The report from a North Carolina mill town tells of a baby week which consisted of meetings for the mill mothers. The women were enthusiastic and wanted a club started. Although this town held one of the least expensive campaigns—they spent in all 35 cents—the results of their enterprise bid fair to rank on the list of significant achievements, for they plan to acquire both medical inspection and a district nurse.

County campaigns.

Under some circumstances the county, or a section of the county, rather than the town proved the logical unit in working out the baby-week celebration. For example, in several Pennsylvania counties the county organization of the civics department of the State federation of women’s clubs, with the assistance of the county medical society, the county organization of the W. C. T. U., and other agencies, organized campaigns on county lines. Sometimes, as in northern Westchester County, N. Y., the field of activity of the local organization—in this case the Visiting Nurse Association—was a section of the county. The great advantage of the county unit was that one exhibit served in rotation for a series of towns.

A slightly different form of county organization was that in which the small rural towns acted as feeders for the main celebration which was held in the county seat or main town. From Memphis, Tenn., comes an unusual report, showing how the celebration in a city may be participated in by the whole countryside:

The baby-week campaign in Shelby County was promoted by the Nineteenth Century Club and the Bureau of Farm Development, and it is a pleasure to report a campaign unique in several ways. First, The promoters secured the
cooperation of all organized bodies of Memphis and Shelby County, both men and women, the general committee being composed of one representative from each organization. Second, It was not just a city campaign but was countywide, 16 lecture centers were selected in the county and 3 in the city, and a general exhibit was held in Memphis. The women's clubs acted as hostesses at this general exhibit. Third, The campaign, which was fed by 16 rural centers, did not cost one cent, not even the expense of a postage stamp. The men in Memphis responded as enthusiastically as the women. One of the most interesting examples of the result of this spirit of cooperation was the large banner which was hung across the principal street. One man gave the canvas for the banner; another man took care of the printing; another man attended to the eyelets; a fourth furnished the rope; and still another placed the banner in position. Of course, the headquarters was offered free to the committee. One business concern furnished the ice, another the coal, and even the laundry work was taken care of without any expense to the committee. Our slogan, "Cooperation and Service," was carried out from start to finish.

The main exhibit hall was open for one week and the attendance was over 15,000; 50,000 bulletins were distributed and 400 babies were examined at clinics. The exhibit was solely an educational one, and three lectures each day were given. All stores throughout city and county displayed baby windows and used their daily newspaper space to advertise the baby week.

Baby week was very successful in all the rural cooperative clubs of Shelby County, with lectures and baby parades. The enclosed pictures may give you an idea of how they cooperated with the city exhibits by running baby specials for the baby clinics. (See illus. No. 2.)

From the Shelby County Cooperative Club come suggestions for a program which any grange would find suitable:

1. Each member to answer roll call with a good idea for the care of babies.
2. How can this community better its conditions for babies?
3. Report on sanitary conditions of the community which affect babies.
5. What do the school and the community offer in the way of playgrounds?
6. What does the community offer in the way of libraries?

The next report shows what was done in an enterprising Alabama county:

ONE-DAY CELEBRATION AT THE COURTHOUSE.

Our first baby day was held in Centerville, Bibb County, Ala. It was an enthusiastic day for the better-baby cause. We posted our town with handmade posters made of baby pictures and printed with crayons. We decorated the courthouse, where the speaking was held, darkened it as best we could and had magic lantern scenes and fine lectures on birth registration and talks by the president of the county medical association, before noon. Then a delightful dinner was served on the courthouse lawn by the ladies of the town to everyone present.

AUTOMOBILE RIDE, LECTURES, AND EXAMINATION OF BABIES.

As soon as dinner was over all of the mothers and babies were taken to ride in automobiles decorated with big pompons of baby colors in crêpe paper
BABY-WEEK CAMPAIGNS.

and pennants, "Save the kiddies" and "Save the babies." This ride was
thoroughly enjoyed.

After the ride the main lecture of the day was delivered by a baby specialist,
but before he spoke two of the Bibb County High School boys made fine
speeches on screening and sanitation. In the afternoon addresses were de-

divered to a packed house. The program for the whole day was fine. It was
educational throughout and delivered with enthusiastic spirit.

I gave the 100 small pennants, "Save the kiddies," to mothers only, and
I should say that we had 108 or 110 mothers, as my pennants gave out before
I got around to all. On the bulletin board in the courthouse the county
health officer wrote out the record of 44 babies examined. Counting out two
schools who were present in full in the afternoon, I should say we had 600
present.

HELP FROM EVERYONE.

The three churches helped with the preparations. The Boy Scouts and the
Bibb County High School helped wonderfully. They deserve praise. The boys
made the screened bed and helped all they could with the decorations, run-
ning errands, etc.

We had no infant-welfare exhibit because we were too late in applying for
one, but we had demonstrations of washing and dressing a baby and in pre-
paring its food.

We gave no plays to raise money; the citizens and doctors of the county
paid the bills, amounting to $34, and they did it gladly.

FOLLOW-UP WORK AND ITS EFFECT ON THE COUNTY.

As follow-up work we plan perfect birth registration in Bibb County and
two added laws requiring that our girls shall be taught by domestic-science
teachers the preparation of baby foods and have lectures during the school
year on infant and child welfare by physicians, nurses, and teachers; also the
continuation of the present health program by doctors. This follow-up work,
just mentioned, we are getting in shape now.

We are going to have another baby day at Marvel, Ala., in Bibb County, in
about a week. We are going to saturate Bibb County with the good-health and
better-baby idea. And it may be that Blocton, in this county, will also have
a baby day.

I only wish that the great success of our baby day would be an incentive
to other places to hold such meetings as we have had.

The following description of the celebration held at Tuskegee,
Ala., under the auspices of the Women's Club of the Tuskegee Nor-
mal and Industrial Institute, illustrates again how invaluable the
celebration in a town may be to the countryside.

We closed our campaign feeling sure that we had accomplished our pur-
pose. The whole town is interested in babies. We have shown the people the
need of better homes and better mothers and that, having these, there will
develop better communities and citizens. Our slogan was "Better babies,
better mothers, and a better community." We planned not only to help our
own community but to send out groups to the rural communities near by. The
teachers in these communities were the Tuskegee Normal and Industrial In-
stitute graduates. We had from the beginning their sympathy and support.
Each of these places was visited early in February and the teachers advised

Provided by the Maternal and Child Health Library, Georgetown University
as to the time and kind of meetings we wished to hold. We went as far as 10 miles to hold meetings. We sent the plans for the campaign to places in Mississippi and to a high school in Coosa County, Ala.

We had no money for the campaign and the time was short. We began the preparations in February. Everything needed was donated, from a nail to an automobile, and the women of the club gave their services. The Handicrafters' Club gave a white banner with "Better babies" in blue letters. The Mothers' Improvement Club, of the children's house, gave two bolts of ribbon. The Mothers' Club of the town of Tuskegee helped; all the departments of the school contributed to the campaign; the students were anxious to help and worked early and late. We had to present the club with a bill of only $4.

On Sunday at the institute the preaching service was excellent and set the keynote for the whole week; there was a women's meeting at 2 p.m. At the same hour meetings were held for little girls, for men, and for little boys, all of which were good. Our chaplain, the Y. M. C. A. secretary, two doctors, and a trained nurse had charge of these. The Sunday-school service and candle roll were held in three Greenwood churches in charge of ministers teaching in the Bible-training school. They each had a mother and some young women teachers to help. Preparedness for parenthood, and better children, morally, physically, and mentally, were the topics on Sunday, and they were so forcibly presented that all were impressed.

The ladies that went into the country carried nurses with them; the nurses gave demonstrations of how a baby should be bathed, and the ladies spoke of the need of preparing for motherhood and how women were looking at this subject today. You know in these places we meet the dear old-time nurses and they know they did their work well; these very women could see the need of the young women being taught and were deeply interested. We carried some literature, which was gratefully received. The best meetings were at Harris Barrett School and at Baldwin Farms. Our former head nurse carried a party out to the latter place. It was a very cold day and they had the wind in their faces all the way. The drive was 10 miles.

Our parade was a great success. It brought the family to the front and every man was proud of his wife and babies. I would recommend a parade for any campaign, if the community is a healthful one; the effect is inspiring. We had seven grades of the public school marching with placards on poles, saying "Don't kiss the baby," "Keep the flies off the baby," "Give the baby a drink of water," etc. We had the school band and an escort of officers from the battalion. A large national flag was carried and a banner of white with "Better babies" in blue; the banner was carried by a large boy and the ribbons held by four small girls. Then came the autos full of mothers and babies; the last two were an auto and autotuck full of kindergarten children; all the autos were decorated.

Having no place for an exhibit all the week, we took only one feature and that was foods. The head nurse from our hospital, assisted by four senior nurses, showed the right amount of milk to give a baby, and how to prepare it, and the daily meals for children from 1 to 3 years; we used placards to emphasize the feeding of the baby at this meeting; appropriate music was sung. This was Friday night. The Theft of Thistledown was most beautifully rendered Saturday night. We introduced a lot of fairies dressed in different colors trimmed with tinsel and stars; these fairies were trained to do different group dances and a solo dance for the amusement of the queen; we had two pieces of orchestra music, a short address, and then the play. The lesson of the play was well understood.
BABY-WEEK CAMPAIGNS.

We had the support of a physician, who spoke at the school and went out in the country twice; he is deeply interested in this work, as we all are here at the institute; much good work has been done along all health lines.

Our babies are truly better babies.

Campaigns in large cities.

The following report of baby week in Boston, held under the auspices of the Boston City Federation of Women’s Clubs, gives a good example of the decentralized method of handling the campaign, which apparently has proved most successful in large cities. Baby week in Boston is also an example of the fact that in a city where satisfactory baby-welfare work has been carried on for years the people actually engaged in these activities may well form the nucleus of the baby-week committees:

Nine of the 11 districts comprising Boston proper took part in the national baby-week campaign, March 4 to 11, 1916. These districts were: Boston, Central, South End, and North and West Ends; Charlestown; Dorchester; East Boston; Hyde Park; Jamaica Plain; Roxbury; South Boston; West Roxbury.

In Boston proper over 40 organizations cooperated; in Charlestown, 6; in Dorchester, 24; in East Boston, 10; in Hyde Park, 3; in Jamaica Plain, 3; in Roxbury, 14; in South Boston, 7; and in West Roxbury, 7.

Two hundred and fifty people served on the various campaign committees—23 in Boston proper; 35 in Charlestown; 75 in Dorchester; 50 in East Boston; 5 in Hyde Park; 8 in Jamaica Plain; 13 in Roxbury; 26 in South Boston; and 15 in West Roxbury.

The week’s program comprised baby-welfare exhibits and talks at three department stores; some of these talks were illustrated with stetoscopic slides, and all were followed by questions. There were public meetings at Ford Hall, Tremont Temple, and the public library. Child-welfare and public-health motion pictures were given at some of the motion-picture theaters. The baby button was sold on the streets, in hotels, and in stores. Groups from some districts were escorted to the central exhibits with interpreters. Large posters, flags, and literature were distributed in many neighborhoods. There were window exhibits in department and drug stores. A play was given in two districts (Roxbury and East Boston); fathers’ day was celebrated in one district (Roxbury). A baby conference was held in one district (Dorchester). The Milk and Baby Hygiene Association gave special talks and refreshments at its regular conferences. Altogether there were 107 meetings and talks—81 in Boston proper; 4 in Charlestown; 9 in Dorchester; 1 in East Boston; 2 in Hyde Park; 2 in Jamaica Plain; 5 in Roxbury; 1 in South Boston; and 2 in West Roxbury.

The following subjects were discussed at the meetings and talks: The meaning of baby week; prenatal care; care of the child at birth; care of the young child; public-health nurse; care of the mother before and at childbirth; relation of good housing, clean streets, and flies to baby welfare; relation of alcohol to baby welfare; recognition and prevention of contagious diseases in infancy; care of eyes, ears, nose, mouth, and skin of babies; mental training of young children; clean milk; birth registration.

Approximately 15,400 people attended the meetings and talks—10,870 in Boston proper; 420 in Charlestown; 1,260 in Dorchester; 230 in East Boston; 800 in Hyde Park; 65 in Jamaica Plain; 800 in Roxbury; 800 in South Boston; and 425 in West Roxbury.
Exhibits were loaned by the Massachusetts State Department of Health, Massachusetts Commission for the Blind, Boston City Board of Health, Tufts College Medical School, Infants' Hospital, Instructive District Nursing Association (loaned in triplicate), Women's Municipal League, Milk and Baby Hygiene Association, and Scientific Temperance Federation. These exhibits required 18,780 square feet of wall space and 1,731 square feet of floor space. In addition to these exhibits, which were in three department stores in Boston proper, nearly all the districts had exhibits, at meetings and in stores, of correct baby clothing, etc., and of appliances for feeding and bathing the baby. Roxbury devoted one room at the Norfolk House Center to this class of exhibits, with the addition of pictures of bathing, clothing, etc.

A children's meeting at the Bowdoin Square Theater was arranged for the first morning of baby week. Nearly 2,000 children attended, and enjoyed motion pictures and baby-welfare and public-health plays. The children retained their tickets of admission, upon the backs of which were printed the program for the ensuing week. Two plays were presented: Zona Gale's play, Neighbors, was given by the East Boston Home Club at one of its meetings, and at one of the Roxbury meetings was presented The Theft of Thistledown.

In addition to those mentioned above, baby-welfare and public-health motion pictures were given at meetings in Dorchester, Hyde Park, and South Boston. Demonstrations of dressing and bathing the baby were given in connection with all the exhibits.

Baby Sabbath and Baby Sunday were very generally marked by notices of baby week being read from the pulpits, with, in many cases, additional remarks by the officiating ministers. The opening day of baby week was celebrated as button day, and baby buttons were sold throughout the city, in the streets, hotels, and stores. Flag day, marked by the display of a flag in each house containing a baby under 1 year of age, was celebrated in East Boston. A fathers' day with a special meeting was celebrated in Roxbury.

Publicity was obtained through the newspapers, as well as through posters, flyers, and programs. Press notices were given by all the Boston Sunday and daily papers, including the Italian and Polish papers; and by the local papers in Charlestown, Dorchester, East Boston (including Jewish and Italian), Hyde Park, Jamaica Plain, and South Boston.

A baby-health conference was held in one district, Roxbury, at which 35 babies were examined.

No special printed matter was issued except the programs, flyers, posters, and tickets, but a great many copies of pamphlets were distributed. These pamphlets were Children's Bureau bulletins, Massachusetts State Department of Health pamphlets, Boston City Board of Health pamphlets (in four languages), Women's Municipal League pamphlets, Metropolitan Life Insurance Co.'s pamphlets (in four languages), and Milk and Baby Hygiene Association and Instructive District Nursing Association cards.

The hall of the Charlestown School Center was decorated with baby pictures loaned by the Boston Public Library.

The approximate expense of baby week in Boston was $764.24, divided as follows: Boston proper, $636.04; Charlestown, $4.20; Dorchester, $34.25; East Boston, $19; Hyde Park, $15; Jamaica Plain, $15; Roxbury, $15.75; South Boston, $15; and West Roxbury, $10.

Plans for follow-up work to promote baby welfare include intensive work along the lines already existing. In addition, Roxbury plans to hand the diagnosis of each child made by the doctors in charge of the baby conference to the neighborhood houses in whose district the child lives, for follow-up work. And South Boston has some publicity plans under way for April.
BABY-WEEK CAMPAIGNS.

The following account of the baby week held in Rockford, Ill., illustrates organization, committees, publicity, etc., for a city celebration carried out as a single unit. Rockford has a population of about 45,000, according to the Federal census of 1910.

Plans for Rockford's baby-week campaign were initiated by the woman's club, acting through its president and the chairman of its child-welfare committee. In their names, invitations for a preliminary meeting were sent to all the organizations in the city most likely to be interested in the project, including the city administration, represented by the mayor and the health commissioner, the county medical society, the city hospital, visiting nurses, public-welfare bureau, ministers' union, newspapers, chamber of commerce, superintendent of schools, all representative women's clubs, parent-teachers' associations, etc. The 40 invitations issued brought 40 acceptances, and the preliminary meeting, which took the form of a luncheon, developed much enthusiasm. Here temporary organization was effected, the president of the woman's club being chosen temporary chairman and empowered to appoint an executive committee to which all details of the enterprise should be intrusted.

The membership of this committee included the president of the woman's club, the president of the county medical society, the health commissioner, the superintendent of the city hospital, a professor of physiology from Rockford College, the superintendent of schools, and a representative each from the chamber of commerce (whose secretary also served on the committee), the ministers' union, and the four representative women's clubs. Chairmen of committees were appointed as follows:

- Exhibits, the professor of physiology in Rockford College.
- Finance, the health commissioner.
- Education and publicity, the president of the county medical society.
- Sunday observance, a member of the ministers' union.
- Demonstration and mothers' conferences, the superintendent of the city hospital.
- Building, a member of the chamber of commerce.

Beginning three weeks before the 4th of March daily articles concerning the purposes and import of baby week or dealing with one or another neglected phase of the care of the baby, were printed in the three local papers and continued up to the time of the opening of the exhibit. In addition one comprehensive article each was sent to the Swedish and German weeklies and to all the immediately adjoining country papers.

The actual observance of baby week began on the 5th, with addresses from the various pulpits. On Monday, Tuesday, and Wednesday the Boy Scouts carried a United States flag into every home in the city where there was a baby under 1 year old whose birth had been registered. With the flag a pamphlet on the care of the baby was sent into every English-speaking home and a leaflet, locally prepared and printed in English, Swedish, Polish, and Italian, into every home where one of these languages was spoken. Inserted in these was an invitation to the baby-welfare exhibit. Twelve hundred baby buttons, paid for by the physicians and druggists, were given away during the week, and 300 attractive posters were put up about the city. On Tuesday afternoon the executive secretary of the Infant Welfare Association of Chicago delivered an address before the woman's club and its invited guests. Throughout the week the newspapers printed educational articles, fly-pest and birth-registration motion pictures were shown at the local theater houses, and the merchants of the city dressed their windows with baby goods.
The baby-welfare exhibit was formally opened Wednesday evening, with addresses by the mayor, the president of the county medical society, and the superintendent of the city hospital, and there was an attendance of 225 people in the hour and a half during which it was kept open. Evidently all of these 225 turned boosters for the cause, as the attendance increased steadily, reaching its climax on Saturday, when 3,800 visitors were recorded. Numerous requests to keep open at least one more day caused the committee to open the doors again on Sunday noon, and when they closed them at 10 o'clock that evening the attendance for the three and a half days totaled 9,606 people. Mothers' conferences, in charge of the visiting nurses and a committee of doctors, were held each afternoon from 2 until 4 o'clock, and each evening talks were made by physicians in a separate room. Both features proved very popular, and our quarters were inadequate for the people who desired to attend them. Throughout the exhibit trained nurses were constantly on hand to demonstrate and answer questions, and rotary committees from the various women's clubs took charge of the attendance.

The serious and interested attitude of the people visiting the exhibit was particularly impressive. It was an excellent exhibit, broad enough and ingenious enough to appeal to the many kinds of people who viewed it; nevertheless the uniform interest and seriousness with which toothless grandmothers, young mothers with babies in their arms, high-school boys, solemn husbands innumerable, "little mothers," and small boys regarded it filled us with surprise as well as gratification. The thing was an astonishing success, and it was a success because the people welcomed it eagerly.

Our expenditures amounted to $350.57. They were kept down to this very low figure by our success in getting all the work done by volunteers. Experts were chosen to head each committee, the best resources of the city being freely drawn upon. The wall panels were designed and executed entirely without cost, the necessary research work and the lettering and sketching being done by volunteers; the Rockford leaflet was written by local physicians and translated into three languages by local priests; all secretarial work was done without charge, and the use of the rooms in which the exhibit was held was given by the W. C. T. U. The exhibit consisted of electrical devices loaned by the State, still models, wall panels, cartoons, three-dimension exhibits, and living demonstrations.

Follow-up work to be done this year will include:

A committee that will endeavor to have the State law in regard to birth registration enforced and will mail a Rockford leaflet to each new baby whose birth is registered.

A committee to investigate and make recommendations concerning Rockford's midwife problem.

The establishment of a permanent baby-saving station in the most crowded part of the city, where mothers' conferences, in charge of a doctor and the visiting nurses, will be held regularly throughout the year. Plans for this are already advanced, and its establishment is virtually assured.

A committee to cooperate with the city health department in inspecting the handling of milk in the city.

A few cities have published printed reports of their baby-week campaigns. These include the following:

Greater New York Baby Week, published by the New York Milk Committee, 105 East Twenty-second Street, New York City.

Philadelphia's Baby Week, published by the executive committee of the Philadelphia baby week. Copies may be obtained from the...
director of the department of public health and charities, City Hall, Philadelphia, Pa.

Los Ángeles Celebration, Nation-Wide Baby Week, published by executive committee nation-wide baby week, Dr. Maud Wilde, chairman, 1457 Calumet Avenue, Los Angeles, Cal.

STATE CAMPAIGNS.

The State agencies most prominent in stimulating local communities to celebrate baby week were the State federations of women's clubs, the State boards or departments of health, and the extension divisions of State universities or agricultural colleges. Frequently other State organizations threw their resources into the work. While there were many successful local campaigns in States where no Statewide plan was developed, the States where two or more agencies worked together and plans were well outlined some time in advance show the largest numbers of uniformly good celebrations.

Governors' proclamations.

In many States the governors issued proclamations. The following is an example:

Through the activity of the Federal Children's Bureau and the General Federation of Women's Clubs great interest has been aroused the country over in the children's welfare movement. In our State many civic organizations and other associations, including the Ohio Federation of Women's Clubs and the Ohio State Board of Health, have given it enthusiastic cooperation and support. The welfare of the child is of the most vital importance to the perpetuity of our Nation and the advancement of our civilization. Infant mortality must be and can be reduced.

In cities of the United States the death rate among infants less than 1 year of age ranges from 70 per 1,000 to 150 per 1,000. That is, in some localities one-fourth of the babies die before they reach the age of 1 year. This frightful loss of life must be reduced; so far as possible, the "slaughter of the innocents" must be stopped.

Careful investigation is convincing to anyone that a large percentage of the infant mortality everywhere could be prevented by more adequate knowledge, more adequate attention to the problems of the morning of life. A high infant mortality rate means to the State and to the Nation pain and sorrow and economic waste that we can and must to a larger degree prevent. Every family, every community, every subdivision of the State, and the State itself is vitally concerned in any movement looking toward the improvement of conditions affecting child life.

It is therefore with a special interest and in hearty cooperation with the Federal Children's Bureau, the Ohio Federation of Women's Clubs, and the Ohio State Board of Health that, as governor of the State of Ohio, I designate the week beginning on March 4, 1916, as baby week, and the date of Friday, March 10, as a special school day in which the consideration of child welfare shall be uppermost in our schools, and I commend to the citizens of Ohio careful consideration of this important problem.
What State federations of women’s clubs did.

To the women’s organizations of the country belongs the chief credit for the widespread popularity of baby week. In some States a special baby-week chairman was appointed by the State Federation of Women’s Clubs. Elsewhere the president of the federation undertook the work, or the State chairman of civics, home economics, or public health was assigned to the baby-week campaign. A valuable service was performed by these State chairmen in gathering information from the Federal Children’s Bureau, the State boards of health, and the extension divisions of State universities and agricultural colleges; in giving publicity to the kinds of assistance that were available from the various State agencies; and in writing to individual clubs in different parts of the State and offering suggestions and model programs suited to local conditions.

STATE-WIDE PUBLICITY.

The following letter, circulated in Missouri, illustrates the type of letter sent out by State chairmen to each federated club in a State:

January 18, 1916.

Dear Madam: For the first time in the history of our country the women of the United States are asked by the Government to do a definite thing. The Children’s Bureau, Washington, D. C., asks every community in our land to set aside some week this spring for baby week. The week chosen is March 4 to 11. If that week does not suit your local conditions, any other week may be chosen.

In cooperation with the General Federation of Women’s Clubs and the American Medical Association this week is to be made national. One hundred million people are to be made to give some thought to the importance of babies. We hope that every house in all our country that can boast a baby under 3 years of age will signify this fact by placing on “the lintel and the two side posts” an American flag. This will say to the world, We have a baby, and we are trying to give it the best we can.

We must not stop with that. It must be made a week of community education on baby welfare. Every phase of baby care and culture must be illustrated and discussed.

Each club willing to devote this week or part of a week to work for the babies of its community should send a letter or postal addressed to the Children’s Bureau, Washington, D. C., asking for directions and assistance, which will be sent you free of charge. While you are waiting for this bulletin to come, appoint the following committees: 1. General management; 2. Program; 3. Advertising and publicity; 4. Exhibits; 5. Medical examinations; 6. Window displays of all firms—drugs, groceries, clothing, books, amusements, furniture, etc.

This should be made a community affair, with the club women as leaders. Enlist the cooperation of every club woman in your town. Assign definite things to each organization, and the result will be an educational movement that shall bring much good to the whole community and in particular to the babies.
In New York State, with its many crowded centers of population, this letter of specific suggestions was used:

The following are some suggestions as to the special way that clubs can carry out the baby-week program:

1. Begin at once to secure the interest and cooperation of the public. Make a health survey of conditions in your community (have it ready to report in baby week) in regard to the following points: (a) Birth registration in 1915; were all the babies registered? (b) How many births were attended by midwives? (c) Mortality rate under 1 year; under 5 years? (d) Kind of milk used? Number of breast-fed babies? Any cases of ophthalmia neonatorum or tuberculosis among infants? Any poor health conditions in your city or village?

2. Have a baby exhibit. Secure one from the State if possible. This will not be possible in all places; but in every community a room can be secured and a nurse or intelligent mother put in charge. Into this room put a crib with a big doll in it, dressed as a baby should be. Secure charts and literature—as much as you can. Ask the State department of health for leaflets on prenatal care of mothers, proper care of infants, food, etc. Write to the Children’s Bureau, Washington, D. C., and ask it to send helpful literature.

3. Sunday, March 5, have prepared a concise statement of the object of baby week with the location of your baby exhibit, stating what there is for mothers to see and learn. Ask each clergyman in your community to read this to his congregation, and urge the mothers to visit the exhibit.

4. Arrange to have as many lectures given during the week as possible. Start a crusade for a pasteurized milk supply (if you do not have it). Dr. Herman M. Biggs, State health commissioner, approves and strongly recommends the use of pasteurized milk in order to prevent deaths of infants as well as epidemics of typhoid, scarlet fever, and diphtheria.

5. Have a demonstration day. Demonstrate how to prepare foods for babies; how to wash, dress, and care for them in the best way.

6. Have a baby-clinic day. Secure the cooperation of physicians and nurses and give free examinations and advice to all mothers who will bring their babies to the baby exhibit.

7. Study and conference day. Study carefully the results of your health survey and the results of baby week. Confer with all organizations interested in a better community life. By carefully looking over the results, the weakest spots in local health work will become apparent, and by conference with all interested you can plan an effective remedy.

It is the earnest wish of the chairman of the public-health committee that every club in the State should observe baby week. If you can not carry out the entire plan, do as much as possible.

Another State chairman in Missouri sent an attractively printed card to the newspaper editors of the State, which served at once as an announcement and as an effective appeal for help:
TO THE EDITOR.

We need your cooperation in this Nation-Wide Baby-Week Campaign

March 4-11.

You are the Torch that must go into every home and lead the way. Please ask the mayor of your town to issue a proclamation asking the cooperation of every citizen in the movement. Better Babies means a Better Nation. It is easier, better, and cheaper to prevent than to cure disease. I thank you for your past cooperation in our civic and health work.

(Signed) ___
Chairman.

In Mississippi the State federation called on the governor for a proclamation, arranged that news of the campaign be published in every daily paper in the State, and offered a prize for the best slogan.

COOPERATION WITH OTHER STATE ORGANIZATIONS.

The Wisconsin State campaign illustrates how the State federations and other State agencies cooperated. In November a circular letter was sent by the president of the State federation not only to federated clubs but also to interested women in towns where there were no federated clubs urging prompt action and giving the addresses of State organizations which would supply baby-week material and suggesting where speakers might be secured. Later a message on baby week was sent around again through the federation bulletin. Shortly afterwards the president reported:

I have written to various organizations and have received favorable replies promising active cooperation from the State health departments, the university-extension department, the library commission, and the Wisconsin Anti-Tuberculosis Association. They will furnish material and speakers. Probably I shall later receive replies from appeals for cooperation to other organizations.

In many States the chairman of the committee on home economics of the State federation was on the staff of the State agricultural college. This meant especially close cooperation between these two bodies, as in Nebraska, where the chairman, through her double affiliation, reached 200 unfederated women's clubs, of which 30 were rural and one 30 miles from the railroad.

PUBLISHING INFANT MORTALITY FIGURES.

The State chairman in Rhode Island sent out a printed notice devoted to the subject of baby death rates everywhere. With it she inclosed the table of infant mortality in Rhode Island towns,
which the State health department had compiled at the request of the baby-week committee and which supplied excellent arguments for local campaigns. (See p. 44.)

SECURING REPORTS OF LOCAL CAMPAIGNS.

After baby week was over, the State federation officers undertook to secure reports from each community. For example, the following letter, sent out by the State chairman in North Dakota, brought prompt and full answers, which were afterwards published in a special baby-week number of a local magazine:

Baby week in North Dakota has been a glorious success. Just how successful we can not tell until we get in the reports from all the clubs.

Will you please send me by return mail a complete report of everything that took place in your town in honor of baby week. What was the dominant note in the addresses given during the week? Please do not leave out anything: sermons, store decorations, newspaper publicity, exhibits, schools, club news will all be interesting.

I would like very much to have your report by March 17 at the latest. Write me whether you observed the week or not.

What State universities and agricultural colleges did.

Throughout the country the State universities and agricultural colleges gave invaluable aid. Speakers were sent from the faculties of the State universities, and the State agents of the agricultural colleges cooperated in local campaigns by turning attention to the baby's interests in their extension courses, farmers' weeks, and home makers' club work during baby week.

The following examples of the baby-week activities of a few State universities and agricultural colleges are merely typical of many.

The extension service of the University of Nebraska sent an outline of suggestions to 330 clubs. It assisted high-school teachers in preparing school celebrations, and it cooperated with women's clubs in constructing an exhibit which was circulated throughout the State after baby week. In Kansas the State agricultural college cooperated with the division of child hygiene of the State board of health in circulating board of health leaflets and pamphlets. The agricultural college itself prepared two series of slides, with accompanying lectures, which were sent out on circuit to ministers and reached 20 communities. More than 2,200 programs were distributed by the college among Kansas home makers' clubs.

The University of Texas sent baby-week circulars and leaflets to 87 communities and programs for schoolhouse meetings to about 1,500 communities. The Agricultural and Mechanical College of Texas supplied outlines for a baby week in rural communities and sent lecturers to 15 places. A few other State universities, notably
that of Wisconsin, supplied exhibit material, and several issued special pamphlets. The New York State College of Agriculture at Cornell University, for example, published bulletins on the preparation of food for little children, which were distributed at many baby-week exhibits.

The University of California Medical School authorities took an active part in campaigns in near-by communities. The Seattle baby-week exhibit included a model nursery prepared by the University of Washington.

The hearty good will expressed in the following letters from the extension professor of home economics of the Iowa State College and the director of the extension division of the Iowa State University is typical of the interest shown by colleges and universities in many States.

I am most happy to indorse the campaign for baby week. We shall be able to boost for it, since there are eight women on the road all the time. I shall be glad to have posters made and shall place these in every classroom, from now until March 4. This will call the matter to the attention of at least 13,000 women. Each woman in our extension department will be glad to spend some time each week explaining the plan and its purpose.

We shall be able to supply outlines for study and copies of literature on the care of children. You may count upon the most hearty cooperation from each member of our home economics extension staff.

...I am glad to have your communication of October 28, relative to the nation-wide baby week, March 4 to 11, 1916. This division will be glad to cooperate with the women's clubs of Iowa for this week. We are duplicating our charts so that we now have available several sets of charts dealing with child welfare which can be used that week. Additional charts will be made as rapidly as possible. I hope to double the number of charts that we now have before that time.

The division stands ready to furnish the services of two trained physicians to be of service in this baby week also. Beyond this we have nothing available, owing to our limited amount of money.

The exhibit material, etc., which State universities and agricultural colleges report that they have for lending or for distribution, and the other kinds of assistance which they are prepared to render, are listed in the appendix, page 121.

**What State health officers did.**

Most of the State health officers saw in the proposed baby week an opportunity for carrying out educational work for infant welfare and promised the help of their departments. Many, however, on account of lack of appropriation, were unable to do very much. One New England health officer, who could not supply material in 1916, writes that he has now acquired exhibits, slides, and printed matter...
for distribution and is ready to help. Doubtless with others the situation is similar.

Members of the State boards or departments of health offered their services as lecturers in many places. Florida detailed district assistants to help in local campaigns. In Indiana multigraphed circulars of suggestions were mailed in large numbers. Some State health officers identified themselves with the local celebration in the capital of the State and devoted their efforts to helping to perfect the program of one city.

Lantern slides and motion-picture films dealing with baby-health matters were supplied. Sometimes the latter took the form of very effective dramas; in one State the films were shown by the commercial motion-picture houses when not in use by the baby-week committee. Many State health departments lent exhibits or partial exhibits.

Baby weeks were usually celebrated at the same date throughout the State, and the difficulty of getting up exhibits in a form sufficiently inexpensive to be reproduced many times was a tax on ingenuity. The commissioner of health of Pennsylvania, who believes that it is wholesome for every town to construct part of its own exhibit locally, had inexpensive incomplete exhibits which he supplied to 24 localities in one week. In all there was enough of this material to cover 1,000 feet of wall space. It consisted of photographer's blue prints of charts and diagrams which were posted up unframed with push pins or framed in inexpensive white muslin and put up with tacks. (See illus. No. 11.) In Kansas an even cheaper form of exhibit, reproducible in great quantities, was printed on colored paper of the quality that is used for newspapers. A set of 12 such posters was sent free upon request to any resident of the State. In some communities these were mounted on stiff cardboard and used unframed; in others the material was copied by a sign painter in any desired color, and sometimes with variations in form. The Florida Department of Health sent out a series of small exhibits by parcel post.

A number of health departments issued special leaflets on baby care, sometimes in several languages, for use by local committees.

Many of the monthly health department bulletins issued in March took the form of a special baby number, which was widely distributed. Besides the publicity given through these bulletins, many departments supplied the newspapers throughout the State with news stories about the State campaign and with suggestions for local campaigns. In Illinois, for example, a press story was sent out not only to the newspapers but to women's organizations and presidents of the county medical societies, giving very full directions for holding a
baby-week celebration and setting forth at length the value of baby-
health conferences. The Wisconsin health authorities employed a
trained newspaper man for their baby-week publicity. The New
Jersey Department of Health had the advantage of a special bureau
of education and publicity, and not only circulated press material
through local committees but reached directly the Trenton corre-
spondents of newspapers published throughout the State.

One of the most valuable contributions made by the State health
authorities was the preparation of statistical material on baby death
rates. Such data showing the contrasts among towns and among
counties proved an effective stimulus for those with bad records. In
one State, Oregon, the State health officer wrote to club women asking
them to use baby week as an opportunity to help make the birth-
registration law effective.

STATE DIVISIONS OR BUREAUS OF CHILD HYGIENE.

In the four States having distinct bureaus or divisions of child
hygiene valuable work was done by these departments. The division
of child hygiene of the New York State Department of Health
assisted by lending exhibit material, supplying speakers, helping in
the general publicity campaign, and carrying on an extensive cor-
respondence with committees in all parts of the State. The director
of this division in Ohio visited 15 communities and, in order to stimu-
late interest in the campaign, gave 40 addresses in advance of baby
week. In Kansas the division of child hygiene supplied posters,
outlines, and suggestions for lectures to 122 communities within the
State and 37 communities in 22 other States. The chief of the divi-
sion visited many cities and towns and helped in the organization of
baby-week campaigns and baby-health conferences.

The division of child hygiene and other branches of the New
Jersey State Department of Health not only prepared the publicity
material referred to above, but sent out lecturers from the depart-
ment and printed three leaflets, of which 350,000 copies were dis-
tributed.

In Massachusetts a subdivision of the State department of health
devoted solely to the interests of children supplied 8 lecturers, who
gave 44 lectures in 11 communities and contributed 44 sets of lan-
tern slides, 8 motion-picture films, and a large quantity of printed
matter on baby care.

The exhibit material, lantern slides, and other forms of assist-
ance which State departments of health can supply for local cam-
paings are listed in the appendix, page 121.
BABY-WEEK CAMPAIGNS.

DETAILS OF BABY-WEEK PROGRAMS.

Program of days.

Some communities celebrated the whole week; in others baby week lasted one day or three or five days. The seven-day programs usually ran about as follows: Flag day, Baby Sunday, school day, fathers' day, outing day, visiting day, and birth-registration day. Baby Sabbath was also celebrated in many cities.

This general program was varied in some towns by a tag day; one featured a rural mothers' day, one a merchants' baby booster day, one a recognition day (when business houses put out flags and everyone interested was asked to wear a flower), and one had a baby button day. In North Dakota the general plan was to call flag day advertising day, and concentrate that day on letting everybody know what was coming. The program of a middle western city was: Baby Sunday, daddy's day, mother's day, the baby's day, home day, welfare day, parade day.

The Illinois State program began with inauguration day, on which a mass meeting was held and headquarters opened. Fathers' day there was converted into fathers' and sons' day; there was a mothers' day, little mothers' day, demonstration day, and community day. The most significant variation made in Illinois was the permanent organization day held the final Saturday. On this day the executive committee and active workers had a meeting to make plans for the future.

FLAG DAY.

Flag day was usually the first day of the celebration, or, in some cases, the day before baby week opened. The object of flag day was to see that every house where a baby lived put out a flag and kept it flying throughout the week. One Missouri town, on the other hand, asked the parents to wear flags instead of flying them from the windows.

The flags adopted by the different towns varied widely. Some were symbolic in color and design, as in an Indiana town, where gold lettering on a white ground signified our most precious asset—the baby. Grand Forks, N. Dak., had pink and blue paper-muslin pennants—presumably for girls and boys, respectively—and the slogan “Grand babies for Grand Forks” printed in black letters. An Ohio town had a flag with a blue star; another Ohio town used a white felt pennant with its slogan printed thereon; and Milwaukee had an effective blue felt pennant bearing heavy white stenciled lettering. Many towns did not design a special flag for the occasion, but used small American flags.
Boy Scouts distributed the flags admirably in many towns. In
a Missouri city the distribution was facilitated and the expenses
shared by the local chapter of the Daughters of the American Revo-
lution, which presented American flags to all school children in
whose families there were babies. One Ohio town enlisted the in-
terest of the fire department so that the firemen did the distributing.

Since the aim of flag day was to see that every baby had an
emblem in his honor flying at his window, it afforded an excellent
opportunity to find babies whose births had not been registered.

In many communities leaflets or pamphlets on baby care or pro-
grams of the local baby week were distributed with the flags. A
letter that went to the mothers in a Texas city, with the flags and
the leaflets on baby care, read as follows:

A LETTER TO THE MOTHERS OF BABIES.

The committee on banners for baby week presents you with a pennant and
asks you to display it in your window in honor of your baby.

Each home where there is a baby under 1 year old will have this to show
that all are thinking and working for the best things for the babies.

Bring your baby in its baby buggy or gocart or in your arms, with this banner,
to the park on Saturday afternoon, March 11, and be in the best parade our
city has ever had. There will be no horses or automobiles allowed, and all
traffic over the line of march, which is not long, will be suspended in honor
of our city's children. The parade starts from the park at 2:30 o'clock.

You are also invited to the exhibits and demonstrations March 9 and 10, in
the city hall, and to all the special entertainments in the high-school auditorium. On Wednesday, March 8, from 3 to 5 o'clock, the Civic Club will enten-
tain the babies up to the age of 3 years, and their mothers, in the park.

Watch the newspaper for announcements of baby week.

BABY SUNDAY.

Baby Sunday was generally observed by an announcement of baby
week and its purposes from the pulpits of various religious bodies;
frequently by the reading of the governor's or mayor's proclamation.
In some cases sermons on baby welfare were preached. Physicians
were invited to occupy pulpits on Sunday evening in several Illinois
communities.

Sunday-school celebrations proved very popular.

FATHERS' DAY.

In manufacturing towns fathers' day was celebrated by holding
shop meetings with good speakers to address fathers on the whole
question of what the community owes to its babies, with special
reference to local conditions, good and bad. In New York City
and in another city in New York State the woman-suffrage organi-
BABY-WEEK CAMPAIGNS.

Organizations made their street meetings on that day bear on the obligations of the voting father toward the home. One city had a special baby-week button for fathers.

Several towns were very successful in getting physicians to address fathers’ meetings on the social evil and its effect on children.

The press gave invaluable help by printing the message to fathers which was prepared for fathers’ day. The State health officer of Rhode Island published a message to fathers in the form of an attractive leaflet with a baby picture at the top of the page and below it the State slogan, “A square deal for Rhode Island babies.” A widely popular message to fathers was that adapted from one used originally in Pittsburgh. (See Appendix, p. 138, and illus. No. 9.)

OUTING DAY.

An outing day proved popular in towns which celebrated later in the year than March. The usual plan was for the committee to collect all the automobiles it could borrow and fill them with mothers and babies. One city made a combination of outing day and visiting day; parties of mothers and babies were taken in automobiles to visit the baby camps maintained in one of the suburbs.

The material on this subject is meager, because in 1916 most of the celebrations were held in March and in many parts of the country such expeditions are appropriate only to a later season.

VISITING DAY AND PARADES.

Parades, sometimes combined with visits to infant-welfare stations, were reported from several cities. Boy Scouts and members of Little Mothers’ Leagues, trained nurses, and others who were helping in the celebration were among those who marched in parades. Banners and labels voicing local needs were used effectively. In one Massachusetts town a fine looking baby wore a label stating, “I am a milk-station baby.”

A Texas town parade which was very well managed led off with the mayor and city council and ended with babies. Here the rulings and order of march were published in the papers in advance. An automobile parade in St. Louis was similarly arranged, and included a tour of inspection of the municipal milk stations. Another Texas town had a parade of automobiles in which each women’s club had a car, and these vied with each other in decorations. Small sons and daughters of the members rode in the club cars. One car was decorated in the club colors, green and white. Another was done in red, white, and blue and shaped like a baby carriage. All were gay with flags and slogans. Some parades were much simpler, with babies riding in baby carriages instead of in automobiles. In a Colorado town there was a squad of older children also, riding on tricycles.
BABY-WEEK CAMPAIGNS.

Here is a newspaper report of a successful parade held in Louisiana:

**SPLENDID PARADE SATURDAY CLOSED BABY-WEEK OBSERVANCE.**

Babies to right of us,
Babies to left of us,
Babies in front of us,
Babies enough to dazzle us,
God bless 'em.
So say we, all of us.

Saturday afternoon was ideal, when the babies of our city passed in review before as deeply interested a gathering as ever lined both sides of Ryan Street from the city hall to Mill Street.

Headed by the Royal Orchestra, then in turn by a detachment of the city police under the chief, the mayor, the commissioner of finance, and the commissioner of streets, the parade "fell into line" at the city hall, and under the helpful escort of the Boy Scouts wended its way north to Mill Street and countermarched to the city hall.

In beautiful floats, in push carts, in buggies, on tricycle, on bicycle, in toy automobile, and afoot, each individual holding a tiny flag, a thousand hearts beat happily as they passed through a street literally lined with admiring and cheering townfolk.

And the banners they carried were cheered to the echo, while the one at the head of the on-foot division, "Louisiana babies' first plea: Doctor, I want a record for me," seemed to act on the viewers as a plea for protection.

**SCHOOL DAY AND SCHOOL COOPERATION.**

The 1916 celebration proves that an enthusiastic interest in baby week on the part of school officials is highly important to the best success of a campaign. In many cases where the school officials understood the significance of baby week and cooperated actively an effective program was carried out almost without any other help. A New Mexico town, for example, celebrated only in the schools, bringing in mission schools and schools in the surrounding country, and was very successful.

In many towns the school auditorium was used for meetings. It appears that mothers brought their babies more readily to a school than to any other building for a conference. A Michigan town, for example, held its whole celebration in the school auditorium. The children wrote invitations to their mothers to come to a meeting. Eight hundred mothers came, and at that meeting the invitation was distributed for a fathers' meeting later in the week, which brought out an attendance of 600 to 700.

The school children frequently acted as distributing agents for programs and invitations to special meetings. A Wisconsin town issued a better-babies bookmark, with lists of books on baby care, and gave the bookmarks to the school children to take home. All the books mentioned were obtainable at the town library.
The pupils of both high schools and grammar schools did, in many communities, a large amount of valuable work in aid of the baby-week committee. Thus in a New England city the printing for the baby-week committee was done by the boys of the manual training school and the typewriting at the high school. Of course any assistance given by school children served to arouse their interest in the campaign.

A number of towns held contests in poster making in the schools. In several Illinois towns the school children made the posters and handbills; and the report from one town says that the posters made in the high school "were really works of art." In a Wisconsin city 3,700 handmade programs were printed, painted, and presented by the school pupils, and each program bore the name, grade, and school of its author on the back. These schools also had a poster competition.

Many school-day celebrations were admirably worked out. They varied from a lecture on the care of the baby, read to the class by each teacher, to the giving of a play by the children. (See Appendix, pp. 113 and 134.) Some teachers, especially of younger children, emphasized the care of the teeth. In one New York town the teacher organized a "toothbrush brigade," with prizes for the cleanest teeth. In schools where Little Mothers' Leagues were already formed the program usually consisted of demonstrations on the care of the baby.

If prize essays were read, a play performed, or demonstrations given by the school children, parents were usually invited.

This is the description one little girl wrote of the day's exercises in her school:

...Last week we had what you would call a baby week. This was very interesting, as we had a lesson about it in our domestic science. We had charts all around the room about the food for the baby at its different ages; we had some pictures of beautiful children; there was a baby's outfit; there were some books on the care of children; there were also two baby's dresses, one which was very beautiful, made by our domestic-science teacher. We had a table in the center of the room with all the materials needed in giving the baby its bath. On the side of the room was another table with the materials needed in keeping the bottles sterilized, and we were shown the way of keeping them perfectly clean.

In our domestic-science lesson we had our school nurse to show us the proper way of bathing and dressing the baby and all about the correct temperature of the body. The teacher told us about the proper food we should give the baby at different ages. Samples of breakfasts for these children were shown.

In the afternoon the mothers came and heard a few remarks made by our dental nurse on the proper care of the children's teeth. There were some little children from the primary department who have a perfect set of teeth. They have been treated by our school dentist. They showed us how they brush their teeth. They had a napkin pinned on them, a paper cup in one hand, and their toothbrush in the other hand, and were scrubbing away when
a photographer snapped their picture. We had a baby there, too, and we put
her in the tub and had a towel around her and pretended she had just had her
bath when the photographer took her picture.

This ended our baby week in our school, which, I think, was interesting and
enjoyed by all.

On the whole, the most popular way to celebrate school day was
by the writing of essays. The offering of a simple prize often stim-
ulated all the pupils to learn as much as they could about the
baby. In one instance a boy carried off the prize for the best essay
on this subject. Prizes were given by various people—for example,
by the civic club in a Maryland town, and in a Kentucky town by
the doctor who delivered the lecture from which the essays were
written. One Rhode Island town had two prizes, a fountain pen
for the best essay by a grammar-school girl and an inexpensive
watch for the best poster by a boy.

Perhaps better than prizes was the plan hit upon by a New York
town. Here the children's essays were based on extracts read to
them by the teacher from the baby-week literature of the State
health department. The best essays were read aloud at a meeting
to which the mothers came and were afterwards published in the
papers.

The following essay was written by a 12-year-old school girl:

THE CARE OF THE BABY.

The later life of the baby depends on the care it is given when it is young.
It should be well cared for when young if it will be a healthy child when
larger. The baby should have a bath every morning. It should have some
one to take it for a walk in the fresh air; or, if it is too small to walk, sister
can give it a ride in the baby buggy. The nursery, or room that the baby
occupies, should be well ventilated. It should have no curtains or draperies
that will catch germs. The baby should sleep in its crib or bed by itself.
The bottle should be washed and cleaned thoroughly before it is given to
the baby. The milk should be pasteurized so as to purify it for the baby's
use. When the baby drops its bottle some mothers pick it up, wipe it off, and
give it back to the baby. It should be washed before it is given to the baby
again. The nipple will carry germs unless it is kept clean. When the baby
cries some people shake it and tell it the goblins will get it—and other stories
that scare it—if it does not hush. When he gets older he will have the same
feeling. When he is in the dark he has a creepy feeling as if the goblins
were after him right then. It gets on his nerves, and he can not forget it.
When the baby cries it is not always hungry or bad; its shoe may hurt,
or its clothing may be too tight, or something else. We should try to find
out what the pain is. Sometimes the milk is left standing in the window
where the sun can shine on it; the baby cries; we give the bottle to him with-
out tasting it to see if it is sour. This overloads the baby's stomach with sour
milk and may make him sick. We should never put anything on the floor where
the baby can get it; if it does, it will put it in its mouth as soon as it gets
it. It may get a pin and swallow it. When we have a sore throat or a cold,
BABY-WEEK CAMPAIGNS.

we should not go home and kiss the baby and play with it until we have washed our face and our hands and our hair. We will give it to the baby in this way. We should always be kind to the baby. We should never speak in an angry tone or scare it. Kindness is a good thing to practice with the baby.

A school nurse in a Wisconsin town has sent a report which is full of suggestion for other communities:

As a result of baby week I gave four talks to the girls in the continuation school—about 50 girls who stay at home to help mothers or work out or in factories. A few of them were full-time pupils, but many of them go to school four hours a week. The ages were from 14 to 17; a few below.

1. Baby's bath and clothing. I had a large doll, with tub, blankets, soap, boric-acid solution, etc. The clothes were borrowed, and were made of good, plain material that people of small means could afford to have.
2. Care of eyes, ears, nose, and throat; exercise and sleep.
3. Feeding of baby. (a) Natural; (b) artificial—care of milk, modification of milk; prepared foods, uses and abuses.
4. Observation of well and sick baby.

The last day was spent mostly in answering questions the girls had written on slips. I am sure many of them came from the mothers.

This course proved so popular that the girls in the eighth grade wanted me to repeat the talks. Next year this will be given in connection with the domestic-science work in the continuation school and the eighth grades in the public schools. Some of the principals and I have decided that our domestic-science work is lacking in just this work of preparing the girls for home makers. We got some of our ideas from the New York schools.

Another Wisconsin town, which celebrated a little brother and sister day instead of school day, sends the following report from one of the adjoining rural schools:

LITTLE BROTHER AND SISTER DAY.

In making preparations for our little brother and sister day program at school I explained as best I could the purpose of the week and asked them to bring all the pictures they could of babies.

The week before I sent in the names of the families in the neighborhood, and they received booklets on infant care.

During the week the B class, after reading and talking about care of the teeth and what constitutes good health in general, wrote compositions on “How to keep well.”

The C class, children from 7 to 9, had a lively discussion on “How to keep baby well,” and wrote all they could about it later.

On Friday, March 10, we put up our pictures. One board we covered with prize winners, and we wrote what made them so in colored crayons. On another board we put a large picture of a baby and the slogan. On another “Fresh-air babies.” Others we arranged on the walls.

Our program consisted of songs, recitations, and a health dialogue entitled “Mother Goose up to date,” a talk explaining the week and baby problems, distribution of literature to mothers, and light lunch.
BABY-WEEK CAMPAIGNS.

BIRTH-REGISTRATION DAY.

Many communities devised ways of popularizing the subject of better birth registration and centered the interest of the campaign upon it for a day or longer. Where a birth-registration canvass had been made beforehand (see p. 43) the results were usually printed in the newspapers or made the subject of special addresses on birth-registration day.

In Cleveland the health authorities adopted as a baby-week feature a practice which has now become a permanent part of the work of the department. This consisted in supplying the mothers of babies born in 1916 with certificates showing that their babies' births had been registered. The newspapers gave wide publicity to the fact that the mayor would personally present the certificate to the first mother who applied for it on March 6; they also advertised for the 1915 babies, printing the following coupons to be filled in by the mothers:

BIRTH-CERTIFICATE COUPON.

I believe in the need of birth registration, and as proof of my support I hereby make application for a "Certificate of birth registration" for my baby, , who was born at on , 1915.

Mother's name.

Father's name,

Fill out this coupon and mail to the birth-certificate editor before Saturday, March 11.

The certificate of registration which is sent to each mother is attractive in design and printing, so that every mother who sees one in the possession of a neighbor wants one for her baby. (See illus. No. 10.) By the close of baby week there had developed a steady demand for certificates.

Many towns had exhibits which showed the importance of birth registration. Two were especially good. The first (hardly feasible for a large city) was used successfully in an Idaho town. The health officer prepared a list of all the children born in the district within the last five years of which he had a record; it showed addresses and names of parents in such a way that all could see at a glance whether their children were on the list. The other was the very simple device of showing at the exhibit a framed copy of the birth certificate used in that locality. To parents who did not understand anything about birth registration this was especially instructive.

In a Massachusetts town every mother of a baby under 6 months of age was asked to bring in the name, address, and birthday of the baby in writing and receive in exchange a copy of a standard
book on baby care, also the special bulletin on the same subject issued by the State department of health.

**Baby-welfare information.**

**BIRTH REGISTRATION.**

Many surveys or canvasses of births were made in connection with baby week. In some places this was done as a part of the celebration; in others the information was secured in advance and incorporated in the exhibit and newspaper publicity of baby week.

Such surveys were variously managed and even when they did not attempt to be complete they stimulated interest in the subject and secured the names of many unregistered babies. For example, the baby-week committee of an Ohio community with a population of about 4,000 found that the city clerk had the record of only 11 babies under 1 year, but by “asking the doctors several times” and “consulting the cradle rolls of the Sunday schools” they found a total of 70. In a Missouri city the teachers took a census of babies in each school district, and literature was distributed to them by the school children. In another Missouri city a committee was appointed to canvass for children under 3 and to study the enforcement of the birth-registration law.

In a Kansas town the cradle-roll departments of all the churches united to canvass the whole town for babies. Though the town has 20,000 inhabitants and 400 babies, they reported that they did it all in one day except for the few houses where no one was at home, and these they finished the following day.

A house-to-house canvass was made by club women in New Orleans to find the unregistered babies, after baby week, as a result of the interest aroused by it. A canvass for the babies of 1915 was made by the cívics class at the high school of an Illinois town. The pupils were assigned by blocks. Among the Polish population they hunted up the baptismal records through the priests. A prize was given for the most zealous worker. Although the class worked only one week, and therefore did not find all the 1915 babies, the work done was valuable.

**BABY DEATH RATES.**

The baby death rate was studied in many communities and made the basis for newspaper articles and talks. The Rhode Island State Department of Health, for example, prepared a table showing for all towns of the State the numbers of baby deaths and the baby death rate from all causes combined and the numbers of baby deaths from gastrointestinal diseases and malassimilation. The form is suggestive.
BABY-WEEK CAMPAIGNS.

"A SQUARE DEAL FOR RHODE ISLAND BABIES."

Rhode Island infant mortality statistics for 1911.

<table>
<thead>
<tr>
<th>Towns and counties</th>
<th>Deaths under 1 year.</th>
<th>Number of deaths from gastro-enteritis and malassimilation under 1 year.</th>
<th>Per cent of deaths under 1 year from gastro-enteritis and malassimilation to total deaths under 1 year.</th>
<th>Ratio of deaths under 1 year to each 1,000 births.</th>
</tr>
</thead>
</table>

The sociology department of the University of North Dakota prepared a printed card for the Grand Forks baby week, showing the births and deaths under 1 year during 1915 at Grand Forks. It enumerates the deaths from various causes; it compares the infant mortality rate of Grand Forks with three more favorable rates elsewhere; and after stating that only 35 per cent of the registered births had been reported within 10 days it urges the importance of prompt registration.

COMMUNITY CONDITIONS AND BABY-WELFARE WORK.

A good example of the way in which the needs of a community were analyzed and published during baby week is found in the following leaflet issued in Little Rock, Ark.:

LITTLE ROCK HAS

Good laws, good homes, good streets, good institutions, indeed, many things that are creditable to the city. Still all has not been done for the welfare of children, and here are a few of LITTLE ROCK'S NEEDS.

HEALTH

Full-time health officer (see recommendations of present health officer in his last report).
Sufficient sanitary inspectors.
Stricter interpretation of quarantine law.
Public-health nurses.
More hospital facilities.
A convalescent hospital.
A tuberculosis hospital (county).
A housing code.

SCHOOL

An open-air school.
School nurses.
Regulation of school lunches.
Compulsory school law.

PLAY

A comprehensive plan for the regulation of the social life of the younger generation.
This would include—
More parks.
Supervised playgrounds.
Social centers.
Public baths.
Music in parks.
Recreation commission.

PHILANTHROPY

An industrial school for delinquent boys.
Charities indorsement committee and federation plan for financing charities similar to Cleveland plan.
Board of public welfare.
The later pages of the leaflet explain under each heading exactly what is needed.

The immediate results of studying and publishing the facts about local conditions appeared with special vividness in an Ohio city:

In one small city in the State nothing was known about the milk supply until during their baby-week activities a study was made which proved that out of four dairies supplying milk to the babies but one had conditions which could be tolerated at all; and on further study of the deaths of babies during the previous year it was found that the death rate had been persistently high; that the proportion of deaths among artificially fed babies was large; and that the majority of deaths occurred in families supplied with milk by two of these dairies. The facts were made public, and within two months conditions, while not by any means ideal, were nevertheless improved very much, and the members of that community are eagerly watching this summer to find what the results of hot weather will be.¹

Baby-welfare exhibits.

The many exhibits held during baby week in 1916 had one or both of the following aims: They showed the need of infant-welfare work in a particular community, or they gave mothers information regarding the proper care of babies and children.

INTERESTING DEVICES.

The devices of special interest reported from exhibits on community matters included the birth-registration exhibits to which reference has been made on page 42.

An exhibit on the dairy inspection system was prepared by a city chemist in Texas. He showed the visitors clean and also dirty milk under the microscope. The exhibit in a Pennsylvania city included material about pure food, with a special demonstration by girls from the domestic-science classes of the public schools. They cooked the dishes and explained how each article of food was prepared. At the same exhibit boys of the manual training classes made and demonstrated small models of a dirty dairy, a clean dairy, and a playground. A demonstration milk test by a school class in animal husbandry was reported from one western baby week. (See p. 17.) Women's clubs, in several communities, undertook to provide hostesses at the exhibit every day. Where there was more than one club in the town, different days were assigned to different clubs. In some towns tea was served at the exhibit. One small town arranged also for music at the exhibit, and gave a red flower to everyone who attended.

A State board of health says:

In some places the exhibit is opened to the tune of the "big noise." About half an hour before time for the first performance all the bells, whistles, and


Provided by the Maternal and Child Health Library, Georgetown University
other noise-making contrivances are turned loose. To be successful this plan must be given enough publicity for everybody to know what it means when the noise begins.

**EXHIBITS ON BABY CARE.**

The exhibits on the care of the baby frequently included demonstrations. At one Rhode Island exhibit a woman showed how patterns for baby clothes should be laid on the material to cut to the best advantage. The proper way of bathing and dressing a baby was frequently shown. Some committees added to the interest of this demonstration by having a live baby for a subject instead of an india rubber one. In one town a series of mothers took charge each afternoon and bathed their own babies at the exhibit for the benefit of those who wished to learn. This required some caution on the part of the committee in selecting mothers who were expert. In many places the Little Mothers' Leagues had charge of the bath demonstration, though it is not recorded that anyone lent them live babies.

Several towns in Illinois had the advantage of an exhibit and demonstration by a woman, herself both a mother and a business woman, who had made a baby bed of a basket and a baby pen of boxes. She explained the construction of these articles and of some original toys, and the arrangement of shelving and equipment in her bathroom.

One Kansas town had an exhibit in contrasting layettes—old-fashioned ones, with very long dresses and elaborate embroidery; and inexpensive modern ones made by the high-school domestic-science class. Some of the latter were fashioned from an adult's old clothes. One layette cost $1.50, one $1.75, and one $2.

An unusual homemade exhibit of what can be done at small expense for the amusement and instruction as well as the clothing of children comes from New Jersey. The author's description of it is given in full in the appendix, page 144.

Posters in foreign languages, illustrated with brightly colored photographs, were used to teach simple facts in baby hygiene and care at the Baltimore exhibit. Another original feature in Baltimore was an exhibit of posters secured from a newspaper poster competition. (See p. 51.) The method of making an inexpensive "contrast exhibit," which also attracted a good deal of attention, was described as follows:

The nurses took a large packing case and divided it in half; in one side they represented very realistically by means of toy furniture and tiny dolls a crowded, cluttered, dirty kitchen, with cats, dogs, and even a goose walking around; food thrown around on the floor; a sick child in a little cot, drawn up close to the stove, with washing going on in the back of the room.
BABY-WEEK CAMPAIGNS.

Contrasted with this was the other half of the box, arranged as a sick room, walls papered in white, the window wide open, covered with mosquito netting; a tiny white bed, a white chair, a white table, and a little chest of drawers being the only furniture. On the table was a miniature bottle of milk and a dish of eggs to show that these were the proper food for a sick child.

The cost of the transformation was carefully figured by the nurses, who estimated that it would cost about $3.50 to make such a change.

The mother was represented in the exhibit as saying to the nurse, "Why didn't I send for you before?"

A carefully planned exhibit, showing considerable ingenuity, was held in Stamford, Conn. (See illus. No. 12.) The report of the committee follows:

STAMFORD BABY-WEEK EXHIBIT.

(All exhibits were displayed in shallow booths with a railing across the front. Labels for each article were well lettered and large enough to be easily read.)

1. Prenatal care.—(Space 7 feet deep by 10 feet long.) Display of equipment and clothing needed for mother and baby at time of birth.

Panels, Prenatal Care; Midwives; Care at Birth.

Leaflets on prenatal care distributed.

Stamped post cards addressed to Children's Bureau requesting pamphlet on Prenatal Care were sold for 1 cent.

2. Bathing the baby.—(Space 7 by 10 feet.) Equipment for baby's bath, including cupboard with shelf for soap, a cheap box for baby's clothing, an inexpensive and attractive basket filled up with toilet articles, towels, table, and tub. Demonstrations given, using doll and part of the time a real baby. The nurse in charge did not merely go through the motions, but bathed the doll or the baby and dressed it. Water was warmed on the gas range in the adjoining booth.

Panel, Bathing the Baby.

3. Feeding the baby.—(Space 7 by 14 feet.) Booth equipped with stove, table, homemade ice box, homemade fireless cooker, an equipment for modifying milk, and a washstand. A washbowl such as is used in a bathroom was placed on a standard made by the carpenter, with a shelf at the top upon which was placed a 5 or 10 gallon oil can with a faucet; underneath was placed a pail as large as the can to catch the water from the bowl.

Demonstrations were given by a nurse in modifying milk, accompanied by brief talks on baby feeding.

Panels, Mother's Milk; The Best Substitute; Feeding the Baby.

4. Sleeping.—(Space 7 by 16 feet.) The booth contained an outdoor sleeping box attached to the window, a basket with a doll baby to be set in the window box, a sleeping-out hammock, baby bed, pen, and good and bad baby carriages.

All the articles except the baby carriages had been made by a carpenter under directions and were inexpensive.

The demonstrators went into much detail in explaining the use of the equipment, hours for sleeping, etc.

Panels, The Baby Asleep; Fresh Air and Exercise for the Baby.

5. Things good and bad for the baby.—(Space 7 by 10 feet.) A long table was divided into three parts by strips of tape. The center division contained a large assortment of articles, and the empty spaces at either side were labeled, respectively, "Things good for the baby" and "Things bad for the baby." The
articles included a pacifier, a soothing-syrup bottle, a celluloid device for the baby’s thumbs, a pickle, sausage, cake; bottles labeled and containing tea, coffee, beer, and water; a banana, a toy bed with baby sleeping alone and another with baby sleeping with mother; a rubber diaper, a good nursing bottle, the wrong kind of nursing bottle, etc. The explainer gathered a group of spectators and then called on them to tell her in which of the two spaces (for good or bad) each article belonged. After all the articles had been sorted into the right spaces, with proper explanations, they were jumbled together again into the central space, ready for the next crowd.

Panel, Things to Avoid.
6. Clothing for the baby.—(Space 7 by 20 feet.) The clothing displayed was supplied by a department store, which sent show cases, standards, and tables. Patterns for simple garments were made by women and sold for 1 cent each. A long table was kept cleared for cutting, and women were invited to bring material and have it cut for them at the booth. The clothing was for children up to 6 years. Good and poor wash materials were displayed on cards.

Panel, Clothing for the Baby.
7. Baby-health conference.—The conference was carried out along the lines suggested by the Children’s Bureau, with the added feature of a baby-improvement contest for babies under 1 year, to continue until September. Children up to 6 years were examined.

In Stamford the committee was especially fortunate in having a space excellently adapted to a baby-health conference, directly across the hall from the baby exhibit. This included a waiting room, dressing room, and large room (about 60 by 20 feet) for examinations. The large room was divided by wire screen into examination and audience rooms.

8. Children’s exhibit.—As it was decided to include welfare of children up to school age in the educational work of the week, space on a separate floor was devoted to the following subjects: Children’s games, especially home occupations; children’s books and story telling; food for children from 2 to 6 years; the Don’t Care home; the Do Care home; the milk supply; the Children’s Home Society; a dental clinic.

SECURING EXHIBIT MATERIAL.

Exhibits were borrowed from various sources, and probably the most useful were those partly supplied by the State health departments, agricultural colleges, or national organizations and partly prepared locally. A number of towns, however, were disappointed because the material was delayed in reaching them or had to be sent on too soon to the next town. A town in Oregon which was disappointed by not receiving the material sent for had a local sign painter make six panels from the illustrations in the bulletin on Child-Welfare Exhibits.1

In a city of New York State the chamber of commerce gave a valuable exhibit which was turned over, after baby week, to the women’s clubs to be used at a permanent welfare station. Incidentally at this exhibit during baby week two retired trained nurses explained the charts and distributed literature in Italian, Polish, and Yiddish.

A town in Washington had an exhibit produced by the local dental society consisting of plaster casts of jaws, illustrating the bad effect of thumb sucking.

Many towns obtained good exhibits at small cost by clubbing together with other towns and arranging a circuit for one exhibit. In Los Angeles, where the county subscribed generously to the campaign, the exhibit was carried through the towns of the county. In Nebraska the Omaha exhibit was circulated among the smaller towns of the State.

MOVING AND CHANGING EXHIBITS.

Some committees which did not find it feasible to hold an exhibit in a big hall, a school, or some other building where there was plenty of wall space, showed borrowed panels in a store window, changing them every day or two to keep up the interest of the passersby. Infant-welfare exhibits were shown in public schools in New York City and moved daily from one school to another. Some six or seven sets of material were used in this way during the week, and as many schools were covered as possible.

Baby-health conferences.

Probably the one feature most generally carried out in baby weeks throughout the country was a baby-health conference. Three types of conferences were reported. A baby-health conference without a score card, a baby-health conference with a score card, and a baby-improvement contest. Many baby contests were held also.

POPULARITY OF NONCOMPETITIVE CONFERENCE.

From a Florida town comes the report, "Last year we gave prizes, but we think that many a mother would rather have a certificate or a card showing the standard of her baby." From Indiana comes a report showing that what the mothers really valued was the opportunity to have their babies examined: "The attitude of the mothers was very good. None spoke of the prizes; all were eager for the physical ratings. Some thought their babies would not score high, but wanted information to work on when their interest had been aroused. They all expressed themselves as going to have the fault remedied." And a Missouri town reports: "The indifference of the mothers to the prizes and the appreciation of the value of the scoring were most gratifying."

"One feature of the work which pleased me very much was the fact that the women understood, after a little explanation, that this was in no sense a baby show," writes one of the federation officers from the Middle West.
BABY-WEEK CAMPAIGNS.

And from Colorado comes this:

** * At the contest we made an examination of 21 babies. The examining physicians made as helpful a summary for each mother as they could. This was my first experience at this sort of undertaking. I, too, have come to see that the prize feature is not commendable. However, the contest did not create a feeling of bitterness, but I see how it might readily have done so had we not exercised the greatest care in explaining the purpose of the contest to the mothers. Next year I hope to make the child-welfare phase of our conference of much more significance. We will feature it as a baby examination or health conference. In this way I hope we may encourage mothers to bring babies who are most in need of helpful suggestions relating to the health of their babies. We will also make it noncompetitive, unless it should seem advisable to give certificates of commendation to mothers who exercise the greatest care and interest in improving the conditions which relate to the health of the baby.

This clipping from a South Dakota paper shows that the women made an effort to avoid the bad effects of the competitive element:

It was the wish of the woman's club to have the newspapers refrain from publishing the scores made by the babies in that the new baby show is a fight for all babies' welfare and not to determine which baby will score the highest mark on health. Formerly the baby shows were chiefly for picking out the baby which enjoyed the best health, but to-day this style has given way to the new idea of being helpful to the mothers in determining the health condition of the child and thereby give her pointers on how to remedy any defect.

A close analysis of these reports reveals the reason for this growing popularity of the noncompetitive conference: The mother of a splendid baby gravitates naturally toward any gathering where he will shine by contrast with other babies and perhaps win a prize; just as surely the mother of a child which is not thriving shrinks from the comparison which means for her mortification rather than help and advice. Typical of this changing feeling was the experience in a western town, where the committee, after planning a contest, became convinced that it was not a good thing and changed to a conference in the middle of its preparations. The agricultural college of one middle western State sent around to the clubs of the State a suggested program which included a debate; “Resolved that baby contests are injurious to the best interest of the baby.” One State health officer in the East, in collecting data on the towns which celebrated baby week, writes that he made no attempt to tabulate the communities which held baby contests only, as a number of years' experience had shown that these contests alone are a hindrance rather than a help to baby-welfare work.

APPOINTMENTS IN ADVANCE.

Another point made plain in the reports is the fact that too great care can not be taken, through making appointments in advance, to prevent crowds of mothers and babies gathering at conferences.
Some committees reported regretfully that they were completely swamped by the number of babies and mothers who came without appointments, so that mothers sat about with their babies for hours and finally went home without an examination. It is obvious that there is an unnecessary amount of discomfort to the mother and of danger to the baby in such an arrangement.

An admirable scheme which many towns used in 1916 was the insertion of a blank coupon in the baby-week program and in the newspapers, to be filled in with the name and address of the parents who wanted appointments. In at least one city the coupon directed the mother to fill in and mail it with a 2-cent stamp, for which an appointment card would be sent to her.

**Competitions of various kinds.**

It is plain from the experience of 1916 that the competitive idea has a very wide appeal. Committees in many communities were quick to appreciate this fact, and, where they disapproved the idea of contests among babies, they introduced the element of competition in some beneficial form.

**POSTER COMPETITIONS.**

A competition having a real value was that for the most effective poster, whether of original design or made by cutting and pasting. Some poster competitions were open to everybody and some only to school pupils. In many cases the baby-week committee threw the lists open well in advance of the actual baby week and thus secured a good design for the poster, which they could reproduce by the hundred and post broadcast for advertising purposes.

One of the best of these competitions in 1916 was planned by a newspaper in an eastern city. Half a page was devoted every day for several weeks to information about child welfare. The posters were to be based on this information, and the contest was divided into three parts, for younger school children, high-school pupils, and the general public, respectively. The posters were judged not only for attractiveness of design but also for accuracy and educational value.

**COUNTY COMPETITIONS.**

In Kansas the governor offered a trophy for the county with the best health record for 1916-17. The prize will be awarded to the county that shows by its health and sanitation record and by its activities for child welfare that it is the best county in the State in which to rear children. The ratings are determined according to the following factors:

1. Number and rating of standardized schools. Junior health officers in the schools.
BABY-WEEK CAMPAIGNS.

2. Absence of child labor; safety first in reference to farm machinery.
3. Full or part time county health officer. Promptness and completeness of his reports to the State board of health; the infant mortality, morbidity, and adult mortality rates and the presence or absence of epidemics of communicable diseases, as shown by these records.
4. The county medical society. The promptness of the doctors in reporting births and communicable diseases, as required by law; the absence of ophthalmia neonatorum and preventable epidemics of communicable diseases.
5. City and rural churches and community clubs. The sanitary condition of churches and the interest taken by churches in health and sanitation in their respective neighborhoods; the child-hygiene Sunday and the activity for child hygiene in the Sunday school; the community forum or other community organization and its activities in health and sanitation.
6. The women's clubs, farmers' clubs, and other organizations. Child-hygiene programs and health and sanitation activities; study classes in child hygiene; baby days and other activities for children.
7. County commissioners. The amount appropriated per capita for public health; a full-time county health officer; county nurse; county hospital and other agencies for preventing disease and improving conditions of public health.

BETTER-MOTHERS COMPETITIONS.

One of the happiest ideas was the contest among mothers in answering questions on the care of the baby. Four localities reported a competition of this sort in 1916, and it is a plan so simple and admirable that it could be incorporated in the program of any community.

In Trenton, N. J., where a better-mothers contest was carefully worked out, the list of questions was as follows:

1. How many children have you had? How many are living?
2. What do you feed your baby?
3. How often do you feed your baby during the day? During the night?
4. Do you give the baby water to drink?
5. Do you give your baby coffee, tea, beer, pickles, sausage, bananas, oranges, zwieback, eggs, broth, or oatmeal?
6. Do you buy bottled or loose milk?
7. Where do you keep the milk?
8. Where does your baby sleep at night? In the day time?
9. How many hours does your baby sleep at night? In the day time?
10. Do you change the baby's clothes when you put him to bed?
11. Do you open the windows in the room in which your baby sleeps?
12. Do you rock the baby to sleep?
13. How often do you bathe your baby?
14. Do you use hot, cold, or warm water for your baby's bath?
15. How soon after feeding your baby do you give it a bath?
16. Do you give your baby a pacifier?
17. Is your baby allowed to go to sleep nursing a bottle?
18. Do you take your baby up whenever he cries?
19. What do you do for your baby when he vomits?
20. Where do you go for advice when your baby is sick?
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21. How do you protect your baby from the flies in summer?
22. Do you let anybody kiss your baby on the mouth?
23. Is your baby registered?

After the contest the committee published in the papers a report which answered all the questions in full. The fact that 32 mothers out of 198 had given perfect answers indicates that some more difficult questions might well be included.

In another city the questions and a series of articles on baby care were published in the papers. Only mothers of young babies were admitted to this contest. In a third city a group of mothers was supplied with a list of 10 questions on the care and feeding of children. A series of popular meetings was held at which motion pictures and cartoons were shown and addresses delivered on the subject. The mother who gave the best answer in writing received a prize.

OTHER COMPETITIONS.

In connection with a baby-improvement contest held by the milk stations in New York City, prizes were given not only to those babies who showed the greatest improvement during a period of six months, but also to those most regular in attendance at a milk station.

Competitions for the best school essay on the care of the baby and for the best slogan are referred to elsewhere. (See pp. 40 and 57.)

Meetings.

SECURING AN AUDIENCE.

Many of the communities report enthusiastic and well-attended meetings, and various expedients proved useful in securing good audiences. Personal invitations were sent to mothers in some communities, especially when the meeting was arranged for mothers. Sometimes the school children helped in distributing invitations: as a part of the school celebrations they wrote invitations and delivered them not only to their own mothers but to others in their neighborhoods. Sometimes printed invitations were delivered with the flags on flag day. It is safe to assume that invitations personally addressed always received more attention than handbills.

This form was used by the schools of a California town:

Your are invited to join with the parents of over 2,000 communities in the United States in celebrating baby week, March 4 to 11, 1916.

The Social Service League is holding an open meeting at 3 o'clock Friday afternoon, March 10, under the trees near the Presbyterian Church, or in the Sunday-school room, according to the weather. Will you come and bring your baby and hear more about what baby week means? It is a social meeting, and the grammar-school children will give a little play.

Also please help by putting this sign in your window or at your gate, so that everyone may know yours is the home of a baby under a year old.
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A Massachusetts town used the following shorter form with a quaint child's picture in the upper left-hand corner of the printed card:

You and your friends
are cordially invited to a talk on
THE HEALTH OF BABIES
Illustrated with stereopticon
In the Town Hall
Tuesday afternoon, February twenty-ninth,
at 3 o'clock.

Motion pictures, plays, or popular features were frequently used to insure a good attendance for evening or afternoon meetings. Musical numbers added to the attractiveness of many programs. The New York baby-week committee compiled a list of songs about children and of cradle songs, both vocal and instrumental, which is given in the appendix, page 143.

An Alabama town and a New York town used a brass band to draw the crowds down the street to the door of the meeting—an excellent expedient for a mass meeting planned to interest everybody.

WHERE MEETINGS WERE HELD.

Meetings were held successfully in all sorts of places—courthouses, schoolhouses, department stores, and hired halls.

In large cities where meetings were held only in the central headquarters the attendance was sometimes disappointing. The committees in a number of large cities divided the city into sections, each of which held its own celebration according to its local character and institutions. For the experience of Boston, see page 23. In Columbus, Ohio, 85 addresses are reported, delivered at 43 active baby-week centers; among these were four big noon meetings at the railroad shops.

SPECIAL MEETINGS FOR NONENGLISH-SPEAKING AUDIENCES.

The towns and cities with large foreign colonies made a point of having a Polish night, an Italian night, etc., selecting speakers well known among the respective nationalities. Such meetings were sometimes combined with special evenings at the central exhibit, where guides who could speak the foreign language were on duty.

In several cities, where there are settlement houses in the foreign quarters, baby-week meetings were held at the settlements.

Plays.

The instinct of children to dramatize what interests them was employed to good advantage in many communities by the perform-
ance of short plays, which had as themes either the proper care of the baby or the general subject of the health and happiness of children. These plays proved to be a very successful part of baby week.

The two plays by G. W. P. Baird, The Theft of Thistledown and The Narrow Door, were used very frequently, as were also the three plays dealing with health subjects in the volume of Five Playlets by Hester D. Jenkins. In many communities original plays were written and acted. Several of the plays listed on pages 134 to 136 were produced in this way.

**Pamphlets on baby care.**

Baby week was generally used as an opportunity for distributing educational pamphlets or leaflets on the care of the baby. In a few communities, where it was impossible to carry out other plans, this formed the chief part of the baby-week celebration. (See p. 12.) Pamphlets or leaflets were nearly always obtained free or at nominal cost from a Federal agency or State department of health, or from some national organization, although the material in foreign languages usually had to be printed locally. In an Indiana town, for example, the foreign priests translated leaflets.

**METHODS OF DISTRIBUTION.**

In some cases pamphlets and leaflets were delivered with each flag on flag day to the mothers of babies under 1 year; in others they were distributed by those making house-to-house canvasses for birth registration.

Committees holding a baby-welfare exhibit usually had a table where printed matter was given away or sold. Government bulletins which could not be obtained in large numbers were successfully distributed in two ways: In one case the names and addresses of people wishing copies of the bulletins were taken down on lists which were later sent in to the proper bureaus; in the second case (see p. 47) stamped postal cards, already addressed to a Government bureau and requesting publications, were sold for 1 cent. It was then a very easy matter for the person wanting a bulletin to fill in her name and address. In both cases sample copies of the bulletins were displayed on the table at the exhibit.

**Publicity.**

No matter how carefully worked out and admirable a program the committee devised, it was never thoroughly successful unless the publicity was well handled. And the history of 1916 shows that in many places, by the use of a little ingenuity, splendid publicity was achieved at almost no cost.
NEWSPAPERS.

Newspapers throughout the country willingly gave columns of space to the baby-week material when it was supplied in available form, as readable news rather than propaganda.

An interesting way to use baby-welfare information in the newspapers was suggested in a Wisconsin town, where a series of articles prepared from the national statistics supplied by the Children's Bureau was used in contrast with local figures for town and State showing where improvement was necessary.

Short articles on the care of the baby were widely used, and many editorials appeared during the week. In fact, a wide variety of material was carried by the papers in 1916.

Here, for example, is an editorial from Illinois:

A REAL BABY WEEK.

This is baby week. The Children's Bureau of the Department of Labor designates the current week by this title, with the purpose of stimulating nation-wide interest in the conservation of human life.

Locally, if baby week is to be anything more than a mere perfunctory "observance," certain definite results should be achieved.

The playground movement should get a substantial start, so that the youngsters may be relieved of the dirt and danger of the public streets and given recreation which will build up instead of tearing down.

The sanitation question should be brought home to every section of the city, and dirty alleys, streets, backyards, and barn lots should be outlawed. The provision dealer and the butcher should be made to understand the menace of the fly. And ample provision should be made for keeping the inspection of milk up to standard.

The necessity of absolute obedience to quarantine regulations ought to be brought home to every parent. Celebrating baby week while carelessness permits contagion to increase right along is something of a contradiction.

The visiting-nurse movement should be fortified and arrangements made whereby all mothers can avail themselves of reliable instruction in nursing and free medical advice when necessary.

The mothers' pension law should be applied wherever there is need or justification, and its purposes made plain to all mothers who might come within its provisions.

Special thoughtfulness should be devoted to backward and deficient children in the schools and medical inspection should be emphasized and extended.

These are some of the practical obligations presented by baby week. They affect our children directly and vitally and concern the entire community. Reading pretty sentiments and wearing baby ribbons form one way of keeping baby week. Helping to do something real for the health and happiness of the children right here in our own city—in our own blocks—forms another.

Let's make something practical out of baby week.

A Kansas paper published the following, taken from the special baby-week bulletin of the State board of health:

IF BABY COULD TALK HE WOULD SAY:

Do not kiss me on the mouth.
Do not let the sun shine in my eyes nor the wind fill them with dust.
Do not sneeze or cough in my face, for I may take cold; and that would be bad for me.
Do not expose me to whooping cough or measles or other catching diseases, or I may get sick and die.
Do not pick me up by the arms. Be careful how you handle me and lay me down.
Do not give me candy or other things which are not good for me.
Do not give me a dirty pacifier to suck nor allow me to suck my thumb, for it will spoil the shape of my mouth.
Do not rock me to sleep nor teach me other bad habits.
Do not take me to the motion-picture show nor keep me up nights, for it robs me of my sleep and makes me cross.
Do not dose me with patent medicines or nasty mixtures.
Do not give me wine, beer, or whisky, coffee nor tea, for I want to keep well.
Do not jolt me nor trot me on your knee when I cry.
I want the right things to eat and I want my meals on time.
I want some pure cold water to drink between meals, for I get very thirsty.
I want a bath every day and plenty of clean clothes.
I want my own bed, a comfortable room with the windows open, and plenty of time for sleep, for I must have it in order to grow.
I want to be taken out of doors every day for the fresh air.
I want mother to love me and always be gentle with me.
I want to be a good baby.

And this was used in New Jersey papers:

TWO TONS OF PAPER.

One of the contributions made by the State department of health to the baby-week campaign is the printing and distribution of leaflets on the subject. These are three in number, one a single-page leaflet on the importance of birth registration, another a four-page circular on the care of babies, and the third a four-page circular on the community’s responsibility for baby work. Of the first two 125,000 each are being printed and of the latter 100,000, making a total of 350,000 leaflets.

In printing, sheets 25 by 35 inches in size are used, and one side of 8 or 10 leaflets is printed at each impression. The entire work will require 75,000 impressions for printing on both sides and consume approximately 4,000 pounds or 2 tons of paper. Allowing time for locking up the forms, the work will keep one printing press busy for 10 days of 8 hours each, printing 1,000 impressions per hour.

The press was put in operation Tuesday of this week and an advance lot of the circulars was delivered at the office of the State department of health yesterday. Shipments will be made as rapidly as printed, and the circulars will be furnished to any community where the local baby-week committee will make careful distribution.

Additional examples of good newspaper articles on baby week are published in the appendix, page 196.

SLOGANS.

A good slogan proved an important feature of the campaign and a competition for the slogan made excellent publicity in advance of
BABY-WEEK CAMPAIGNS.

baby week. Los Gatos, Cal., for example, had such a competition, and the prize was won by the following:

"Let's make a better Nation
By baby conservation."

Other towns used a shorter and more trenchant sentiment, as:

"Milwaukee battles for babies."
"Utah's best crop."
"A square deal for Rhode Island babies."
"Every baby a healthy baby."
"The best for baby."
"100 per cent for the babies."

Some of the slogans were rhymed:

"Baby health, Nation's wealth."
"Baby's health means more than wealth."
"Baby health—civic wealth."
"Better babies, better care, is the watchword everywhere."
"Better babies, too, in Kalamazoo."
"Arkansas wealth for baby's health."
"Better fare, better air, better care for babies."

POSTERS.

In many cities posters designed especially for baby week were plastered everywhere for some time in advance, using all available space on billboards, in street cars, in merchants' windows, etc. These varied from the very simple but striking card in Little Rock, Ark., on which was printed in large letters—

WHAT ARE YOU DOING FOR BABY WEEK?

MARCH 4-11.

to colored pictures of babies, or mothers and babies, used in Erie, Pa., New York City, and elsewhere. A striking poster was used in Cumberland, Md. It showed the picture of a healthy little boy, and under it the label "One baby dies in Cumberland every four days."

Less expensive and more appropriate for small towns where a limited number were used were the posters with pictures of babies' heads, etc., cut out of magazines and pasted on stiff cardboard and finished with hand or gummed lettering.

The poster competitions previously described furnished many of the original designs. (See p. 51.)

Methods of displaying posters depended on the ingenuity of the committee in charge. One town reports 50 large muslin signs carried by delivery wagons, and large muslin signs hung across the street were not uncommon.
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A street car company put the slogan around its safety-first signs.

STATIONERY AND PROGRAMS.

Some towns were ambitious enough to have stationery printed for baby week. Sometimes slogans and special designs were printed on the letterhead as well as the names of the committee chairmen, etc. A simple and effective device was to have the slogan printed across the envelope; this was sometimes done less expensively with a rubber stamp. There proved to be a practical value, besides the advertising value, in baby-week stationery which gave an address and telephone number, especially in campaigns that involved considerable correspondence and telephoning.

Much ingenuity was shown in printing attractive programs, and good programs widely distributed brought out large attendance even in bad weather.

In a western city an eight-page program was interspersed with public-health mottoes. The program of events was very fully printed, including the list of hostesses from the women's clubs each day.

LEAFLETS, CARDS, TAGS, ETC.

In addition to the educational pamphlets and leaflets, described on page 55, special folders and cards were printed for popular distributions in many places. The message to fathers has already been mentioned. (See pp. 37 and 138.) Occasionally there was a message to mothers or a message for brothers and sisters. Philadelphia expanded this idea to include many groups of citizens and sent out appropriately worded cards addressed To All Citizens of Philadelphia; To You as a Manager of a Charitable or Social Agency; To Members of Women's Clubs; and others. Here are two examples:

Mr. Business Man:
Do you know that the infant mortality rate of a city is becoming the index of the prosperity of a city? This is a fact.

Do you know that Philadelphia in 1915 stood sixth regarding the infant mortality rate in first-class cities?

About 50 per cent of the deaths of Philadelphia's babies is preventable. In other words, these babies die because of the ignorance of mothers, poor housing, and poverty. Thousands are malnourished for life by the same diseases.

Does this interest you?

Faithfully, yours.

Executive Committee.

To Employers of Women:

Did you ever stop to think that there are probably many women in your employ who have babies at home, and have you thought of the importance of the health of these women to the health of their babies?

Perhaps you have no married women in your employ, but you probably employ women who will be mothers some time in the future.
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We are sending you this card merely to bring to your mind during this baby-week campaign the fact that as an employer of women you have a great responsibility in relation to the health of the future citizens of this city.

It is, of course, needless for us to ask your cooperation in doing whatever you can for the health of the women you employ. We simply desire to suggest the thought that their health means more to the city than their personal comfort.

Faithfully, yours,

Executive Committee.

Many towns and cities found it easy to persuade their dairymen to distribute printed matter with the milk bottles during baby week. Sometimes round stickers were supplied by the committee to paste on the bottles, and sometimes tags—all giving directions about the care of milk in the home. One city in New York State supplied tags and elastic straps with which to fasten them on. In Milwaukee the milk-bottle legends were changed each day.

In Troy, N. Y., the sending out of the circulars with the milk bottles was handled by the local health officer. Here is the letter he sent to the 106 milkmen of the city:

TROY BABY WEEK.

Dear Sir: We recognize that milk not properly cared for in the home breeds disease and even death.

We recognize, also, that milk left uncovered in ice box or room absorbs flavors and odors from other articles near it, and that in most of such cases the blame is placed on the milk dealer.

We therefore ask you to cooperate with us in our effort to impart to all milk consumers a few important facts about milk.

We are sending you circulars containing instructions for the proper care of milk. These we earnestly urge you to give out (one to every milk customer), beginning Tuesday, March 7. If you need more circulars please apply to Health Officer, City Hall, Troy, N. Y.

BABY-WEEK LITERATURE.

Aside from material of an educational nature, the baby weeks of 1916 produced a little literature of their own, their own art, and even one song. These spontaneous products of a quick sympathy are not things which every community can hope to duplicate. Some of them can be reproduced, however, for the benefit of everyone. Minneapolis sends this verse:

BABY.

[Dedicated to "baby week."

Wee mite of pinkness with rosebud face,
    The dew of unborn ages on thine eyes,
    The heritage of kings, and the prize
Of kings and prelates. At thine elfin grace
Empires fall. Close in her soft embrace,
    Madonna-like, the mother sanctifies
Her earthborn babe in wide-eyed, rapt surmise,
Glimpsing in him the sinews of the race.

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

A wraith, a gem from out the great unknown,
"A little bit of heaven" sent to men
Down thro' the rifts of blue, a blossom blown
From fields of asphodel beyond our ken.
Perchance the gates of heaven have slipped ajar,
And thou, the Christ-child's gift, hast come afar.

The following was dedicated to baby week at Washington, D. C.:

THE BABY.

What does the baby ask of you,
Passer-by in the street?
Only the gift of a thought from you,
Only the gift of a look from you
At the road before his feet;
Is it smooth and clean and fit, say you,
Fit for a baby's feet?

What does the baby say to you,
You who pay no heed?
He begs for the right of living with you,
Begs for the help of a hand from you—
What he begs is but his need.
Will the hand and the help be ready from you,
Serving the baby's need?

What does the baby give to you,
Men whose vision is dim?
He gives you sun to lighten your way;
He gives you hope for each dark day;
Have you paid your debt to him?
Have you smoothed his path and guided his way,
Guarded and shielded him?

What does the baby keep for you—
You whose need is vast?
He keeps faith and hope and joy for you,
Comfort and love and home for you
In his tiny hand held fast.
Are you earning the gifts he is keeping for you,
You who are going past?

And the following poem by the same author was set to music by a Cleveland man:

FLAG DAY.

A new banner waves in our city to-day,
A banner just newly unfurled;
But the message it brings
On its blue and white wings,
Is as old as the dawn of the world.

Joyful the tidings this banner proclaims:
"A baby lives here" is its song.
To his presence give heed;
Take account of his need:
Make right for him all that is wrong.
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From the dawn of the world to the dawn of to-day
Man’s hope in a baby has lain.
For the smile on his face
Is the goal of the race—
Through darkness and infinite pain.
We hail you—the babes of our city, to-day,
And pledge you our faith to the end!
Whatever your need
With thought and with deed,
Your uttermost realm to defend.

From the Kansas City Health Department comes this:

CHILD’S DECLARATION OF RIGHTS.

Every child has the right to belong to the aristocracy of health and intelligence; to be born with a good mind and a sound body.
Every child has the right to be loved; to have his individuality respected; to be trained wisely in body, mind, and soul; to be protected from disease, from evil influences, and evil persons; and to have a fair chance in life.
Every child has the right to be surrounded by that environment in which he may develop to the fullest his abilities and his talents.
The child is the asset of the State; he owes the State nothing.

For use in the kindergartens and among small school children is the following pledge, which was printed in color on a white card decorated with a quaint picture of a little girl and made an attractive souvenir:

BABIES’ FRIENDS.

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

Unusually charming is the following apostrophe, widely quoted, but with authorship unrevealed:

I AM THE BABY.

I am the Baby,
I am the youngest Institution in the World—and the oldest.
The Earth is my Heritage when I come into being, and when I go I leave it to the next Generation of Babies.
My mission is to leave the Earth a better place than I found it.
With my million little Brothers and Sisters I can do this, if the World does not impose too many handicaps.
Now I need Pure Milk and Fresh Air and Play.
When I am a little older I shall need good Schools in which to learn the Lessons of Life.
I want to live, laugh, love, work, play.
I want to hear good music, read good books, see beautiful pictures.
I want to build Houses and Roads and Railroads and Cities.
I want to walk in the woods, bathe in the waters, and play in the snow.
I am Yesterday, To-day, and To-morrow.
If you will make my way easy now, I will help you when I grow up.
I am your hope—I AM THE BABY.
COOPERATION OF MERCHANTS AND OTHER BUSINESS MEN.

From the experience of towns and cities all over the country it appears that business men are just as ready as the newspaper editors to help make baby week a success. Here are a few of the unusual ways in which they helped:

An Alabama merchant gave away 1,000 copies of a standard book on the care of the baby. In two towns, in Maine and Ohio, savings banks reprinted a health-department bulletin on the same subject. Sometimes the managers of large plants cooperated by printing baby-week data on the pay envelopes. In one town the street-car company carried children free to and from the exhibit, and in a number of towns local dealers supplied free milk and biscuits to mothers and children at health conferences, lectures, and exhibits.

The proprietors of motion-picture houses frequently helped the baby-week committees in all sorts of ways. Slides and films on baby care were sometimes shown as part of the regular program. In one Oregon town the outing day closed with a complimentary performance for mothers. The proceeds of a performance in a Pennsylvania theater were contributed toward the expenses of the local baby week. In a New York town pictures of babies before and after the local child-welfare association had charge of them were shown by the courtesy of a motion-picture house.

Merchants often printed appropriate slips on baby care for enclosure with goods. In a Michigan city health notes were printed by a department store and distributed to customers over the counter. Department stores in many cities gave space for baby conferences and lectures and displayed large muslin signs advertising baby week on their delivery wagons. In a Missouri city a big dry goods firm constructed an auditorium especially for the baby-week lectures.

Most popular of all the means whereby the merchants and business houses helped were special displays of baby goods in their windows. An Indiana town reports an effective display of trained-nurse and baby dolls, while two California towns probably head the list for number and variety of displays. One of these reports that the cafés exhibited model lunches for children; the drug stores, toilet accessories; the hardware stores, a miniature play-ground; and dry goods houses, proper children's clothing. In a few places the use of one or more windows was turned over to the committee during baby week. In the window of a New Jersey hardware store, for example, the committee placed a proper baby scale, emphasizing the superiority of the balance-beam scale over the spring scale, and showed, in addition, a chart of the proper weight of the baby at different ages. Where the merchants cooperated with the committee by showing goods which were simple and wholesome, such window displays amounted to an extensive and valuable exhibit.
Baby week offered a great opportunity for advertisement, and this fact, while insuring the help and cooperation of business houses, brought with it many dangers, which are mentioned in various baby-week reports. In some towns the advertising features were so identified with baby week that the campaign was in danger of being considered a commercial advertising one. In other towns baby examinations arranged by the department stores without supervision by the baby-week committees were badly managed. In a few cases business firms exhibited in their windows articles not to be recommended. For instance, one committee reports, "Many of the drug stores made special displays, some, to our consternation, featuring pacifiers and soothing sirups." These cases show the necessity of the baby-week committee's holding up proper educational standards throughout.

FOLLOW-UP WORK.

In the nature of things follow-up work can not be reported upon immediately after the close of baby week. It is a matter which takes months to crystalize, and the full influence of such celebrations can never be reckoned in concrete form. It is not possible, therefore, to record here much of the work which has been undertaken in consequence of the baby weeks of 1916.

At least one State, Rhode Island, planned a State-wide follow-up program: The establishment of a division of child hygiene in the State health department, the enforcement of the birth-registration law, provision for the inspection and licensing of midwives, and the attempt to secure a law requiring tuberculin tests for cattle. A movement to secure in every community a trained health officer is also under way; and interest in the organizing of Little Mothers' Leagues in the public schools has been greatly stimulated. Already, it is reported, one city has passed a birth-registration ordinance and has appropriated $700 for a baby census.

A State-wide follow-up program for New Jersey was placed before the women's clubs by the chairman of the health committee of the State federation of women's clubs:

The health committee asks you to concentrate upon the effort to make visiting nurses a part of the health equipment of every community; to place a woman upon every local board of health and upon the State board of health at Trenton.

Reference has already been made to the successful new plan for enforcing the birth-registration law in Cleveland; to the Ohio town which during baby week tried and convicted its own milk supply and has since started a vigorous reform movement; to the house-to-house canvass for unregistered babies made by the club women of New Orleans; and to the report from Wisconsin of a trained nurse.
who is giving talks on baby hygiene to young girls in the continuation schools. The launching of a school center in a North Dakota township, the determination of a small town in Wisconsin to get a school nurse, the plans of an Alabama county to achieve perfect birth registration and have lessons on the care of babies and young children taught in the schools—all mentioned elsewhere—are typical of the follow-up activities of many communities.

In large cities in which infant-welfare work was already well established baby week obtained a fuller support for such activities. The account of the Boston campaign, on page 24, illustrates this type of follow-up work.

Similarly, from the nurses who organized the baby day in a Michigan county comes this report:

Our baby day in the small town where we planned to try out this new idea, with the hope that it would be adopted generally through the county another year, proved a grand success. It is the first public-health movement ever held there upon the town's own suggestion, and, incidentally, it is the community where our work was most strongly opposed. The success was a wonderful victory for us and there is already a gratifying return tidal wave.

A nurse retained by a manufacturing concern in a Rhode Island town states that her visits have been received and understood recently as they never were before the awakening interest brought by baby week.

To direct and conserve the interest and enthusiasm bred by baby week several towns appointed standing committees. For example, a Pennsylvania city reports the appointment of committees on Little Mothers' Leagues, milk stations, prenatal clinics and mothers' conferences, health and sanitation, recreation, survey and exhibits, and finance.

In many places the follow-up work consisted in establishing infant-welfare and milk stations. One town illustrates how baby week gave an impetus for the carrying on of an infant-welfare station by the health department. The chairman writes:

We have succeeded in arousing much interest in the community, and the board of health is about to start a welfare station. The woman's club has been asked to take part by its members assisting the doctor when examining babies and by showing mothers how to prepare food. Our town has approximately 40,000 inhabitants, and last year the board of health received absolutely no appropriation from the town council. This year they are to receive something. I am not sure about the amount, so will not state it. The welfare station will be started with no funds, and will show the necessity of having such a place for mothers to be instructed in the care of their children.

Many of the baby weeks led to a campaign for a public-health nurse or helped such a campaign already under way. For instance, an Alabama town reports that a petition for a nurse was circulated.
after baby week; a Washington town, that the proposal to employ a county nurse met with new interest.

Other towns report that baby week brought a better understanding of public-health work already under way. For instance, in an Ohio town the public-health nurse has had a number of calls to give advice in prenatal cases—a new thing in her experience. From a Canadian city comes the following:

We have had the salary of our city child-welfare nurse increased and an assistant nurse placed under her. We have also established a free baby clinic in the city health department which is splendidly patronized.

Elsewhere follow-up programs took other forms, according to the needs of the community. In a Maine town the women’s organizations undertook to raise funds to pay a small fee to the doctor for examining 920 children in the city and rural schools. A Michigan town, in which attention was turned to bad school conditions, as a result of baby week, has had all the school children physically examined; they report finding many cases of adenoids, enlarged tonsils, and defective sight, and great need for dental care. The local chapter of the Daughters of the American Revolution undertook to provide for the most urgent cases and started a publicity campaign to rectify the poor lighting and bad conditions in the school buildings.

In many communities Little Mothers’ Leagues have been established. In a Pennsylvania town the superintendent of schools assures the baby-week chairman that instruction of the Little Mothers’ Leagues will go into the regular school course another year.

From a town in Illinois comes this report of follow-up plans:

One achievement of this week has been the fact that we secured the interest of the doctors. They have never before recognized any merit in the work attempted by our women’s organizations. It seems probable now that we shall have a mothers’ institute, an organization which will have for its object the dissemination of information on health, right living, and disease prevention. Several doctors have signified their desire to help, and a dentist has offered his services. The tentative plan is to hold three two-day sessions—one in the fall discussing the prevention and care of bad-air diseases; one in the spring devoted to cleaning, fly campaigns, and contagious diseases; and one in early summer, when infant feeding and the care of foods in summer will be intelligently presented.

In New Jersey public-health officials are planning an outline for a course of study on baby health for the women’s clubs. A Michigan town has started a night-school course for mothers. In a Missouri town a mothers’ community club has been formed.

An Ohio town has launched a child-welfare association, which is starting its work with an antify campaign. A New England town is planning a survey by a sanitary expert; this town is also making
plans to knit the town and the surrounding country into a closer union and to raise the standard of efficiency among town officials. An Alabama town is concentrating on its dairy situation; it is making a campaign for pure milk and the eradication of the cattle tick. A North Dakota town is fighting tuberculosis and working for birth registration and stricter quarantine rules. A Pennsylvania town is exterminating its mosquitoes. A town which celebrated only one day in North Dakota decided on that day to give hot lunches to the school children and to begin buying playground apparatus. A Nebraska city which had a good permanent exhibit has been taking it from school to school for the instruction of mothers.
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PART II. OUTLINE OF SUGGESTIONS FOR BABY-WEEK CAMPAIGNS.

PURPOSE AND GENERAL PLAN OF A BABY WEEK.

In addition to the description of campaigns contained in the foregoing pages, the following brief outline of practical suggestions may be useful.

The purpose of baby week, in general, is educational: To give to the parents of a community the opportunity of learning the facts with regard to the care of their babies, and to make known to a community the importance of its babies and the need of permanent work for their welfare and protection.

While the campaigns of 1917 will undoubtedly follow this general plan, it has been suggested that certain additions and modifications may be made.

The recent epidemic of infantile paralysis will of course modify the plans for baby week in any community in which such an epidemic has occurred, or where there seems any special reason to fear one. In such a community State and local health authorities should be consulted as to the form which baby week should take, especially before program features are included which involve bringing babies together. Among these features are baby parades, outings for mothers and babies, exhibits to which mothers bring their children, baby contests and conferences, etc.

In localities where there have been cases resulting in paralysis some demonstration of the methods of muscle training and other ways of restoring muscular activity will certainly prove of great interest. Systematic work in providing for all paralyzed children opportunity to secure proper after-care may form part of the follow-up work of such a baby week. Nowhere should the fact of the prevalence of infantile paralysis deter a community from a baby-week observance thus suited to the special conditions, since the celebration may be used to develop the public interest in infant welfare aroused by the epidemic. The statistics for the first 37 weeks of 1916 for New York City, where the epidemic was very pronounced, show that the baby death rate was actually lower during that time than it was for the same period of the year before, when there was no epidemic, and this improvement is ascribed to the popular response to
the precautions urged in the endeavor to meet the dangers of infantile paralysis.\footnote{New York City Department of Health. Weekly Bulletin, Sept. 30, 1916, p. 314.}

It is suggested that the baby weeks throughout the country should not only emphasize the needs of young babies but should include those of all children under school age. This suggestion has been given in the following terms:

It requires only 12 months for a baby to become 1 year old and no longer subject to the hazards of infant mortality, but there are still many risks for him to encounter; he is still absolutely helpless, although increasingly charming, and his parents are as eager to keep him well and happy, as desirous of sound advice, as they were last year. Open out the 1917 baby week to include children still at home with their mothers.

Another subject which it would be desirable to include for consideration in baby week this year is the question of the need of better care for mothers before and at confinement. A study recently made by the Children's Bureau has shown that the welfare of babies can not be separated from that of their mothers, and has demonstrated the unregarded waste of women's lives at the very moment when they are most necessary to their children. Therefore communities may well consider, in connection with baby week, what must be done to provide better prenatal and obstetrical care for mothers.

Finally, this year as well as last, the most important part of baby week is the follow-up work to which it leads. 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 to have it lead to permanent good for the babies of the community.

In the many communities which have already held one baby week of a general educational type a second celebration may well add to this general educational campaign particular emphasis on some one phase of infant-welfare work which is especially needed in the community, such as the establishment of a public nursing service, or an infant-welfare station, or a prenatal clinic, or a county center for maternal and infant welfare; the employment of a full-time health officer; the establishment of a division or bureau of child hygiene in the local health department; the improvement of the milk supply; the systematic after care of infantile paralysis; better birth registration, etc. Undoubtedly a great deal can be accomplished when the whole campaign is directed toward one end.

**ORGANIZING A BABY WEEK.**

Baby week should be a community campaign in which many organizations and individuals are asked to take part. One of the greatest benefits to be derived from baby week is the bringing together of many organizations for a common aim. Added to this is
the fact that everyone has a far greater interest in work in which he has a definite part.

Some organization or individual must take the lead, however, in organizing a baby-week campaign. This may be a women's organization, 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; or it may be some public-spirited individual.

In any case the first step should be to ask the cooperation of all agencies naturally interested in child welfare, as well as that of organizations representative of the varied interests of the community. The number and names of the cooperating organizations will vary greatly; in the larger towns and cities the list will 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 organizations; 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; labor unions; fraternal orders; other men's organizations, etc.

A meeting of representatives of these organizations may be called to discuss plans for baby week and to take the first steps in organizing committees. The group which calls the meeting should have a clear idea to present as to a suitable time for holding baby week, certain results that it hopes to accomplish, the approximate amount of money that baby week is likely to cost, and in a general way the scope of the campaign.

In organizing a county campaign an effort should be made to obtain the help and interest not only of organizations in the county seat and other towns within the county but also of county organizations, such as the county medical society, the farmers' organizations, and organizations of rural women. All teachers of rural schools and the rural churches should be consulted in the campaign. Especially important is the cooperation of county officials, such as the county health officer and superintendent of schools.

In country districts the campaign may be one either of the county as a whole, of a small town with the country district surrounding it, of a township, or of a single neighborhood or school.

Committees.

Experience has shown that every community knows best how to organize its committees. For counties, smaller towns, and rural communities, the descriptions of the organization of the campaigns in 1916, on pages 14 to 23, will be suggestive. For larger towns and
cities the following outline of committees and their duties may be useful:

Executive committee.
Finance committee.
Program committees.
Committee on baby-welfare information.
Publicity committee.

**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, a few members, not more than seven, may 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.

The desirability of employing a director or executive secretary depends largely on the extensiveness of the campaign and the availability of a competent volunteer worker who will give full time to directing the work for a period of weeks. 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.

**Finance committee.**—The finance committee should be appointed when 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. (See p. 14.)

**Program committees.**—A separate committee should be in charge of each daily event (for instance, flag day) or special feature (such as baby-health conference).

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

**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 subcommittees, at least on press, printing, advertising, educational pamphlets, and talks. 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.
Time of holding baby week.

A baby week may be held at any time during the year as part of the nation-wide campaign. In some communities, on account of local conditions, the date fixed for the national campaign may not be as suitable as another date earlier or later.

In the larger cities and where the campaign is extensive it is well to allow several months for the preliminary work. The organizer of a very successful campaign in a large eastern city writes as his opinion: "Two or three months of preliminary time for preparatory work can be made to multiply the efficiency and permanency of the results."

COST.

The first question which will be asked is, What will baby week cost? but it is the most difficult to answer. The cost will depend on the extent of the campaign, on the features carried out, and especially on the degree to which the committee succeeds in obtaining service and materials free. Celebrations in 1916 proved that where general cooperation is obtained a baby week can be held at little or no expense.

Items which must be considered in carrying out a full baby-week program and which must be obtained either through money payments or by contribution are printed matter, including educational literature, postage, expressage, and rental on borrowed exhibits, construction of original exhibits, hall and office rent, lighting, etc.

In large cities the cost of employing a paid director will usually be well worth while and will save the confusion and waste growing out of undirected effort. The employment of stenographers may be found a wise economy even in many smaller places. A study of the cost of characteristic campaigns held in 1916 may be of help. (See pp. 14 to 26.)

DETAILS OF BABY-WEEK PROGRAMS.

The program for a baby-week celebration may include several or all of the following features:

1. A program of special days, lasting for a part or the whole of the week, including several of the following or others to be originated: Baby Sunday, flag day, fathers' day, school day, outing day, parade and visiting day, birth-registration day, permanent-organization day, etc.
2. Obtaining of baby-welfare information.
3. Infant-welfare exhibit.
5. Meetings.
BABY-WEEK CAMPAIGNS.

6. Plays.

7. Competitions in poster making and essay writing, mothers' contests, etc.

8. Publicity and education through newspapers, advertising, and the distribution of leaflets and pamphlets on the care of the baby.

9. Follow-up work.

Program for a baby day.

In communities wishing to devote only a single day to the celebration the program may include any of the above features which can be easily carried out. The following program is suggested for a baby day:

1. Baby-health conference held during the morning and early afternoon.

2. A small exhibit, prepared locally, shown in connection with the conference.

3. An afternoon meeting for mothers.

4. Distribution of pamphlets on the care of the baby.

5. An evening meeting for everyone, with motion pictures or lantern slides, short talks, a play performed by children.

6. Articles in the newspapers.

7. A study, made before baby day, of birth registration in the community.

8. Follow-up work.

Or this simpler program:

1. A small exhibit shown in some central place; for instance, at the school or in the window of a general store.

2. A school celebration with essays or a play by the children.

3. An evening meeting at the school with lantern slides, a popular program, and a short address on the subject of baby day.

4. Articles in the daily or weekly newspaper.

5. Follow-up work.

Program of days.

The feature of baby week that affords the best opportunity for securing good newspaper publicity and for enlisting large numbers of volunteer workers is a series of special events for each day in the week. Committees may find helpful the descriptions of various "days" celebrated last year. (See pp. 35 to 43.) With regard to plans for a few of the days the following suggestions may be useful.

FLAG DAY.

On this day, which may come on the Saturday before baby week opens, or on Monday, banners are distributed to the homes of all
BABY-WEEK CAMPAIGNS.

babies under 1 year of age. In some smaller communities it may seem wise to include the homes of all children under 6 years.

The banners used may be small American flags, or they may be made up very cheaply of muslin, with some baby-week slogan or 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. Novelty makers or printers can make these banners.

The names and addresses of the babies may be obtained in various ways. A list of all babies whose births have been registered during the last year may be obtained from the local registrar, who must be asked to check the birth-registration with the death-registration list, so that no flags will be sent to homes where babies have died. Frequently those delivering the flags according to such a list will find babies whose births have not been registered. They will of course deliver the flags to these homes, and they should be instructed to report the names and addresses of these unregistered babies to the committee or to the registrar, so that they may be properly recorded.

Where a house-to-house birth-registration canvass has been made before baby week the lists obtained can be used for the flag distribution.

Delivery of the flags may be made by committees of women assisted by committees of boys. It is a good thing to have the boys carry small hammers and tacks, so that they can put the pennants in place when the householders are willing. With each pennant should be delivered a program of the local baby week, and a leaflet on the care of the baby. Special announcements of the infant-welfare exhibit or of the baby-health conference, if these are held, should also be distributed.

All those who are distributing flags must be able to give a clear and brief explanation of baby week and flag day.

The preparations for flag day in a large city require considerable care and plenty of time. Several days in advance a central committee on flag day should obtain from the health department the names and addresses of the registered babies. These will then be sorted by districts and the appropriate number of flags sent to the various headquarters from which the district teams will start out to make the distribution.

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 they publish beforehand an explanation of flag day.
BABY SUNDAY.

Baby Sunday may come at the beginning or at the end of 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.

Some communities may wish to ask all of these to preach on baby week or baby welfare on that day. If this is undertaken, members of the committee should call upon or write to each one who is asked to preach, and explain the purpose of baby week. In order to aid in the preparation of special sermons an outline of information on the subject of baby week should be furnished. In the appendix, page 109, will be found considerable material upon the subject of infant welfare and baby week, which may be incorporated in such an outline.

In any event there will probably be a general response to a request to give notice of the program of baby week on Baby Sunday, and to explain the purpose of the observance. The experience of the 1916 campaign in observing Baby Sunday is given on page 36.

Meetings to sum up the work and teachings of baby week may be held on the afternoon of the Sunday closing baby week. Church societies, whether of men or of women, 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 91.

FATHERS' DAY.

Suggestions for fathers' day will be found on page 36.

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 indoor program for bad weather should be planned.

VISITING DAY AND PARADES.

For this day the committee may arrange a tour of inspection of all the places where any work is done for babies, such as infant-welfare stations, day nurseries, or baby hospitals. 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 it is desirable that the public shall know more about the work that is being done and the need for developing it. 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.
BABY-WEEK CAMPAIGNS.

This tour of inspection may be combined with a parade. Various types of parades are suggested on page 37. This year it should be remembered that a parade of babies is one of the features bringing babies together, which it is unwise to include where an epidemic of infantile paralysis has occurred recently.

In arranging parades every effort should be made to avoid over-taxing the strength of mothers and young children. The most comfortable parades are those in which automobiles are furnished for all mothers and babies. An important feature which should not be overlooked in plans for a baby parade is the policing. Definite arrangements should be made for the special policing of street corners, etc., and should be published in advance in the papers, so that mothers will feel reassured.

SCHOOL DAY.

On one day during the week special exercises may be held in the schools throughout the city. These may be arranged as a regular part of the school work or as an afternoon entertainment to which parents are invited. Programs and ideas for contests for children are given on pages 38 and 51. Where prizes are offered they should be extremely simple. Plays have proved a very successful feature of school celebrations. (See pp. 54 and 134.)

In schools where Little Mothers' Leagues (see p. 98) 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 starting them.

The Baby-Week Manual, issued by the committee on meetings and demonstrations of the New York City Baby Week Committee of 1916 for use in the schools, gives many excellent suggestions for essays, programs, etc. Sample copies of this manual may be obtained on application to the department of health, New York City. This department will give permission to any community to reprint the manual in full, provided credit is given to the New York City baby week.

BIRTH-REGISTRATION DAY.

It may be well worth while to concentrate attention for one day on the importance of having all births registered. Many admirable methods of making interesting the subject of better birth registration were worked out this year through the ingenuity of committees and health officers. These are referred to on page 42.

Some committees may decide to make a preliminary investigation of the completeness of birth registration, so that a report can be presented on birth-registration day. (See pp. 43, 78, and 98.)
In several States, and in some cities in other States, the registration authorities send a card or certificate of notification to the parents when a birth is registered. This practice is helpful not only because it gives parents a document which may be preserved with as much care as a marriage certificate, but because it tends to bring about improvement in birth registration. The baby-week campaign would be a good occasion to emphasize the importance of having this notification sent out.

Local newspapers should be furnished with articles or material for articles on birth registration, in which incidents showing the practical value of birth registration should be included. The State and local health officers and in some cases State college or university authorities can be helpful in supplying the data. The Children's Bureau will furnish, on application, press material on this subject.

BABY-WELFARE INFORMATION.

One of the most important parts of a baby-week campaign is the gathering of accurate information not only upon local birth registration, but also as to the death rate of babies and the community conditions especially affecting them.

This information can be used in the campaign in a variety of ways—for the preparation of exhibit material, for newspaper stories, for printed matter, and for speeches throughout the campaign.

Birth registration.

Different plans may be followed in making studies of the local birth registration. Among those which have been carried out successfully are a house-to-house canvass of a whole city or town; a house-to-house canvass of a limited district; an investigation of a selected list of births. A leaflet giving full directions for carrying out a birth-registration test according to these or other methods will be sent on application to the Children's Bureau.

Baby death rate.

The committee in charge of obtaining this information should include in its membership the local health officer and registrar. In most communities, on account of the lack of complete birth registration, accurate data with regard to the baby death rate can not be obtained. Where complete canvasses of births are made, as above suggested, these will supplement the official records of births. The facts as disclosed by the records, however incomplete, should be studied.

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1 See also U. S. Children's Bureau. Birth Registration: An aid in protecting the lives and rights of children. Bureau publication No. 2.
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.

e) 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. Although in the smaller communities the number of babies born alive during a year may not reach 1,000, the rate is still given in 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 12.5 per 1,000.

(d) The number of babies under 1 year of age who died during the year from all causes; also the number of babies’ deaths and the percentage of the total number of babies’ deaths assigned to each of certain important causes, such as diarrhea and enteritis, congenital diseases and diseases of early infancy, and respiratory diseases.

These figures, when compiled, will show what is the most important cause of death among the babies in the community and will point to that factor which should be attacked first in an attempt to lower the baby death rate. For instance, one community may find that the majority of its deaths of babies under 1 year are due to diarrhea and enteritis occurring in the summer months. This fact points to the special need of infant-welfare stations, the instructive work of visiting nurses, and, possibly, of improvements in the milk supply, for it has been definitely proved that through these means diarrhea and enteritis among babies can be largely prevented.

Another community may find that few babies die from these diseases, but that congenital diseases and diseases of early infancy are to blame for the majority of the deaths. Here evidently there is need for better prenatal and obstetrical care given by physicians and nurses and for community measures for supplying them.

In smaller communities, where the figures upon which rates for one year must be based are very small, it will be better to use the figures not for one year only but for a period of three or five years.

1 Figures compiled at the Children’s Bureau from the tables published by the United States Bureau of the Census give the following distribution of infant deaths according to these three causes. These percentages are based on the average annual number of infant deaths for the five-year period 1908 to 1912 and relate to the States which were in the death-registration area in 1910: Diarrhea and enteritis, 25.6 per cent of all deaths under 1 year of age; congenital diseases and diseases of early infancy, including congenital malformations, congenital debility and premature birth, atrophy and marasmus, injuries at birth, and other conditions peculiar to early infancy, 34.8 per cent; respiratory diseases, including acute bronchitis, broncho-pneumonia, and pneumonia, 14.9 per cent; all other causes, 24.7 per cent.
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 or period studied, or one map may be prepared giving both the births and deaths in different colors. This will show graphically in which part of the community the largest number of babies die and will give evidence as to the general conditions leading to an excessive death rate. 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 heads.

Where a study of the figures cannot be made locally, information with regard to the local baby death rate may be obtained by applying to the State health officer or the State registrar of vital statistics.

Baby-welfare work.

A study should be made of what baby-welfare work is being done by the department of health or by private organizations, with the object of pointing out the further needs of the community. This would include studies of:

(a) Infant-welfare or milk stations or other types of permanent stations.
(b) Work by visiting or public-health nurses.
(c) Prenatal care and proper obstetrical and nursing care of mothers.
(d) Educational work by pamphlets, lectures, etc.
(e) Provision for sick babies at hospitals.
(f) Summer camps or tents for babies.
(g) Work done for the prevention of blindness among babies, including laws or ordinances and their enforcement.

Community conditions.

A study may be made of the local milk supply or of the other sanitary conditions of the community which affect the baby, such as water supply, housing conditions, disposal of garbage and sewage, etc. (See p. 44.)

These studies may form part of the program of women’s organizations during the winter.

If such studies can not be made preparatory to baby week, they may be included in follow-up work. (See p. 99.)
BABY-WELFARE EXHIBIT.

In the 1916 campaign an exhibit proved to be one of the most popular features of baby week. In arranging any exhibit to which mothers are allowed to bring babies or young children the State or local health authorities should be consulted as to whether the danger of any epidemic, especially one of infantile paralysis, renders such an exhibit inadvisable. (See p. 69.)

An exhibit may be used in many different ways.
1. It may be shown in connection with a baby-health conference or a meeting.
2. An exhibit may be the main feature of a central headquarters, combined with plays, meetings, or motion pictures. In this case practically all the publicity will be directed toward bringing people to the central place, and the methods will follow those used in conducting any social-welfare exhibit.1
3. Many small exhibits may be shown during baby week in different centers in a large city.
4. An exhibit prepared for baby week may be used later as a lending exhibit throughout a circuit. Such a circuit may be a series of centers in one large city or all the towns or the district schools of a county or all the towns in one section of a State.
5. An ingenious plan is to obtain the consent of merchants to arrange small exhibits in their windows in which suitable articles from their own stock will appear.

Different features which may be included in an exhibit are wall panels, exhibits of objects, and demonstrations.

Subject matter of an exhibit.

Many different subjects may be treated in a baby-welfare exhibit, but they should be kept distinct through the arrangement of the exhibit.

Among subjects which may be included are:
1. Care of child and mother.
   Care of the baby.
   Feeding—breast feeding, artificial feeding.
   Clothing.
   Fresh air, bathing, routine care.
   Care of the child up to school age.
   Feeding.
   Clothing.
   Play.

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Provided by the Maternal and Child Health Library, Georgetown University
1. Care of child and mother—Continued.
   Care of the mother.
   Prenatal care.
   Care at confinement.
   Care of children with paralyzed muscles.
   Muscle training, etc.

2. Community conditions.
   Birth registration.
   Baby death rate.
   Contagious diseases— including infantile paralysis.
   Milk supply.
   Water supply.

3. Community needs.
   Infant-welfare stations.
   Public-health nurses for infant-welfare and prenatal work.
   Larger appropriation for public-health work.
   Public outdoor recreation.
   Improvement in birth registration and in sanitary conditions—milk supply, housing, etc.

Securing exhibit material.

Exhibit material may be bought, rented, borrowed, or prepared locally. In general the most successful exhibits combine material which is prepared locally with that which is obtained in other ways.

Many State boards of health and extension departments of State universities and agricultural colleges have exhibit material which they will send out through the State to any organization paying transportation. On pages 121 to 131 of the appendix will be found a list of material available from these sources in various States. These departments are adding rapidly to their supply of exhibit material; therefore it would be worth while to make application to such State agencies for exhibit material even in cases where the agencies do not appear in this list.

Several national organizations and Federal departments have traveling exhibits on infant-welfare subjects. For a list of these organizations and departments and for details regarding their exhibit material, see appendix, pages 117 to 121.

It is well to make application for this material as long in advance as possible, as last year proved that there was an overwhelming demand at the last moment for all available material.

MAKING WALL PANELS.

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. In any case, most committees will wish to include panels illustrating local needs and conditions. Reproductions of a few typical panels on the care of babies are given in the appendix to Child-Welfare Exhibits. Committees may find it practical to copy these panels or others of which they can obtain reproductions, using photographs or pictures from magazines for the illustrations. In the appendix to this bulletin, page 116, are given lists of the subjects of the panels in several infant-welfare exhibits. In preparing material 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.

A small temporary exhibit may be made at slight expense, if cheap materials are used. In a temporary exhibit there is no need of framing the panels. They should, however, 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, and panels which are to have photographs pasted upon them need a stiffer ground than others. For larger panels the materials most generally available are beaver board, Upson board, and couppo board. For smaller panels corrugated strawboard, heavy cardboard, and binder's board may be used. The last two are usually obtainable in all communities.

Plain upright letters are best, varying in height from three-fourths of an inch to 2 to 3 inches for special display. The type of lettering known as gothic is very clear and easily read. On some tinted backgrounds lettering may be done 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.

Lettering is done best by a sign painter, if this expense can be incurred. The best substitute method is the use of pasted paper letters. These paper letters, with gummed backs, may be ordered at stationery shops. The lettering should be planned by a person with a sense of artistic balance, and pasted letters should be put on with great care.

A suggestion for making inexpensive panels is given on page 17.

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. An 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 they should be carefully chosen by the committee. The exhibit should include outfits at minimum cost and homemade substitutes. Exhibits in miniature of tiny dolls with clothing, furniture, etc., are attractive. They are especially useful in small exhibits to be sent from place to place. The exhibit may include proper clothing, sleeping and bathing arrangements, and articles used in the modification of milk and preparation of food for older children. (See Appendix, pp. 114 to 115, 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. See, also, p. 47 and illus. Nos. 12 and 13 for description and pictures of good exhibits of this kind.)

2. Articles which are injurious to the baby may be shown, such as pacifiers, soothing sirups, etc.

3. Proper food for children up to 6 years may be shown, including model meals for a day, school lunches of the Do Care and Don't Care families, and market baskets of the same two families.

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

5. Models showing good and bad dairies, methods of fly prevention, and methods of preventing water contamination are always of interest.

6. Homes of the Do Care and Don't Care families. (See Appendix, p. 116.)

Further suggestions for exhibits will be found on pages 45 to 49 and in the section on typical local campaigns.

DEMONSTRATIONS.

An exhibit which involves the activity of human beings is always more attractive than one composed solely of objects or wall panels.¹

Demonstrations on the care of the baby may consist of:

- 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.
- The use of homemade appliances—home pasteurizer, fireless cooker, iceless refrigerator, etc.

Demonstrations of infant-welfare work may show the work of an infant-welfare or milk station and of public-health nurses. Demonstration of muscle training for children with paralyzed muscles may be arranged by orthopedic surgeons. See page 45 for descriptions of successful demonstrations.

**Explainers.**

Explainers, whose task is to draw in visitors to the exhibit as well as to explain its details, are desirable for any exhibit. 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 are the best explainers at an infant-welfare exhibit, particularly if it is largely on the care of babies. Besides explaining the panels they may give demonstrations in the preparation of milk, in bathing the baby, etc.

**Publicity about the exhibit.**

It is essential that the exhibit be given proper publicity. The publicity committee of the baby week will have this in charge, but the exhibit committee will have to see that correct information with regard to the exhibit is furnished to the committee on publicity.

If an exhibit on the care of infants has been prepared, a special 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 useful 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 invited 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; Report of the Philadelphia Baby-Saving Show, Child Federation, Witherspoon Building, Philadelphia, Pa.; How to Use an Exhibit, Board of Health of the State of New Jersey, Trenton, N. J.; A B C's of Exhibit Making, Department of Surveys and Exhibits, Russell Sage Foundation, 130 East Twenty-second Street, New York, N. Y.

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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 a 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 in general 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 babies examined by pointing out the needs of each baby and the ways by which his physical condition may be bettered. It has been well said that contests in the past have done good in calling attention to the need and the possibility of upgrading the American child. But the contest attracts only the prospective prize winner and leaves out the great rank and file.

A baby-health conference, moreover, is a 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 the value 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.

It is to be noted especially that as baby-health conferences involve bringing babies together they are included among those features of baby week discussed on page 69. It is there stated that in a community in which an epidemic of infantile paralysis has occurred recently the State and local health officers should be consulted before a feature of this sort is included in the program for baby week.

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 out-
lined 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 given to the mother with regard to the proper care of her baby 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. Of the utmost importance is the careful making of appointments beforehand for the conference. Where babies are examined only by appointment the dangers and discomforts of children collecting in crowds can be avoided.

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, at the exhibit of the Children's Bureau at the Panama-Pacific Exposition, and during the past year in connection with baby week in many communities.

In these conferences a full physical examination, including one of the eyes, nose, and throat, is made of each baby; a printed blank is filled out, giving the results of the examination and notes with regard to the individual needs of each baby. This record sheet is given to the mother. 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 instead of a score card in these conferences gives space for notes on the age, height, weight, previous history, and any physical defects found in the 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.
Any simple form of record sheet which is decided upon by the medical staff of the conference and which gives space for notes on the physical condition of the child and notes on hygiene may be used.

On pages 132 and 133 of the appendix is reproduced a copy of the record sheet used by the Children's Bureau, filled out for a typical case. This record sheet has been reprinted by the American Medical Association and may be obtained on application to the secretary of the council on health and public instruction, 535 North Dearborn Street, Chicago, Ill.

A pamphlet of instructions for committees planning baby-health conferences or children's health conferences of this type can be obtained on application to the Children's Bureau.

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. 119.) Sample copies and a price list of score card, pamphlet, and anthropometric table may be obtained on application to the secretary of the council on health and public instruction, 535 North Dearborn Street, Chicago, Ill.

Baby-improvement contest.

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 babies were 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. 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 baby-health conferences according to a score card and a year later have held improvement contests in which the same babies entered for a second examination. In many baby weeks in 1916 the first examination in a baby-improvement contest was a feature.

COMPETITIONS OF VARIOUS KINDS.

Suggestions for competitions of various kinds may be drawn from reports of baby weeks on pages 51 to 53. When a prize seems desirable or necessary, it should be extremely simple.

For a better-mother competition a local newspaper may be glad to offer a small prize for the best letter on the care of the baby, written in answer to a series of questions published in the paper at the opening of the competition. After the letters are judged and the prizes awarded many of the best letters could be published. A committee composed of physicians and nurses should be given charge of drawing up the questions and judging the replies.

MEETINGS.

Mass meeting or rally.

A mass meeting may well form a useful feature of baby week, especially in smaller communities. 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 free some public hall, theater, or school. It is well to choose a place 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 the mass meeting;
many State departments of health are able, on application, to send out a speaker if his expenses 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," and "What other cities have done for their babies" may be included. Technical and medical subjects are not appropriate for a mass meeting.

It is well to advertise some features for such a meeting which will attract a popular audience. Lantern slides and motion pictures serve this purpose. In addition some popular numbers may well be added to the program.

It takes time, trouble, and thought to insure a good audience for a mass meeting. Moree has recently called attention to "Mass meetings that failed to mass" in an article which gives many excellent suggestions for securing a large attendance. Committees in each community will need to work out their own methods of gaining an audience. Several expedients were used successfully in 1916. (See p. 53) A few suggestions may be added:

Ample newspaper publicity is of primary importance. If a well-known speaker from away is to address the meeting, an outline of his speech should be secured and given to the newspapers in advance of the meeting, with his photograph, if possible, and a brief note as to his position, writings, etc. In some cases it is worth while to insert paid advertisements of a meeting.

Notice of the meeting may be given out in the churches and at meetings of societies. A large committee can divide a list of names and call on or telephone to each one on the list. In distributing tickets or printed notices or invitations care may well be taken to reach, by mail or otherwise, the members of all organizations, including civic associations, lodges, labor unions, churches, and church societies. Parents of school children should always be reached in some fashion. In addressing lists for notices of any kind, careful checking will avoid duplication.

It is well to remember that the more kinds of publicity a meeting receives the more people will be likely to come.

The choice of the program is of course the most important part of gaining an audience. Plays, tableaux, pageants, or choruses in which a large number of children or adults take part always insure a good audience of the relatives and friends of the performers.

In case the community is a center for a surrounding rural population every effort should be made to secure the presence of people from the country.

Informal meetings.

These are very desirable in connection with the exhibit or the health conference; in large cities it is well to plan such meetings at many different centers throughout the city in settlement houses, public halls, or schools. Informal meetings may be held 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 or tableaux may be used.

TALKS AT MEETINGS OF CLUBS AND SOCIETIES.

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. 138.) 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 of 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 has an outline of suggestions for programs on "The community and the child" which includes a list of references and may be of service in this connection. Copies will be sent free of charge on application.

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 and extension divisions of State universities 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 Appendix, page 121, for a list of available material of this type for each State.
In addition lantern slides may be bought, rented, or borrowed from other sources. (See Appendix, pp. 117 to 121.)

**Motion pictures.**

While motion pictures are among the most popular forms of education and many communities desire to use them, unfortunately at present there do not seem to be enough films available on baby welfare, either from commercial exchanges or private organizations, to make up a list that would be useful. Comparatively few films have been produced 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.**

Plays in which children take part may be given at school as part of school celebrations or parents' meetings, at settlement houses or other neighborhood centers, at the campaign center, or at the exhibit. They are valuable in giving interest to a large evening meeting.

In producing the plays it is well 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 and will make it possible to give many more performances, as it is not desirable to have the same group of children take part every day during baby week.

Some committees may prefer to use original plays by local writers. Tableaux and pageants may be originated to suit local conditions. A number of health plays for children are available. They are listed on page 134 of the appendix, with an outline of the story, number of characters, and the necessary costumes and stage setting.

**Pamphlets on Baby Welfare.**

The opportunity to distribute educational pamphlets and leaflets on the care of the child and the mother is a very important feature of baby week. These can be distributed in many ways—at an exhibit, at a children's health conference, at meetings for mothers, or with the flags on flag day. (See pp. 36 and 55.) An effort should be made, however, not to waste the material. In most cases the leaflets and pamphlets on baby and child care, prenatal care, and infantile paralysis, as well as on after-care of paralyzed muscles, 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 117 of the Federal departments and national organizations from which pamphlets may be obtained, and on page 121 of the State agencies furnishing such material.

PUBLICITY.

Newspapers.

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 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 suggestions for newspaper publicity:

First. A news story when the baby week is first decided upon, followed by other stories at intervals, and daily stories during baby week.

Second. A special department in one or more papers during baby week, such as a series of articles on the care of babies, a question-and-answer department, or a series of stories on baby-welfare work and the local conditions and plans.

Third. 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.

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

Every news 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 page 56; also, Appendix, page 136.

On pages 55 to 64 will be found descriptions of publicity methods which have proved useful.
Cooperation of merchants and other business men.

The committee should bear constantly in mind that the primary purpose of baby week is an educational campaign and all cooperation offered should be tested by this standard. In every community there are public-spirited merchants who will cooperate with the committee and will contribute window space or articles for exhibits which the committee approves, and who will assist in the distribution of posters and educational material supplied by the committee.

It is of the utmost importance that any printed matter or exhibit material used by merchants under the committee’s sanction should be approved by the committee.

If possible the committee should try to arrange with merchants in advance for suitable window exhibits.

Every effort should be made to discourage meetings or baby examinations which are not under the supervision of the baby-week committee upon which are represented the medical society, the department of health, and the women’s organizations.

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 sections is to bring before the public a realization of the facts relating to baby welfare 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. As suggested before, some communities may find it wise to concentrate during baby week on one particular phase of work; here an especially good opportunity will be given for follow-up work after the celebration.

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.

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 campaign will naturally be directed toward giving these public activities continued intelligent support and will emphasize the need of studying the city’s responsibility for bettering sanitation, housing, and industrial conditions.
BABY-WEEK CAMPAIGNS.

In communities 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 the popular support which will enable these departments to take up such work. The follow-up campaign here will also help private organizations. The stimulation of better cooperation among 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 local needs.

**Public-health or visiting nurses.**

Recent years have proved that an indispensable part of any work for the welfare of babies, as well as of all public-health work, is public-health nursing. This service is needed in country and city alike.

Public-health nursing differs from private nursing in that it is concerned with the health of all the people of the community rather than with that of one individual. The public-health nurse is at the service of every member of the community. Those desiring her services in their homes who can pay for her visits do so, but those unable to pay may call upon her without charge. Her function is to concern herself with all the conditions in the community which may have a bearing on the health of its citizens. She is a public servant rather than a private luxury. By instruction, by demonstration, by inspection, and by the giving of nursing care she will try to increase the common knowledge of the prevention of disease and the maintenance of health on the one hand and will teach the community to recognize the early signs of disease and will explain the methods of checking its progress and restoring health on the other.

One of her primary duties is to work for the saving of infant lives. By her advice to mothers during the period of pregnancy and her guidance through the first critical years of the baby's life she can supplement the doctor's services in keeping the baby sturdy and free from illness. In addition to instruction, many public-health nurses give nursing care during the lying-in period and in the event of any illness of the baby or other member of the family.

In the school the public-health nurse finds an excellent opportunity to discover any physical defects that may be developing in the school child. By early discovery and prompt eradication the results of such defects may be made almost negligible. She looks for symptoms of eye strain, of adenoids and enlarged tonsils, of poor teeth, of malnutrition, of nervous disease, of heart disease, or of contagious disease.
Another important duty of the public-health nurse is to discover tuberculosis in its early stages, to assist the patient to secure immediate treatment looking toward the arrest of the disease, and to teach him how to protect his family and associates from infection.

By formation of health leagues, little mothers' classes, mothers' clubs, girl scout classes in hygiene and home nursing, or other similar clubs and classes, the nurse seeks to carry the knowledge of the laws of health into the homes.

During baby week publicity may be given through talks, newspaper articles, exhibits, etc., to the need for public-health nursing in the community.

The cost of employing a public-health nurse depends somewhat on local conditions. The salary of a nurse qualified to do this work varies between $75 and $125 a month. In addition allowance must be made for transportation, telephone, and incidental expenses.

The cost of a nursing service is in some cases met by private subscription, in others by public funds, in others by a combination of the two. Many boards of education and health departments, city or county, now employ nurses: and there is a constant tendency for them to take over the work of private organizations. In several States laws have recently been passed allowing county boards of supervisors to appropriate money for the employment of nurses.

A pamphlet on public-health nursing makes the following statement: "Every community has resources which become more accessible when once it is convinced of the value of the nurse's work. For this reason it is advised that if six months' salary is available the work should be put under way. This is the best method of educating a community to the need and usefulness of a visiting nurse."

The National Organization for Public-Health Nursing, 600 Lexington Avenue, New York City, stands ready to help any local organization that desires its assistance. For instance, it will furnish copies of a suggested constitution and by-laws, together with rules and regulations for the nursing service, also a monograph describing the organization and administration of a visiting-nurse service. It will give advice on methods of organization and of raising funds; it will assist in securing suitable nurses; it will send its executive secretary for consultation or public speaking; and it will render any other assistance, except that it will not undertake actual supervision or administrative responsibility.

Associations in small towns and in rural districts may obtain special help from the Town and Country Nursing Service of the American Red Cross, Washington, D. C. Committees associating their work with the Red Cross through affiliation will receive assistance.

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1American Red Cross Town and Country Nursing Service. General Outline, 1914, p. 16.
in organizing and in securing nurses especially qualified for work in such communities. The Red Cross will supply upon request a general outline including suggestions for organization and administration.

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. It amounts to a current textbook on the activities of public-health nursing.

**Infant-welfare stations.**

Infant-welfare stations have proved their value. The Children’s Bureau has information regarding 539 stations maintained, at least during the summer months in 1915, in 142 cities in the United States which had a population of 10,000 and over in 1910. In 60 of these cities infant-welfare stations were carried on by the health department or by the health department in cooperation with private organizations, and in the remainder by private organizations. There is a growing tendency for health departments to take over the work.

To infant-welfare stations mothers bring their babies 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 help 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 the mother 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. The Children’s Bureau has records at present of prenatal work being carried on in 188 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.”

In smaller communities and in rural districts an infant-welfare station of the type successful in cities may not be practicable. Here a “center for infant and maternal welfare” may, however, be feasible.

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Provided by the Maternal and Child Health Library, Georgetown University
This may be established at a county seat, possibly in the courthouse; here the local or county nurse may have her headquarters; there may be a rest room for mothers and babies, scales for weighing the baby, objects for use in demonstrations by the nurse, a small exhibit on baby and maternal welfare, and literature for distribution on the care of mother and baby. Here the nurse can be consulted by mothers from the surrounding country; the baby can be weighed, and advice on the care of mother and baby given. Here baby-health conferences can be held by physicians at regular intervals.

Information with regard to the equipment and establishment of infant-welfare stations will be given by the Children’s Bureau on request.

**Instruction of young girls in infant hygiene.**

In some cities instruction in infant hygiene 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 among schoolgirls may be obtained from the Children’s Bureau, from the divisions of child hygiene of the New York City and the New York and Kansas State Departments of Health, and from the Child Federation, Witherspoon Building, Philadelphia.

**Birth registration.**

If the question of birth registration has not been given any special emphasis in the preliminary work or in the actual campaign, the suggestions made on page 77 may be of assistance in forming plans for follow-up work. To secure permanent results the committee should consult with State and local registration authorities: should ascertain by inquiry of these officers or by correspondence with the United States Census Bureau, Washington, D. C., or with the Children’s Bureau whether the State registration law needs amending or whether a new law is needed; and should make some investigation to ascertain whether the law is adequately administered. Suggestions concerning types of investigation may be obtained by addressing the Children’s Bureau.

If the question of birth registration has been emphasized in the campaign, the follow-up work may consist chiefly in devising methods to keep the subject fresh in the minds of the parents in the community. The State and local registration authorities may be consulted as to the best method of doing this.
It is desirable that parents should receive a notification from the State or local registration authorities when their child's birth has been registered, and as much publicity as possible should be given to this idea. (See p. 42.)

Divisions or bureaus of child hygiene.

A few States—Kansas, New Jersey, New York, and Ohio—have distinct divisions of their State departments of health carrying on work for infant and child hygiene. A State baby-week campaign may so crystallize public sentiment that the establishment of such a division in the State health department may result.

Twenty cities reported in 1915 the existence in the city health department of a bureau or division of child hygiene. Baby week may give the needed opportunity to work for the organization of such a bureau or division in other cities. The health departments in smaller cities and rural counties receive inadequate appropriations as a rule. Public sentiment may be aroused through baby week to increase such appropriations and to establish health protection on a firm basis.

Improvement of community conditions.

Each community before or after baby week may study the community conditions affecting its babies (see p. 44), such as the local milk supply, the sewerage system, the support given the health department, methods of garbage disposal, housing regulations, and enforcement, and may use the interest aroused by baby week to bring about an improvement.

STUDY CLUBS.

Women's organizations may arrange a series of programs covering community conditions as they affect children. Suggestions for a series of studies by women's organizations will be sent on request to the Children's Bureau. Clubs may be organized for the study of the care of the baby, the mother, and the child.

The excellent educational literature now easily procurable on these subjects may be studied.

The various follow-up programs developed by 1916 campaigns (see p. 64) illustrate many other different lines of work for the welfare of the baby which may be followed after baby week.

The Children's Bureau has in preparation a bulletin giving in more detail suggestions for follow-up work. This bulletin may be obtained free on application as soon as it is available.

---

PLEASE REPORT ON YOUR BABY WEEK.

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. Did you have any new and unusual features that were successful?
12. Follow-up work planned.
13. Did you have a campaign before, and what changes did you find it wise to make in this campaign?

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

COMMUNITIES IN WHICH A BABY-WEEK CAMPAIGN
WAS HELD IN 1916.

(The total number of places shown in this list for Kansas, Kentucky, Louisiana, Mississippi, Nebraska, Tennessee, Texas, and Wyoming do not agree with the totals for these States shown on page 11. In each of these States the official report from State authorities gave a definite number of local campaigns, but did not name all the communities. Names of all communities follow the form given in the United States Official Postal Guide.)

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  Camilla.
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  Colleezepark.
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  Commerce.
  Covington.
  Cuthbert.
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  Dublin.
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  Haddock.
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Indiana:
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  Perry.
  Ralston.
  Redfield.
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Provided by the Maternal and Child Health Library, Georgetown University
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</table>

1 Cooperation among the Oranges in celebrating campaign.

Provided by the Maternal and Child Health Library, Georgetown University
North Carolina—
Continued.
Goldsboro.
Greenville.
Oxford.
Randallman.
Sallieburg.
Spay.
Vineyard.
Waynesville.

North Dakota:
Alexander.
Anbrose.
Aneta.
Ashley.
Bathgate.
Beech.
Bermaur.
Bottineau.
Bowman.
Cando.
Carington.
Casselton.
Cavalier.
Ceswell.
Columbus.
Crosby and Fillmore Township.
Crystal.
Devils Lake.
Ellendale.
Fargo.
Fessenden.
Flaxton.
Getchell Prairie (p. o. Valley City).
Grand Forks.
Hankinson and Green
dale Township.
Jamestown.
Jugula.
Jud.
Kennan.
Lako.
La Monroe.
Langdon.
Larimore.
Leit.
Leeds.
Leith.
Lidgerwood.
Lignite.
Libson.
Marion.
Mayville.
Minot.

New Rockford.
Niagara.
Oakes.
Oriska.
Pembina.
Pettibone.
Rugby.
St. Thomas.

North Dakota—
Continued.
Tevian.
Turtle Lake.
Valley City.
Velva.
Wahpeton.
Wallula.
Westhope.
Williston.
Wimbledon.

Ohio—Continued.
County schools throughout State generally participated.

Ohio:
Akon.
Alliance.
Amherst.
Ashland.
Ashstuba.
Athens.
Baltimore.
Batavia.
Berlin Heights.
Bethel.
Bowling Green.
Baton.
Cadiz.
Cincinnati.
Cleveland.
Columbus.
Conneaut.
Continental.
Coshocton.
Crestline.
Dayton.
Delta.
East Liverpool.
Fosteria.
Fremont.
Gallia.
Garrettsville.
Greenfield.
Greenville.
Harrison.
Jackson.
Jefferson.
Kenton.
Lima.
Lorain.
Marion.
Marion.
Mechanicsburg.
New Straitsville.
Newark.
North Kingsville.
Norwood.
Oxford.
Ravenna.
Ripley.
St. Paris.
Salem.
Sandusky.

Oklahoma:
Bartlesville.
Collinville.
Drumright.
Edmond.
Elk City.
Fairfax.
Halloville.
Marlow.
Muskegee.
Nowata.
Pawhuska.
Sister.
Wagoner.
Wewoka.
Woodward.

Oregon:
Ashland.
Corvallis.
Joseph.
Klamath Falls.
La Grande.
Medford.
Oregon City.
Pendleton.

Pennsylvania—
Allentown.
Arnoore.
Bethel.
Bryn Mawr.
Butler.
Carrick (p. o. Pittsburgh).
Chester.
Clarion.
Clifton Heights.
and Afton.
Conneautville.
Collingdale (p. o. Darby).
Columbia.
Concord.
Connelsville.
Coudersport.
Cynwyd and
Penndel.

Provided by the Maternal and Child Health Library, Georgetown University
Pennsylvania—Continued.
Barrington, Pa.
Chester, Pa.
Troy, Pa.
Upper Darby, Pa.
Warren, Pa.
Washington, Pa.
Wayne, Pa.
Wilkes-Barre, Pa.
Wilkinson, N. Y.
Windsor, N. Y.
York, Pa.
Rhode Island:
Apponagansett, R. I.
Barrington, R. I.
Bristol, R. I.
Chepachet, R. I.
Comiucut, R. I.
Cranston (p. o. Providence), R. I.
East Greenwich, R. I.
Hope Valley, R. I.
Kingston, R. I.
Newport, R. I.
North Providence, R. I.
North Smithfield, R. I. (p. o. Providence), R. I.
Pascoag, R. I.
Pawtucket, R. I.
Providence, R. I.
Smithfield, R. I.
Warren, R. I.
Washington, R. I.
Westerly, R. I.
Woonsocket, R. I.
South Carolina—Continued.
Aberdeen, S. C.
Gaffney, S. C.
Clarendon, S. C.
Columbia, S. C.
Darlington, S. C.
Dillon, S. C.
Edgefield, S. C.
Florence, S. C.
Greenville, S. C.
Johnston, S. C.
Lancaster, S. C.
Landrum, S. C.
McColl, S. C.
South Dakota:
Aberdeen, S. D.
Clark, S. D.
Deadwood, S. D.
Elk Point, S. D.
Gettysburg, S. D.
Howard, S. D.
Letcher, S. D.
Madison, S. D.
Mission Hill, S. D.
Pierre, S. D.
Sioux Falls and Minnehaha County, S. D.

Tennessee:
Ashland City, Tenn.
Chattanooga, Tenn.
Clarkeville, Tenn.
Cleveland, Tenn.
Dyersburg, Tenn.
Fayetteville, Tenn.
Knoxville, Tenn.
Maryville, Tenn.
Memphis and Shelby County, Tenn.
Vermilion, Tenn.
Watertown, Tenn.
Yankton, S. D.

Texas:
Amarillo, Tex.
Arlington, Tex.
Austin, Tex.
Bastrop, Tex.
Bay City, Tex.
Beaumont, Tex.
Belton, Tex.
Bloomington, Tex.
Brenham, Tex.
Brownsville, Tex.
Brownwood, Tex.
Bryan, Tex.
Calvert, Tex.
Cameron, Tex.
Carrizo Springs, Tex.
Childress, Tex.
Chireno, Tex.
Cisco, Tex.

This community reports a celebration in which one or more neighboring communities participated.
COMMUNITIES IN WHICH A BABY-WEEK CAMPAIGN WAS HELD, 1916, CLASSIFIED ACCORDING TO POPULATION.

Total number of communities represented in the inquiries received by the bureau expressing interest in organizing a campaign and asking for instructions and literature ........................................................................... 4,234

Total number of communities for which the bureau has received definite information that a campaign was held .................................................................................. 2,100

Communities represented in reports received:

Incorporated places with a population of—

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<thead>
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<th>Population</th>
<th>Number</th>
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<td>Under 2,500</td>
<td>682</td>
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<tr>
<td>2,500 to 10,000</td>
<td>488</td>
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<tr>
<td>10,000 to 25,000</td>
<td>181</td>
</tr>
<tr>
<td>25,000 to 100,000</td>
<td>129</td>
</tr>
<tr>
<td>100,000 and over</td>
<td>47</td>
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</table>

Unincorporated places ................................................................................. 210

Local campaigns reported by State authorities without name or size of community .................................................................................. 362
SUGGESTIONS FOR A CIRCULAR OF INFORMATION FOR USE IN THE PREPARATION OF SERMONS AND NEWSPAPER ARTICLES.

Infant mortality rate.

What is an infant mortality rate? The term "infant mortality rate" or "baby death rate" means 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 per 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 its utmost to lower this rate by all methods that have proved successful elsewhere.

What is the infant mortality rate of the United States? This can be given only for a limited part of the whole country, which is the recently established birth-registration area, representing 31 per cent of the total population of the United States. It includes the six New England States, New York, Pennsylvania, Michigan, Minnesota, and the District of Columbia. The infant mortality rate of this area in 1915 was 100 per 1,000 live births. That is, of every 10 babies born alive, 1 died before it reached its first birthday. For the remainder of the country we have no reliable statistics. About one-fifth of the deaths occurring each year at all ages are of children under 1 year.

How do the infant mortality rates of other countries compare with the rate of the birth-registration area of this country?

Deaths of infants under 1 year of age per 1,000 live births in the birth-registration area of the United States and in foreign countries.

<table>
<thead>
<tr>
<th>Country</th>
<th>Infant mortality rate</th>
<th>Country</th>
<th>Infant mortality rate</th>
</tr>
</thead>
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<tr>
<td>United States, registration area only (1915)</td>
<td>100</td>
<td>Italy (1913)</td>
<td>137</td>
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<td>England and Wales (1913)</td>
<td>91</td>
<td>Norway (1913)</td>
<td>65</td>
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<td>France (1913)</td>
<td>94</td>
<td>Sweden (1913)</td>
<td>71</td>
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<td>German Empire (1912)</td>
<td>107</td>
<td>Denmark (1913)</td>
<td>94</td>
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<td>Austria (1912)</td>
<td>147</td>
<td>Belgium (1912)</td>
<td>120</td>
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<td>Russia in Europe (excluding Finland and the provinces in the Volga and of the Caucasus, 1910)</td>
<td>220</td>
<td>Holland (1915)</td>
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<td>248</td>
<td>Switzerland (1913)</td>
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<td>Japan (1911)</td>
<td>117</td>
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<td>Australia (1913)</td>
<td>72</td>
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"The same conditions which cause the death of 13 out of every 100 babies born throughout the civilized world, on the broadest of averages, 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 as to means 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 termed urgent."—E. B. Phelps.

"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 a weak constitution 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 of these diseases 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
BABY-WEEK CAMPAIGNS.

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 U. S. 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 PARENTS IN PREVENTING BABIES' DEATHS.

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 IN PREVENTING BABIES' DEATHS.

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

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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, U. S. 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 555 infant-welfare stations in 345 different localities; England has over 200, and before the war there were 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, and bad sewerage 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.

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.

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 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.

John Purroy Mitchel, Mayor.

JUNE 17, 1914.

A CIRCULAR DISTRIBUTED TO TEACHERS IN WASHINGTON, D. C., AS BASIS FOR TALKS TO PUPILS ON LITTLE-MOTHERS' DAY.

1. Bathing.—Baby should be bathed every day because the skin of a baby is very tender, and very little irritation will cause trouble. Have everything ready before you begin the bath. Be sure the room is warm and that there are clean, dry, warm clothes ready to put on baby quickly after the bath. You will need a basin of warm water, soap, wash cloth, towels, powder, solution of boracic acid, and absorbent cotton.

Before undressing the baby bathe the eyes gently with boracic-acid solution. Cleanse each nostril with a twist of absorbent cotton moistened the same way. Next wash the face and ears with a wash cloth wrung out of the water and wipe at once with a thin soft towel. Then soap the head carefully, rinse off well, and dry.

Now undress the baby and soap it all over quickly. Then put baby in the tub, rinse all the soap off well, and lift baby out and dry. The time in the water should not be more than 2 minutes.

2. Feeding.—Every baby should be fed on mother's milk for the first few months. It has just the right things in it to make the baby strong and well. It is always ready, always warm, and always clean and free from germs. Baby should be fed regularly, every three or four hours. Baby should not have anything else to drink except cool boiled water. If baby can not be nursed it should be fed on a modification of cows' milk. The mother should be sure the milk she buys for the baby is clean and cold and safe. Dirty milk may kill the baby. The doctor must tell the mother how to prepare this milk. She must have everything very clean that she uses to fix the milk in, and as soon as it is fixed it should be put in the ice box and kept there. The mother should never put the nipple in her mouth. The bottles must be kept very clean. The greatest care must be taken that the baby's food does not stand in the sun or get dirty and that no flies come near it.
3. **Sleeping.**—A young baby should sleep practically all the time, except when it is being fed or bathed. It should always sleep alone in a basket or crib; never in the bed with its mother. It should never sleep in a room with the window closed. It is a very good plan to let the baby sleep out of doors in the daytime if it is well wrapped and protected from the wind. When the baby gets a little older it should sleep straight through from 6 p.m. to 6 a.m., and should have a long nap in the morning and again in the afternoon. The more sleep the baby and growing child have, the stronger they will be. They should never be kept up in the evening.

**Baby will be well and happy if he—**

- Has the right food.
- Has a bath every day.
- Is kept dry and clean.
- Sleeps alone in a quiet, cool place.
- Breathes fresh air day and night.
- Is given pure, cool water to drink.
- Is dressed according to the weather.
- Is protected from flies and mosquitoes.
- Is kept away from sick folks and crowds.
- Does not have to be shown off for visitors.
- Is not kissed on the mouth, even by his mother.

**Baby will be unhappy and cross if he—**

- Is given a pacifier.
- Is allowed to go thirsty.
- Is taken up whenever he cries.
- Is fed at the family table.
- Is not kept dry and clean.
- Is shaken up and down.
- Is taken to the movies.
- Is dosed with medicine.
- Is teased and made to show off.
- Is bothered by flies and mosquitoes.
- Is not a fresh-air baby.

It is easier to keep baby well than to cure him when he gets sick.

**ARTICLES IN THE CHILDREN'S BUREAU EXHIBIT ON INFANT CARE AT THE PANAMA-PACIFIC EXPOSITION.**

**Clothing for the baby.**

*Hot-weather costume.*—Cotton band and diaper.

*Winter costume.*—Shirt, diaper, band, stockings, shoes, skirt, slip, nightgown, and wrapper.

Two dolls dressed in these costumes.

**Sleeping arrangements.**

*Homemade crib for young baby.*—Clothes basket, mattress of silence cloth, mattress cover, rubber sheeting, 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.**

A washable "hospital" doll, which may be used by the nurse in demonstrating the baby's bath, low table and chair, bathtub, pitcher for warm water, bath thermometer, towels, 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-ounce cylindrical), nipples, covered glass for nipples, clean forks, 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. 40-46), tablespoon, double boiler for cooking cereals.

Scale 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, Children's Bureau publication No. 8, page 24.

ARTICLES WHICH HAVE BEEN USED IN BABY-WELFARE EXHIBITS.

Homemade ice box. (See Infant Care, p. 41.)
Homemade fireless cooker. (See Circular 776, States Relations Service, U. S. Department of Agriculture.)
Homemade iceless refrigerator. (See Circular 778, States Relations Service, U. S. Department of Agriculture.)

Good and bad school luncheons shown in Corpus Christi (Tex.) baby-week exhibit.

GOOD SCHOOL LUNCHES.

I.

Egg sandwich.
Brown bread and butter.
Mold of apple tapioca.
Orange.

II.

Chicken-salad sandwich.
Crisp finger roll.
Nut and date sandwich.
Apple.

III.

Cheese sandwich.
Apple and celery sandwich.
Sponge cake.
Orange.

IV.

Club sandwich.
Graham bread and butter.
Jelly roll.
Apple.

V.

Peanut-butter sandwich.
Raisin and apple sandwich.
Candy.
Orange.

BAD SCHOOL LUNCHES.

I.

Hard fried egg.
Thick soda biscuit.
Apple pie.
Banana.

II.

Sausages.
Dill pickles.
Soggy rolls.
Raw onions.
Doughnuts.

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

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. | DON'T CARE. |
| Neat and clean wall paper. | Ugly and untidy wall paper. |
| Windows screened. | No screens. |
| No flies. | Flies. |
| Milk covered. | Milk uncovered. |
| Clean stove. | Dirty stove. |
| Dust cloths, etc. | Feather duster, etc. |

TITLES OF PANELS IN SEVERAL BABY-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 Feces.
- 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.
- 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.
BABY-WEEK CAMPAIGNS.

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.

TRAVELING EXHIBITS, LANTERN SLIDES, AND EDUCATIONAL LITERATURE OBTAINABLE FROM VARIOUS SOURCES.

Exhibit material in many cases is lent free, if transportation is paid. In some cases a small rental fee is asked in addition. Many of the small poster exhibits may be purchased at a low price. 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.

Provided by the Maternal and Child Health Library, Georgetown University
For leaflets and pamphlets write to the publishing agency as here indicated. The Children's Bureau can supply only its own publications and material.

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.

*Lantern slides.*—Set of 50 lantern slides on infant care, each slide having an appropriate label of explanation; no outline for lecture.

*Motion-picture film.*—A Day in Baby's Life. A film giving details of the care of the baby; suitable to serve as accompaniment to a lecture to women or young girls on the care of the baby. Film can not be lent, as it is worn out, but upon request permission will be given to departments of health and private organizations to have copies of the film made from the negative. Length of film, about 1,500 feet.

*Bulletins, etc.*:

- *Prenatal Care.*—A 35-page bulletin dealing with the care of the mother during pregnancy.
- *Infant Care.*—An 81-page bulletin dealing with the care of babies up to 2 years of age.
- *Child Care.*—(In preparation.)
- *Maternal Mortality from all Conditions Connected with Childbirth.*
- *Baby-Week Campaigns.*
- *Birth Registration.*
- *How to Organize a Children's Health Conference.* (In press.)

For a complete list of all Children's Bureau publications, see pages 2 and 3 of cover.

*Other forms of assistance in a baby-week campaign:*

- Press material on baby week.
- Press material on birth registration.
- Leaflet of directions for carrying out a birth-registration test.
- Outline of suggestions for programs on The Community and the Child.
- Circular of information about motion-picture films on child-welfare subjects.
- Information about organizing Little Mothers' Leagues.
- Information about equipment, etc., of infant-welfare stations.

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

*Lantern slides.*—Two thousand views dealing with various public-health problems; 80 slides on the subject of milk.

*Bulletins, etc.*:

- Same, printed in Slovak.
- *Summer Care of Infants.*—Public Health Reports, Supplement No. 16. 15 pp.

A number of publications on such subjects as children's diseases, infantile paralysis, malarial, tuberculosis, typhoid fever, open-air schools, milk, water, etc., closely related to baby welfare, are also available for distribution. A complete list will be furnished on request.

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

*Exhibit material.*—Food and diet charts in colors; useful in exhibits on the subject of food for young children. To be obtained from the Superintendent of Documents, Washington, D. C. The set of 15 charts, $1; single charts not sold separately.

*Bulletins, etc.*:

- *Food for Young Children.*—Farmers' Bulletin 717.
BABY-WEEK CAMPAIGNS.

American Association for Study and Prevention of Infant Mortality, 1211 Cathedral Street, Baltimore, Md.

Exhibit material.—(a) General traveling exhibit. 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. (b) Parcel-post exhibit. Photographic reproduction of general traveling exhibit; 20 wall panels, unframed, mounted on muslin; size, 34 by 42 inches; weight, 15 pounds.

Lantern slides.—Collection of 50 slides, based on traveling exhibit, accompanied by brief descriptive statement.

Leaflets, etc.:—
Motherhood.—A 6-page leaflet on prenatal care.
Care of the Baby.—Educational leaflet No. 1. 4 pp.

American Medical Association, Council on Health and Public Instruction, 535 North Dearborn Street, Chicago, Ill.

Exhibit material.—(a) Fifteen exhibit panels, 25 by 38 inches, printed on durable paper. These panels are reproductions of exhibit panels prepared by the Children's Bureau and the American Association for Study and Prevention of Infant Mortality. Sent by parcel post. Price list upon application to the secretary of the council on health and public instruction. (b) Cartoons on public health, available for exhibits; cuts of the same.

Pamphlets, score cards, record sheets, etc.:—
Save the Babies.—Pamphlet No. 7. Pamphlet on the care of babies. 19 pp.
Summer Care of Babies.—Twenty-four page pamphlet.
Score cards for use in baby-health conferences.
Record sheets for use in baby-health conferences in which score cards are not used.
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 of the council on health and public instruction; 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 Red Cross Town and Country Nursing Service, Washington, D. C.

Exhibit No. I.—Six cabinets, photographs and models relating to public-health work of nurse; each cabinet 8 feet 6 inches by 34 inches by 10 inches; includes one cabinet on infant-welfare work; weight, ready for shipment, 1,200 pounds.

Exhibit No. II.—Thirteen panels 2 feet by 2 feet 6 inches on activities of the visiting nurse in rural communities and small towns. Two panels on infant-welfare work; to be hung in tiers of three; requires 13 by 6 feet wall space.

Lantern slides.—Forty-six on work of visiting nurse in rural districts and small towns.

Motion-picture film.—Two copies on work of visiting nurse in rural districts and small towns.

Pamphlets, etc.—Circular 117. Four-page illustrated circular on the work of the Town and Country Nursing Service of the American Red Cross.

Provided by the Maternal and Child Health Library, Georgetown University
National Association for the Study and Prevention of Tuberculosis, 105 East Twenty-second Street, New York, N. Y.

Exhibit material.—Exhibit chart for use in schools.
Lantern slides.—One hundred and eighty-three lantern slides on tuberculosis and public health.
Circulars with regard to motion-picture films and lantern slides furnished on request.
Motion pictures.—Rental service of five motion-picture films on tuberculosis and public health. Of these, The Temple of Molech and The Great Truth especially show the need for the protection of children from tuberculosis.
Leaflets, etc.—A number of health plays for children in leaflet form. (See p. 134.)

In writing for information a stamp should be inclosed for reply.

Russell Sage Foundation, Department of Child Helping, 130 East Twenty-second Street, New York City.

Lantern slides.—Sixteen lantern slides on visiting nursing.
Leaflets, etc.—The Care of the Baby. Six-page leaflet.

National Committee for the Prevention of Blindness, Room 510, 130 East Twenty-second Street, New York City.

Exhibit material.—Two exhibits: (1) Ophthalmia neonatorum (babies' sore eyes); (2) midwives. Each exhibit five panels; bromide photographs mounted on compo board and framed; approximately 18 inches wide by 23 inches high; wall space required, width 7 feet 6 inches; height, 3 feet 4 inches. Publication No. 4, describing and illustrating exhibits in detail, may be had upon application.
Lantern slides.—Seventy-seven on babies' sore eyes. Synopsis of a lecture or a complete lecture supplied on request. Write for Publication No. 7 and inventory of slides.

Leaflets, etc.:
Needlessly Blind for Life.—Four-page leaflet on prevention of blindness from babies' sore eyes (ophthalmia neonatorum).
Common Causes of Blindness in Children and the Means and Methods of Prevention.—Sixteen-page pamphlet, illustrated.
What Women's Clubs and Nursing Organizations Can Do to Prevent Blindness.—Four-page leaflet.
Saving the Sight of Babies.—A lecture outline, illustrated.
Summary of State Laws and Rulings Relating to the Prevention of Blindness from Babies' Sore Eyes.

Will contribute moderate supply of first three mentioned publications free. Prices of quantity lots on application. Single copies of last two on request. Applications for large quantities should be made at least two months in advance of date when needed.

American Social Hygiene Association, 105 West Forty-second Street, New York City.

Exhibit material.—(a) Set of 10 colored panels on social hygiene, size 17 by 24 inches. (b) Set of photographs of this series of panels, suitable for small exhibits. (c) Single wall panel, 40 by 28 inches.
Lantern slides.—Set of 10, reproducing exhibit panels. Additional lantern slides on social hygiene.
Pamphlets.—Eight pamphlets on social hygiene.
National Child-Welfare Exhibit Association, 70 Fifth Avenue, New York City.

Exhibit material.—Thirteen colored posters, 18 by 28 inches, Care Before Birth, Care at Birth, The Best Food, The Best Substitute, Feeding the Baby, Bathing the Baby, Clothing the Baby, Fresh Air and Exercise, The Baby Asleep, Things to Avoid, Milk, Midwives, Birth Registration. Also, 12 posters on childhood and health, what to eat and what not to eat, care of the eyes, care of the teeth, correct breathing, and disease prevention.

Lantern slides.—Set of 13, reproducing posters on care of baby; set of 12, reproducing posters on childhood and health.

Educational Exhibit Co., 26 Custom House Street, Providence, R. I.

Exhibit material.—Parcel-post exhibits and other exhibits for sale and rental: models and devices; pin-map supplies; materials for chart making.

Lantern slides.—Several sets on baby welfare, milk, flies, child hygiene, etc.

A baby-week catalogue, giving details as to exhibit material and lantern slides, is sent on request.

Public Service Exhibit Bureau, 123 West Madison Street, Chicago, III.

Exhibit material.—For information address secretary.

Public-Health Nurse Quarterly, 612 St. Clair Avenue NE., Cleveland, Ohio.

Lantern slides.—Fifty lantern slides on public-health nursing. Sixty lantern slides on child welfare, which include maternity, infant welfare, the child from 2 to 6, and school hygiene. Lectures accompany slides.


Exhibit material.—Set of 8 charts, 28½ by 22½ inches, printed on cardboard. Subject, baby saving.

ASSISTANCE OFFERED BY STATE AUTHORITIES THROUGHOUT THE COUNTRY.

ALABAMA.

State Board of Health, Montgomery.

Bulletins.—On the Baby, Diphtheria, Care of the Baby.

Lantern slides, lecturers, press articles.

ARIZONA.

University of Arizona, Department of Social Science, Tucson.

Lecturers, press articles.

ARKANSAS.

University of Arkansas, College of Agriculture, Extension Division, Fayetteville.

One, possibly two, lecturers.

Press articles.
BABY-WEEK CAMPAIGNS.

CALIFORNIA.

State Board of Health, Sacramento.

Special bulletin on child welfare; pamphlets on milk production, sanitation, and flies.
Twenty-five panels on infant welfare.
One hundred lantern slides on public health, milk sanitation, tuberculosis.

COLORADO.

State Board of Health, Denver.

Lantern slides, 4 dozen on infant hygiene.
Two motion-picture films.—The Man Who Learned. The Fly Pest.
Lecturers supplied to a limited extent.

University of Colorado, Extension Bureau of Community Welfare, Boulder.

Exhibit material, including 13 child-welfare charts. Sent for transportation charges.
Lecturers. Traveling expenses to be paid locally. Arrangements to be made one month in advance.
Programs for organization and management of baby-health conferences and community-welfare campaigns.
Press articles.

CONNECTICUT.

State Board of Health, Hartford.

Leaflets.—Care of Baby, etc.
Two exhibits, posters, wall charts.
Eighty lantern slides on infant care, the fly, housing, milk.
Lecturers, press articles.

Press articles.

DELWARE.

State Board of Health, Wilmington.

Press articles.

FLORIDA.

State Board of Health, Jacksonville.

Exhibit trunk, 3 cars: much material upon infant and child welfare. Itinerary must be arranged in advance and must include towns in same general locality or upon same railroad.
Small exhibit, wall panels on infant welfare, tuberculosis, and flies.
Parcel-post exhibits, 5 on tuberculosis, 5 on typhoid.
About 400 lantern slides on general health, including many on infant welfare.
Twelve district public-health nurses and eight assistants to State health officer detailed upon request to assist in planning and carrying out programs through lectures, personal talks, assistance at baby-health conferences.
Press articles.
BABY-WEEK CAMPAIGNS.

GEORGIA.
State Board of Health, Atlanta.


University of Georgia, School of Education, Athens.
Lecturers, press articles.

IDAHO.
State Board of Health, Boise.

Leaflet.—If You Have a Baby.

University of Idaho, Department of Home Economics, Moscow.
Lecturers, programs.

ILLINOIS.
State Board of Health, Springfield.

Booklet, Our Babies: How to Keep Them Well and Happy; bulletin, How to Organize and Conduct Baby-Health Conferences; circulars, Helpful Hints for Baby Week. Wall exhibit, illustrated hand-colored posters. One hundred and fifty lantern slides on baby welfare, birth registration, general sanitation, milk.

Two motion-picture films.—Tommy's Birth Certificate, Summer Babies. Lecturers, press articles.

University of Illinois, Department of Household Science, Extension Service, Urbana.
Charts, used by lecturer in health talks. Lantern slides, used by lecturer in health talks. One lecturer, a graduate nurse. Programs, press articles.

INDIANA.
State Board of Health, Indianapolis.


Purdue University, Department of Agricultural Extension, Home Economics Division, Lafayette.

A number of publications sent out in response to requests. Not available for distribution in large numbers. Exhibit material used by lecturers. Lecturers. Programs; staff will confer with committees. Press articles.

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

IOWA.
State Board of Health, Des Moines.

Bulletin.—Save the Babies.
Thirty charts.

State University of Iowa, Extension Division, Bureau of Social Welfare, Iowa City.

One hundred wall charts, 3 by 5 feet; 25 placards. Sent for transportation charges.
A few lantern slides used by lecturers.
Lecturers, Traveling expenses to be paid locally.
Programs, press articles.

Iowa State College of Agriculture and Mechanic Arts, Extension Department, Home Economics Committee, Ames.

Pamphlets.—The Child and Its Care; The Child Outline for Club Study; Feeding the Child from Nine Months to Two Years; Feeding the Child from Two to Three Years; Feeding the Child of Six.
Lecturers.
Very complete set of suggestions and programs.
Press articles.

KANSAS.

State Board of Health, Division of Child Hygiene, Topeka.

Bulletin on child hygiene. Pamphlets.—Breast Feeding; Bottle Feeding; Feeding After the First Year; Clothing, Bathing, and Care; Fresh Air and Rest; and Habits, Training, and Discipline.
Large panel exhibit, 6 screens, 4 panels each, suitable for elaborate campaigns.
Transportation expenses, both ways, and any loss due to carelessness in packing and handling to be paid locally. Portion of large exhibit material reproduced in 12 illustrated colored posters. Set sent free to any resident of State. Limited number available for sending outside State on receipt of postage (3 cents a set). Infant'sayette exhibit, life-size doll, entire set correct baby clothes, packed in suit case. Sent for transportation charges.

Lantern slides.—A Square Deal for the Baby; Tuberculosis; Clean Milk and Safe Milk; The Dirty Fly; Fakes and Fakers; Community Sanitation; Conservation of Vision; Man and the Microbe. Memoranda for lectures accompany slides. Recipient to pay transportation charges both ways and 25 cents for each broken slide.

Five motion-picture films.—The Long versus the Short Haul; The Man Who Learned; Tuberculosis; Typhoid Fever; The Fly. Recipient to pay transportation charges and guarantee reimbursement for loss or damage to films.
Lecturers, secretary and members of State board of health, and the directors of six divisions of the State board.
Programs, press articles.

Kansas State Agricultural College, Home Economics in Extension Division, Manhattan.

Cooperates with State board of health in supplying leaflets, etc.
Lantern slides on tuberculosis and milk production.
Three motion-picture films.—John Brand; An Interrupted Romance; Development of the Fly.
Lecturers, programs, press articles.

University of Kansas, Child-Welfare Department, Lawrence

Lecturers.
BABY-WEEK CAMPAIGNS.

KENTUCKY.

State Board of Health, Bowling Green.
Pamphlets on public-health subjects.
Exhibit material, sent for transportation charges; deposit required, from which deduction is made for damage.
Lantern slides.—Seven thousand lantern slides on public-health subjects.
Lecturers, outlines, press articles.

State University of Kentucky, College of Agriculture, Department of Home Economics, Lexington.
Exhibit material, lecturers, programs, press articles.

LOUISIANA.

State Board of Health, New Orleans.
Bulletins.—The Baby; Flies; Milk. Pamphlets.—How to Keep the Baby Well; Save the Babies.
Exhibit on educational hygiene: one-third space to infant welfare. Large colored framed posters.—Baby Don't's; Baby Needs; Food, Milk; Registration; Patent Medicine. Models.
One hundred lantern slides on milk, dairies, sanitary and insanitary homes, safety first for the baby.
Three motion-picture films.—Summer Babies; The Fly; Milk.
Lecturers, programs, press articles.

MAINE.

State Board of Health, Augusta.
Bulletins.—The Feeding and Care of the Baby. Series of leaflets.—Health of Home and School.
Charts.
More than 2,000 lantern slides on 20 topics, many on child welfare. Memoranda for several lectures on child welfare accompany slides.
Lecturers, programs, press articles.

University of Maine, College of Agriculture, Department of Home Economics, Orono.
Lecturers.

MARYLAND.

State Department of Health, Baltimore.
Lantern slides.
State of State board available for consultation.

Maryland Agricultural College, Extension Division, College Park.
Lecturers, programs, press articles.

MASSACHUSETTS.

State Department of Health, Boston.
Child-welfare exhibit.—Twenty panels, models.
About 500 lantern slides, including duplicate sets on child welfare, public-health nurse, milk, how to keep well, school hygiene.
Four motion-picture films.—The Long Versus the Short Haul, The Price of Thoughtlessness, Toothache, Fly Danger.
Lecturers supplied to a limited extent.
Programs, press articles.

Massachusetts Agricultural College, Extension Service, Home Economics Division, Amherst.
Three lecturers, programs, press articles.
BABY WEEK CAMPAIGNS.

MICHIGAN.

State Board of Health, Lansing.

Bulletins.—What About the Babies, Public Health.
Extensive exhibit, many mechanical devices, wall charts. Photographs of entire exhibit available.
Two-hundred lantern slides on infant-welfare topics.
Four motion-picture films, including The Man Who Learned, The Long Versus the Short Hair, The Fly.
Lecturers, programs, press articles.

Michigan Agricultural College, Division of Home Economics, East Lansing.
Lecturers, press articles.

MINNESOTA.

State Board of Health, St. Paul.

Lecturers supplied to a limited extent.

University of Minnesota, Department of Agriculture, Division of Home Economics, St. Paul.
Pamphlet.—Care of the Baby.
Wall charts.—Suggestions on clothing.
Will prepare infant-feeding exhibit for some central exhibition.
Lecturers.

MISSOURI.

University of Missouri, Extension Division, Department of Home Economics, Columbia.

Exhibit consisting of baby basket, model outfit baby clothing; five sets available. Sent for transportation charges.
Lecturers. If several talks arranged for same trip university meets traveling but not local expenses.
Programs, press articles.

University of Missouri, Department of Preventive Medicine, Columbia.
One hundred and fifty lantern slides on milk, baby clinic, etc.
Lecturers, programs, press articles.

MONTANA.

State Department of Health, Helena.

Special bulletin on baby welfare.
Charts.
One hundred lantern slides on child welfare.
Lecturers, programs, press articles.

Montana State College of Agriculture and Mechanic Arts, Extension Service, Bozeman.
Printed material for distribution.
Charts and panels.
Lecturers. College pays traveling but not local expenses.
Press articles.

NEBRASKA.

State Board of Health, Lincoln.

Press articles.

University of Nebraska, College of Agriculture, Extension Service, University Farm, Lincoln.

Extension service circulars.—Mother and Baby, Care and Feeding of Children, Feeding of Children, Children's Clothing. College of Medicine pamphlets.—Hygiene of the Child, Home Nursing for Babies, Colds, Whooping Cough, Measles, Scarlet Fever, Diphtheria.
BABY-WEEK CAMPAIGNS.

Wall charts, printed on muslin, large type. Sent for transportation charges.

Set of posters made at cost of 10 cents each, as a suggestion for local clubs.

Lantern slides, used by lecturers.

One motion-picture film.—Better Babies. Sent for transportation charges.

Ten lecturers, programs, press articles.

NEVADA.

University of Nevada, Agricultural Extension Division, Department of Home Economics, Reno.

Charts, sent for transportation charges.

Lecturers, press articles.

NEW HAMPSHIRE.

State Board of Health, Concord.

Infant-welfare number of quarterly bulletin.

A few lantern slides on general hygiene.

New Hampshire College of Agriculture and the Mechanic Arts, Extension Service, Durham.

A few charts on handling and distribution of milk.

Lecturers, press articles.

NEW JERSEY.

State Department of Health, Division of Child Hygiene, Trenton.

Leaflets.—Is Your Baby Registered? How to Grow Prize Babies, A Community Problem. Others issued when occasion requires.

Large traveling exhibit accompanied by demonstrators, 2 sets of panels; sent for transportation charges.

Large number of lantern slides on tuberculosis, housing conditions, milk, sewage disposal. A few on infant welfare.

Seven motion-picture films. (May not be available for local campaigns.)

Lecturers, programs, series of press articles.

NEW YORK.

State Department of Health, Division of Child Hygiene, Albany.

Pamphlets.—Your Baby—How to Keep It Well, Before the Baby Comes, The New Born Baby, The Summer Care of Babies, Care of Milk in the Home, Artificial or Bottle Feeding, From the Bottle to Table Food, Avoid Infection. Available in limited numbers.

Two sets of 19 panels, 3 by 5 feet, on infant welfare, available only for use within New York State. Are intended to form part of intensive campaign in which department nurses, lecturers, and others participate.

One set of 25 panels on infant welfare, available for small communities in New York State.

Lantern slides.—Three sets infant welfare proper; one oral hygiene; two flies; two sanitary conditions; two public-health nursing; large number on other subjects. Three stereopticon lanterns adapted for use of electricity, available for lending with slides. Material available for use only in New York State.

Three motion-picture films.—Bringing It Home, one reel, showing necessity for prenatal instruction; The Trump Card, one reel, on clean milk and dairies; Our Baby, one reel, humorous recital of events in one day of baby's life; one reel on oral hygiene. Portable motion-picture projector available under certain conditions. Material only for use in New York State.

Lecturers on all phases of infant welfare.
Several sets of press articles. Is prepared to study local conditions and prepare special publicity material.
Prepared to map out complete campaign, providing programs, exhibit material, lecturers, publicity, etc.

New York State College of Agriculture at Cornell University, Department of Home Economics, Ithaca.

Bulletins.—Care and Feeding of Children (limited number available), Health of Children, School Lunches.
Lecturers supplied to a limited extent.

Programs.

NORTH CAROLINA.

State Board of Health, Raleigh.

Pamphlets.—Care and Feeding of Babies, How to Keep Your Baby Well.
Three standard cabinet exhibits. Recipient to pay transportation and traveling expenses of demonstrator.
Seventy lantern slides on care and feeding of children.
Two motion-picture films.—Summer Babies, A Day in a Baby’s Life.
Lecturers, programs, series of press articles.

University of North Carolina, Department of Rural Economics and Sociology, Chapel Hill.
Programs, press articles.

NORTH DAKOTA.

State Board of Health, Devils Lake.

One motion-picture film.—Error of Omission.
North Dakota Agricultural College, Extension Department, Agricultural College.

Bulletin.—The Baby.
One trained nurse, to lecture. Staff also available to a certain extent.
Programs, press articles.

OHIO.

State Board of Health, Division of Child Hygiene, Columbus.

Pamphlets on care of babies, communicable diseases, tuberculosis, etc.
Twelve wall cards 30 by 40 inches; 12 cards 20 by 30 inches. Exhibit of proper clothing for babies.
Lecturers, programs.

Ohio State University, Extension Service, Department of Home Economics, Columbus.

Exhibit material, lecturers, programs, press articles.

OKLAHOMA.

State Department of Public Health, Guthrie.

Booklet addressed to mothers.
Lecturers, programs, press articles.

OREGON.

State Board of Health, Portland.

Leaflets.—Are Your Baby’s Eyes Sore? The Expectant Mother.
Programs, press articles.
BABY-WEEK CAMPAIGNS.

Oregon Agricultural College, School of Home Economics, Domestic Science Department, Corvallis.

Bulletins.—Food for the Family, The School Luncheon.
Ten charts on feeding and care of the child, growth and development.
Twenty-five lantern slides on infant care and feeding.
Lecturers, programs, press articles.

University of Oregon, Extension Division, Eugene.
Will issue bulletins to meet any demands on specific subjects.
Exhibit material, lecturers, press articles.

Pennsylvania.

State Department of Health, Harrisburg.

Bulletins.—How to Organize a Baby Show, Pennsylvania’s Eugenic Marriage Law, Flies as a Factor in Infant Mortality, Diphtheria and Diphtheria Antitoxin, Reproduction and Race Betterment. Leaflets and circulars.—Cleanse the Teeth, Flies. In foreign languages.—Save the Baby, Blindness in Infants, Home Milk Supply, Birth Registration.
Exhibit material. Gives help to committees in constructing local exhibits.
Lecturers, programs, press articles.

Rhode Island.

State Board of Health, Providence.

Bulletins.—Care of Babies, Leaflet.—How to Take Care of Babies, Little Mothers’ Leagues’ Handbook (prepared by Rhode Island State Federation of Women’s Clubs).
Exhibit material on milk and mouth hygiene.
Fifty lantern slides on milk; 50 on care of babies.
Three motion-picture films.—The Man Who Learned, Summer Babies, Boil Your Water.
One lecturer, press articles.

South Carolina.

State Board of Health, Columbia.

Literature on baby welfare, clean milk in home.
Fifty lantern slides on sanitation of the home, house fly.
Lecturers, programs.

South Dakota.

State Department of Health, Waubay.

The Mother’s Book.

University of South Dakota, Extension Department, Vermillion.

Three lecturers, programs.

Tennessee.

State Board of Health, Lebanon.

Literature on diseases of infancy.
Three lecturers, programs, press articles.

University of Tennessee, College of Agriculture, Division of Extension, Home Economics Department, Knoxville.

Lecturers, press articles.
TEXAS.

State Board of Health, Austin.

Exhibit on public health; 40 charts on baby care, accompanied by memoranda for lectures.
Lantern slides.
Two motion-picture films.—Teeth, The Fly.
Lecturers, programs, press articles.

Agricultural and Mechanical College of Texas, Department of Home Economics, College Station.

Give suggestions to committees for preparation of local exhibits in rural communities.
One member available for lectures in rural communities.
Programs, press articles.

University of Texas, Department of Extension, Austin.

Three sets of charts, 12 panels each, on care and feeding of children. Sent for transportation charges.
Lecturers supplied to a limited number of places. Application must be made several weeks in advance.
Programs, press articles.

UTAH.

State Board of Health, Salt Lake City.

Circular,—Save the Baby.
Forty lantern slides on care of infant, milk supply, and general subjects.
Lecturers, programs, press articles.

Utah Agricultural College, Extension Division, Home Economics Department, Logan.

Leaflet.—The House Fly.
Charts on Flies.
Lantern slides.—Flies.
Lecturers, programs, press articles.

VERMONT.

State Board of Health, Burlington.

Literature suitable for parents, teachers, and others.
Lantern slides on clean milk, oral hygiene, communicable diseases.
Motion-picture films on tuberculosis, clean milk, flies, toothache.
Four lecturers, press articles.

VIRGINIA.

State Board of Health, Richmond.

Pamphlet.—The Mother and Child. Reprints of health bulletins.—The Slaughter of the Innocents, Why a Physician Should Be Employed in Childbirth; several bulletin reprints on birth registration.
Exhibit on infant welfare, numerous charts.
Five hundred lantern slides.
One motion-picture film.—The Fly.
Lecturers, programs, press articles.
BABY-WEEK CAMPAIGNS.

University of Virginia, Bureau of Extension, University.

Lecturers, programs, press articles.

Virginia Agricultural College and Polytechnic Institute, Extension Department, Blacksburg.

Distributes publications of United States Government.

Programs.

WASHINGTON.

State Board of Health, Seattle.


Set of handmade cards helpful in preparing local exhibits.

Lantern slides.

State College of Washington, Department of Extension, Pullman.

Circular.—Better Babies, containing suggestions upon the organization of a campaign.

Charts on milk, etc.

Twelve lecturers. Traveling expenses and entertainment to be paid locally.

Programs, press articles.

University of Washington, Department of Home Economics, Seattle.

Bulletin on infant feeding and care.

Lecturers, press articles.

WEST VIRGINIA.

State Board of Health, Charleston.

Exhibit, 25 panels.

One hundred and fifty lantern slides, 12 on child hygiene.

Two lecturers, programs, press articles.

West Virginia University, Extension Service, Department of Home Economics, Morgantown.

Lecturers, press articles.

WISCONSIN.

State Board of Health, Madison.

Pamphlet.—Save Your Baby. Other public-health literature. Statistical summaries.

One set wall charts, placards, photographs.

Eleven lecturers, press articles.

University of Wisconsin, University Extension Division, Department of General Information and Welfare, Madison.

Package libraries on child-welfare topics. Special bulletin on baby-week campaigns in preparation.

Twenty-five wall charts, 34 by 44 inches.

Two hundred and ten lantern slides on infant welfare, the fly and disease, clean milk, home and community sanitation.


Lecturers, traveling expenses to be met locally.

Programs, press articles.

WYOMING.

State Board of Health, Cheyenne.

Secretary State board of health will assist personally in any way which is practicable.

University of Wyoming, Department of Home Economics, Laramie.

Programs.

Provided by the Maternal and Child Health Library, Georgetown University
RECORDS OF CHILDREN'S HEALTH CONFERENCE.

The record blank used by the Children's Health Conference conducted by the Children's Bureau in the Panama-Pacific Exposition is not a score card, with grades on a percentage basis, but a much simpler statement, being intended not to grade children for purposes of comparison but to be of service to the individual child. Measurements are placed where indicated; a check is placed to indicate a defect, opposite skin, bones, nutrition, or any of the items in this column. The summary is used for suggestions to the parent for the improvement of the child.

The record below is checked to indicate a typical case of adenoids:

<p>| | | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>1. Male; Female.</td>
<td></td>
<td>12. General nutrition: Poor.</td>
</tr>
<tr>
<td>5. Age when weaned: 3 months.</td>
<td></td>
<td>16. Skin.</td>
</tr>
<tr>
<td></td>
<td>Mod., code milk.</td>
<td>19. Ears.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20. Nose: Poorly developed.</td>
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<td>22. Teeth.</td>
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<td>23. Tonsils.</td>
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<tr>
<td>10. Height: 46.5 inches.</td>
<td></td>
<td>27. Lungs.</td>
</tr>
<tr>
<td></td>
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<td>30. Ext. genitals.</td>
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</tbody>
</table>

The second sheet of the record is left blank for a summary which forms a written résumé of the more detailed advice given by word of mouth. The following selected summaries will give a suggestion of the type of children coming to the conference and the simple language in which advice is given. All technical terms are avoided in order to bring the suggestions within range of the understanding of a mother of average intelligence.

1. (Summary of above record.) This child has thin, pinched nostrils and contracted chest, due, probably, to presence of adenoids, which make it impossible for him to breathe properly. He is over height but under weight, and is not as well developed as a child of his age ought to be, because he can not get into his lungs enough oxygen to make good blood.
This may retard his mental development, making it hard for him to keep up with his school work. His adenoids ought to be removed and he be kept out of doors day and night, if possible. Give simple, nourishing food as per accompanying dietary. Don't send him to school this year. Build him up first.

2. This little girl is a credit to an intelligent mother and shows the advantages of breast feeding. She is well developed, in good proportions, and seems in fine condition. Keep her so by an out-of-door life, regular habits, simple, wholesome food. No eating between meals, no late hours nor motion-picture shows, no crowding in school work. Her teeth need her constant care and the oversight of a dentist. Decaying teeth mean decomposing food and indigestion.

3. This baby is thin and poorly nourished. He shows that he is not getting the right kind of food. Don't waste your time and his strength experimenting. Take him to a good children's specialist and follow his directions. He is also overclothed. The band is no longer necessary; it is full of wrinkles and very uncomfortable. Pin his shirt to diaper; also his stockings, which should be long enough to cover entire leg. He may need the short sack night and morning, but don't let his body get wet with perspiration, as it makes him susceptible to colds. Change all clothing at night and air thoroughly. He ought to sleep only in shirt, diaper, and gown (flannelette in winter and muslin in summer). If he can sleep in a protected corner of the porch he will become less susceptible to colds. In that case make sleeping bags by accompanying pattern, only drawing in sleeves with draw string in winter to keep his hands warm.

4. This is a tiny baby and needs breast milk. Try to get your own health in better condition so that your milk will not give out. Drink milk and cocoa instead of tea and coffee, eat only simple, nourishing food, have a nap on the porch every day while the baby is asleep, and make up your mind to nurse him six months anyway. You can if you will. Four-hour intervals will be better both for your baby and yourself. Your doctor will help you when he sees that neither of you is in good condition.

5. James is a big, well-built boy, has good color, and seems in fine condition, except for his knees, which are too prominent, and his ankles, which are big and bulging on the inner side. He may have walked before his ankles were strong enough to bear his weight, or his food may not have contained enough bone-producing elements.

He needs careful feeding and special care to prevent a permanent malformation of the ankle and a flattened arch of the foot. Would suggest the advice of a good orthopedist in selection of his shoes and to give him any possible preventive care.

6. Abram is suffering from faulty feeding. His bow legs and roughened, flaring ribs show that his bones are not developing well, and his teeth are slow in coming, because he needs a food with more bone-producing material. Cows' milk is more like mother's milk than the manufactured food you are using. He needs a little orange juice every day. Take him to a milk station, and they will help you secure the best possible food for your baby.

7. Baby Blank seems to be a happy, well-nourished baby. She weighs more than the average child of her age, but has rather more fat than muscle. Her abdominal measurement is greater in proportion to her chest and head than is considered normal. This is probably due to distention of the intestines. Cream of wheat, bread, and potatoes are more starch than she needs. Don't give potato under 14 to 16 months. Try strained oatmeal, cooked slowly for two hours, instead of cream of wheat, for her constipation. Give also pulp of steamed apples, peaches, or prunes every day in addition to the orange juice. A tablespoonful of beef juice squeezed from a bit of lightly broiled round steak is better for a child of her age than so much starchy food.

Teach her habits of regularity in order to overcome her constipation.
PLAYS FOR CHILDREN.

A large number of these plays have been published in leaflet form by the National Association for the Study and Prevention of Tuberculosis, 105 East Twenty-second Street, New York, and may be purchased from that association.

Plays on baby welfare.

The Better Way, by Lennie B. Arthur and Helen V. B. Elliott. Published in The Journal of the Outdoor Life, July, 1916. Copies of this number can be purchased from the magazine, 289 Fourth Avenue, New York City. Short two-act play; 12 characters; everyday clothes and simple stage setting. A visiting nurse shows the family of a working man how to care for a baby and helps them to solve the problems of ill health, drunkenness, and unemployment.

The Theft of Thistledown and The Narrow Door, by G. W. P. Baird, written for the Pittsburgh Baby Week of 1915. Published by the National Association for the Study and Prevention of Tuberculosis. The plays may be produced if the author is notified in advance and is sent a copy of the program.

Two one-act plays. The first has 17 characters and simple costuming and stage setting. A kind but mischievous pixie steals an earth baby and carries it to the court of the fairy queen, where he describes the horrors of the tenement in which he found it. As punishment he is condemned to live as an earth baby until mortals learn how to treat their children properly.

The second play has 20 or more characters and simple costuming and stage setting. It is an allegory in which Life and Health sit spinning while from among the children playing some are summoned through the narrow door guarded by Death.

Both plays close with appeals to the audience to see that children are properly cared for.

The Passing of the Littlest Pageant. A fantasy by Elise Williamson Philor. Published by the National Association for the Study and Prevention of Tuberculosis.

A short one-act allegorical play. Eleven principal characters and a large number of less important characters. Fairy costumes and simple stage setting necessary. The blind Public is shown the passage of the Littlest Pageant, the passage from fairyland to earth of a mortal baby. Mother Nature and the Dawn of Light take away the Public's bandage and he sees what must be done to keep the baby safe and well.


Short one-act play; 15 or more characters; everyday clothes and simple stage setting. Members of a Little Mothers' League tell of their work.

Playing Visit, by Constance P. Wardle. Written for Baby Week in Slatersville, R. I., 1916. Published by the National Association for the Study and Prevention of Tuberculosis.

Short one-act play; three characters; everyday clothes and simple stage setting. Two little mothers play with their dolls, one giving proper and the other improper care, reflecting, according to an onlooker, what their mothers do with the babies at home.

Good News from Babylond, by Alberth Walker and Bernice Randall. Written for Baby Week in Washington, D. C., 1916. Published by the National Association for the Study and Prevention of Tuberculosis.

Short one-act allegory; 15 to 40 characters; everyday clothes and stage setting. Mother Dear and a troop of Better Babies explain to the bewildered Citizens of Our City what is needed to make Poor Little Things happy and healthy.

Don't Care, by Mary Walseman. Published in New York City Baby Week Manual, 1916. (See p. 77.)

Short one-act play in three parts; 10 characters; everyday clothes and simple costuming and stage setting. Eight health fairies come to the tenement home of Mrs. Didn't Know and her daughter, Don't Care, and show them how to care for the baby.
Plays on health, prevention of tuberculosis, medical inspection in schools, visiting nurses, etc.

David and the Good Health Elves, by Maynard Downes. Written for the Wisconsin Anti-Tuberculosis Association and dramatized by Eva Showers and Anna Costello for Baby Week in Milwaukee, Wis., 1916. Published by the National Association for the Study and Prevention of Tuberculosis, Wisconsin Anti-Tuberculosis Association must be notified if play is produced.

Short one-act play; 25 to 30 characters; simple costuming and everyday stage setting. The Good Health Elves come to David in his dream and tell him how to live in order to grow up strong and well.

Miss Fresh Air, Visiting Nurse, by Cora M. Holland and Hilda W. Smith. Published by the National Association for the Study and Prevention of Tuberculosis.

One-act play; 12 characters; simple costuming and stage setting. Mary and her mother are shown by Dr. Sunshine and Miss Fresh Air how they can drive out germs and sickness.

Five playlets by Hester Donaldson Jenkins. Copies can be purchased from Bureau of Charities, Brooklyn, N. Y. Titles of plays: Mother Goose Up-To-Date, Judith and Ariel, Our Friends the Foods, In a Tenement, Killing Giants.

Short plays of from one to three acts each; from 8 to 19 characters. The first three, dealing with health, fresh air, and foods, respectively, require the costuming appropriate for Mother Goose characters and allegorical figures of germs, foods, etc. The last two plays are on the subjects of tenements and juvenile courts, respectively; these require everyday costuming and stage setting.

The New Child, by Hester Donaldson Jenkins. Published by the National Association for the Study and Prevention of Tuberculosis.

One-act play; 10 characters; simple costuming and stage setting. A new child, Katie, comes to a tuberculosis sanatorium and is at first homesick and unhappy but is reassured by the joy of the other children in the outdoor life.

Judith and Ariel, by Hester Donaldson Jenkins. Published by the National Association for the Study and Prevention of Tuberculosis.

One-act play; 15 characters; simple costuming and stage setting. Germs of tuberculosis, helped by the imps of headache, cold, and weariness attack poor Judith. A Boy Scout, a Camp Fire Girl, and a nurse let in Ariel and her good fairies and brownies and drive the germs and imps away.

In the Forest of Arden, by Hester Donaldson Jenkins. Published in The Journal of the Outdoor Life, October, 1916. Copies of this number may be purchased from the magazine, 289 Fourth Avenue, New York City.

"Shakespeare adapted to a health playlet," suitable for acting by older children; two-act play; 15 principal characters and a large number of others; simple costuming and stage setting.

A Pageant of Average Town, by Nan Oppenlander. Published by the National Association for the Study and Prevention of Tuberculosis.

One-act play; 20 to 40 or more characters; simple costuming. The children, encouraged by Play, Wake-up, and Clean-up, air sleepy Average Town to get rid of some of the bad fairies that infest it.

The Imps and the Children, by Mary Swain Routzahn and Hilda Smith. Published by the National Association for the Study and Prevention of Tuberculosis.

Short play in three scenes; 23 characters; everyday clothes and stage setting. Eight imps represent the ills which can be prevented by medical inspection of school children. A group of parents beg the school board to protect their children from the imps, who are finally driven away.

Health and His Enemies, by Dr. Murray Stone. Published by the National Association for the Study and Prevention of Tuberculosis.

Play in one scene; 7 characters; simple costuming and stage setting. The fairies of fresh air and sunshine conquer the imps of darkness, foul air, and germs in the home of Mr. and Mrs. Health.
BABY WEEK CAMPAIGNS.

The Friends of Health, by Elizabeth Summer. Published by the National Association for the Study and Prevention of Tuberculosis.

Short play in one act with prologue; large number of characters; simplecostuming. The play teaches how to prevent tuberculosis.

Wee Davie, by Claude Merton Wise. Published by the National Association for the Study and Prevention of Tuberculosis.

Three scenes; 6 characters; everyday costuming and stage setting.

Suitable for acting by older children. Little David has tuberculosis. His mother and his friends are hoping that an operation at the new hospital will cure him, but they find that this help comes too late.

EXAMPLES OF NEWSPAPER ARTICLES ON BABY WEEK.

New York City better-baby week of 1914.

THIS IS OUTING DAY FOR MOTHERS AND BABIES OF THE CITY—BABY WEEK ENDS OFFICIALY TODAY, BUT THE GOOD THAT HAS BEEN DONE IS EXPECTED TO LAST FOR MANY WEEKS—A SPONTANEOUS INTEREST AND DESIRE TO HELP THINGS ALONG HAS BEEN ShOWN BY HUNDREDS OF PERSONS.

This is the last day of baby week, but it is not 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 dozing grandfather might be expected to do. Not that New York has not 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 is not likely to slumber again in a hurry.

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 buzzing 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 56 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.
BABY-WEEK CAMPAIGNS.

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.

To-day 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 would not go 5 steps before a little fury would stand in your path and with blazing eyes and imperious mien 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.

An article sent out by the Department of Health of the State of New Jersey.

BABY WEEK AND AFTER.

The State department of health desires that the interest aroused by the celebration of baby week shall not be in vain. An article entitled “Baby week and after,” in the March number of its monthly bulletin, Public Health News, which has just been issued, points out the method by which this interest may be utilized for the benefit of the community. The article reads as follows:

Now that great interest has been aroused in babies through the celebration of baby week in more than 2,000 communities throughout the country, what is to be the outcome? Unless this interest becomes crystallized into definite measures for the better care of babies, much of the value of the celebration will be lost. With lessons taught during baby week fresh in mind and while the baby is still in the limelight, immediate steps should be taken to insure permanent results.

The first step for the protection of babies in a community is to secure accurate knowledge of the present situation. The inquiry to gain this knowledge should include the number of babies born each year, the number dying prematurely, the causes of death, the living conditions of the people, and other factors that contribute toward causing death or the impairment of health in those that survive. The subjects of inquiry should also include the facilities for remedying these conditions, such as the number of visiting nurses to be employed, consultation stations and their location, the milk supply, and other agencies or factors that affect infant health and welfare.

The best results may be expected to follow where the week’s campaign has led to the formation of a committee to take stock of the
community's equipment for the conservation of infant life and to determine the additional equipment necessary to fulfill the community's obligation to its helpless infants. A community has a responsibility to prevent disease, defectiveness, and deformity, as well as death among its babies.

A committee to conduct this study should not be so large as to be unwieldy, yet it should be large enough to represent the various vital interests of the community. The board of health should be represented, because it is the power charged with the protection of the people's health—the health of infants as well as of adults. The board of education should be represented, because it is particularly charged by the laws of New Jersey with the protection of the health of school children, and no program of infant conservation is complete unless it includes or is coordinated with the conservation of older children. The chamber of commerce or board of trade should be represented, because the conservation of infant and child life is of great economic significance. The philanthropic organizations should be represented, because through them are expressed the higher and more benevolent impulses and aspirations of the community. The women's organizations should be represented, because the care of babies is largely a woman's problem.

A committee thus constituted will command the respect and confidence of the people and, if its investigations and deliberations are given wide and extended publicity, its recommendations will most surely be adopted as a community program sooner or later. Such a committee, if persistent and insistent in its work, can put squarely up to the municipality the responsibility for discharging its obligations toward the people in the care of infants in such a way that there can be no side-stepping or dodging the proposition.

Under the stress of war, facing the necessity of conserving infant life to make up for a lower birth rate and to replenish the waste of battle, the European Governments are now taking active measures for the protection of infants and children. It is the part of wisdom to give heed to vital questions before stern necessities force them upon public attention. In America there should be no waiting for war to devastate the land before adequate measures are adopted for the conservation of infant and child life. If such a peaceful campaign as the baby-week celebration leads to the development throughout the country of the kind of care and nurture a community should give to its children, this may be taken as a measure of the strength of the American Nation and as evidence of the permanence of American institutions.

**MESSAGE TO FATHERS.**

Letter adapted from message sent out during Pittsburgh's first 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 or 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 sirups 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.

Message to fathers, published by Rhode Island State Board of Health for baby week, 1916.

As to that baby of yours. Whatever you may think about it, it is a good baby if you will give it a chance to be. It is your baby, and you want it to be strong and healthy. If it is cross or cries and it is sickly, there is a reason for it, and it is a part of your duty to
see why. Don't leave it all to the little wife. It is “up to you” to see that the kiddly gets all that nature intended for it, just enough and no more.

First, good food. What is that? Why, the mother's own milk that belongs to it—the breast milk. But for her to give good milk to the baby she must be kept strong with proper food for herself, not worked so hard that she is tired all the time. Remember she has the care of the house, the laundry, the sewing, to say nothing of the baby, and he has to be fed pretty often, and it keeps her at home a good deal. Yes; and she has to see that your meals are properly prepared, and ready on time. Perhaps she does get tired sometimes, and pretty. Perhaps you would. All day you have had a change from the monotony of the house, even if you did work hard. If the wife is tired and cross, give her half a chance to get rested and happy. Help a bit. Forget your own grum; leave your worries at the shop or office. Just notice that if she is cheerful it helps you a lot. If you try to be cheerful wouldn't it help her? Yes; and that means the baby. Excessive excitement, shock, or worry worries the milk, and that worries the child; and then it cries, you lose your sleep, and that worries you.

If the mother has not enough of her own milk to keep the child well and have it gain a little in weight each week, see that it gets the cleanest milk that you can find. You will not usually get such milk in stores. If you want to get good milk, ask the milk inspector in the city or town or ask the health officer or the president of the town council. Help the wife to keep the milk bottles clean, also the bottles, pitchers, or cans that you buy the milk in, and also the bottles and rubber nipples that the baby uses. A little sour milk will spoil fresh milk. Find a cool, clean place to keep the milk and make a little refrigerator out of a grocery box, a tin pail, and some sawdust. The board of health will tell you how. A small piece of ice will keep the milk sweet and perhaps save the baby's life in the summer. You don't want the baby to have bowel trouble, colic, or pains, and to be crying all the time because you give it dirty or sour milk. How would you like it yourself? Remember that milk is the only food, except some of the prepared baby foods ordered by the doctor, that the little chapp is allowed to eat.

Remember that nature does not give the baby any teeth at first. Its stomach can not digest or take care of solid food. When the body is ready to use solid food nature will supply the teeth; so don't you feed it on sausage, cabbage, candy, and everything or anything that it sees on the table. If you do, it will cost you money for the doctor and perhaps the baby's life.

Do you know that nearly one-third of infant deaths occur because the baby is not properly fed? In Rhode Island one out of every eight babies born dies before it is 1 year old. Why? Some die because the mother was not strong before the baby was born, was overworked perhaps, did not have sufficient proper food and plenty of change and fresh air, but most of the babies die so young because they are not properly fed. Many pine away for the want of sunlight and fresh air. Did you ever see a young plant grow in a dark room and without plenty of air? Remember that babies are tender, and it takes very little to change them for better or for worse. Some pine away and die because they are given soothing sirups to keep them from
BABY-WEEK CAMPAIGNS.

If the baby cries continually, find out the reason. See the family doctor or go to the clinic at the hospital between 9 and 10 o'clock. Don't jounce him up and down like a milk churn, and don't pull him out of a sound sleep to show the callers what a likely chap he is. If he does not get sleep enough, he may not continue to look so much like father's family.

Keep the flies away from him and from his food. They have just come from the garbage heap and may give the baby diarrhea and bowel trouble. Mosquito netting does not cost much. It keeps the mosquitoes away, too, and gives the baby a chance to sleep.

Don't let him crawl around on the dirty floor and beat up the carpet and fill his throat full of dust which you have brought in from the street on your shoes.

There is one thing you can do all by yourself. Make it your duty right away after the baby has arrived to see that the birth has been reported by the doctor to the city registrar or town clerk. Why? Because you or the child may have to prove his age in order to get work when he is 14 years of age; or it may be necessary to prove his age to vote, or to get married, or to show that he is a citizen of the United States and can not be drafted into a foreign army; or there may be money or property coming to him. "Nothing doing." Can not prove that such a person was ever born. Father and mother and relatives are all gone, but the record will show who was born and when and where. Go yourself to the record office and see that the doctor has reported the birth. Although the law requires this, yet many doctors forget to do it. Is not the little chap worth that small trouble? Yes; there are a lot of don'ts, but give the baby a chance before it is born, and then a "square deal" afterwards, good food, plenty of sleep, and plenty of air.

"SAVE THE KIDDIES."

Think it over, then do it.

STORIES PUBLISHED IN A BABY-WEEK LEAFLET AT GRAND RAPIDS, MICH.

A Moribund Baby.

It was a shocking little skeleton of a body that Mrs. Brown undressed and laid across her knees at the city clinic. Too weak to hold up its head and too lifeless to notice anything or anybody, its body lay there limp, every tiny bone pitifully distinct, the little legs bowed and curved. Mrs. Brown seemed pathetically hopeless herself, but she answered straightforwardly all the questions put to her by the businesslike but kindly nurse. Yes; she had weaned him a few weeks after birth. That was a dangerous thing to do! Why, she knew lots of girls who brought their babies up on bottles; and it was such a nuisance to nurse him. No; she hadn't given him modified cows' milk; he seemed to like condensed milk better, so she let him have that. She wished she'd known cows' milk was better for him; but no one told her, and how was she to know? When he began to have solid food he sat at the family table. Oh, most anything. Coffee, sometimes, and a little tea, fried eggs, ham—anything he liked. No; he wasn't outdoors much, hardly at all; in fact, just when she went visiting twice a week or so. My, no! They didn't have a separate
bed for him; he slept with them, and her husband would have 40 fits if she opened the window at night.

A commonplace recital—how commonplace only nurses know. How Mrs. Brown's face lighted up when told that with careful nursing there was a chance for her baby, and how eagerly she promised to follow faithfully each one of the simple directions which the nurse gave her. For her ignorance Mrs. Brown had almost paid, and many mothers do pay, with the baby's life. But was she entirely to blame?

Prepared for Business, not for Motherhood.

All the girls in the building took an interest in Anna S.'s marriage. Anna had been an office girl for six years, and besides being valued by her employers for her intelligence and efficiency was a general favorite with the other girls. So, when Romance and a Fairy Prince came to Anna the girls were ungrudgingly glad that the Prince held a good business position, and that Anna could have many little luxuries that she had never allowed herself before. Their interest in her simple trousseau was unbounded and kindly, and when they finally waved her good-by after the ceremony at her aunt's house no one of them, least of all Anna herself, suspected that she was lacking in the most essential preparation of all.

The prospect of a baby brought only happiness to Anna, and she set about making the little outfit with all a young mother's delight. The materials she purchased were dainty and expensive, but not one practical or useful article was to be found when the layette was finished. The baby came, fat and well nourished. She tried nursing him, but it was painful, and, ignorant of the proper care of herself and of the danger to her baby, she weaned him after a couple of weeks. The new food, adopted at the suggestion of interested neighbors, did not agree with the baby; she changed to another, then another, and in desperation to still another. Gradually the baby lost weight, grew paler and weaker, and finally fell dangerously ill. A physician was called, and when instead of medicine he prescribed only a wet nurse, Anna's one cry was: "Nothing would have made me wean my baby if I'd known how dangerous it was. Why was I never taught?" Why wasn't she?

Criminal Ignorance.

"No wonder your baby doesn't retain her food, or sleep, or gain in weight; you wouldn't either if you were bounced and jiggled as you bounce and jiggie her." And the nurse proceeded to instruct Mrs. T—— in the simple fact that babies, even more than kittens and puppies, must not be handled but allowed to sleep and eat with perfect regularity. But nobody had told Mrs. T—— this, and in hope of making her "smart" the baby was played with and talked to continually and wakened and shown to admiring relatives and friends until her delicate nerves were all aquiver and she became a very sick baby indeed. There are thousands of young women in the country who are just like Mrs. T——, and for the sake of themselves, their children, the citizens of to-morrow, and society, they must be educated in motherhood before motherhood catches them unawares and unprepared.
BABY-WEEK CAMPAIGNS.

A LIST OF CRADLE SONGS, ETC., PUBLISHED BY THE NEW YORK CITY BABY-WEEK COMMITTEE.

SONGS FOR HIGH OR LOW VOICE.

Cradle song, Rockaby Baby. Norris.
Sleep, Little Baby of Mine. Dennies.
Mighty Lak a Rose. Nevin.
Baby's Boat's the Silver Moon. Gaynor.
His Lullaby. Carrie Jacobs Bond.
"Des' Hol' My Hands To-night". Carrie Jacobs Bond.
Cradle song. Kate Vanah.
Sing, Smile, Slumber. Goodall.
Go to Sleep. Fisher.
Cradle song. Franz Ries.
Mummy's Song. Sydney Homer.
Curly Headed Baby. Hudson.
Cradle song. Schubert.
Sweet and Low. Barnby.
Hindu lullaby. Harriet Ware.

PIANO SOLOS.

Brahms Slumber Song, opus 117.
Chopin Slumber Song.

VIOLIN SELECTIONS.

Berceuse. Jocelyn.
Slumber Song. Arranged by Kreisler.

TWO OPERETTAS.

Boy Blue.
Whole Year Round.

SONG COLLECTION ABOUT CHILDREN.

Cradle Song of Many Nations. Katharine Wallace Davis.
Kittie Cheatham—Her Book.
Cradle songs—16 vocal and 11 piano. John Church Co.
Stevenson, Child Garden of Verses. Music by Nevin (Scribner's).
Songs of Childhood, Eugene Field. Music by De Koven (Scribner's).
Kindergarten Chimes. Kate Douglas Wiggin.
Song Echoes from Child Land (contains two mothers' hymns). Harriet Jenks and Mabel Rust.

CHORUSES, WOMEN'S VOICES.

Brahms's Cradle Song.
Jakobowski Lullaby from Erminie.
Gaelic lullaby, Victor Harris; quartet mixed voices.
Low Slumber Song; mixed voices.
Sweet and Low, Barnby; mixed voices.

NEW YORK CITY BABY WEEK. BABY SABBATH, MAY 6; BABY SUNDAY, MAY 7.

A Prayer for the Babies.

[By Walter Rauschenbusch.]

O, God, since Thou hast laid the little children into our arms in utter helplessness, with no protection save our love, we pray that the sweet appeal of their baby hands may not be in vain. Let no innocent life in our city be quenched again in useless pain through our ignorance and sin. May we who are mothers or fathers seek eagerly to join wisdom to our love lest love itself be deadly when unguided by knowledge. Bless the doctors and nurses and all the friends of men who are giving of their skill and devotion to the care of our children. If there are any who were kissed by love in their own infancy but
BABY-WEEK CAMPAIGNS.

who have no child to whom they may give as they have received, grant them
such largeness of sympathy that they may rejoice to pay their debt in full to
all children who have need of them.

Forgive us, our Father, for the heartlessness of the past. Grant us great
tenderness for all babies who suffer and a growing sense of the divine mystery
that is brooding in the soul of every child. Amen.

LETTER DESCRIBING ARTICLES FOR CARE AND
AMUSEMENT OF YOUNG CHILDREN SHOWN IN THE
BOONTON (N. J.) BABY-WEEK EXHIBIT.

My "Grandmother's Nursery" is original, and was planned for the care and
instruction of my seven grandchildren from materials which are usually thrown away. This nursery was exhibited during
baby week at Boonton, N. J., as an incentive to the older children.

My grandchildren are from 1 to 7 years old and spend some time each year
with me, so that I felt the need of occupation and instruction for them while
here. Things are made from flour, sugar, salt, and feed bags, packing cases,
and glass containers. All the little toilet jars and soap dish on the baby stand
which holds the conveniences for daily bath are bottles with screw tops,
enameled, and hand decorated. The mantel ornaments and desk fittings are
tissue boxes, cocoa boxes, and sardine boxes enameled and decorated with hand
decorations or with Greek figures cut from the magazines.

The rugs are from partially worn underwear, dyed, then braided or crocheted.
The dolls are made from the tops of stockings and the tops of long kid gloves.
The large wooden sticks are made from the wooden handles given out by many
stores to carry packages with; the wire has been removed and they have been
dyed the primary colors and are used to reach color and to string like beads.
The needle used for this and for weaving on the little frame is made from the
key which comes with the sardine can.

The pictures are from the Sunday supplement and magazines and are all
copies of good pictures. The tether ball and punching bag combined (this is
for small people) is made from dyed cotton flannel with a netted covering and
tassels. The square with the Dutch figures is a table cover made from a flour
bag; the figures, which are cut from blue merino and hemmed on, show some
of the industries of Holland.

The little pair of curtains on the screen are made from two flour bags, with
crocheted edges of the wrapping cord that comes around groceries. The little
figures on them are traced with colored crayons from toy books. The little
spread has the animals and children's stories done in oil crayon and pressed
with a warm iron on the wrong side, which makes them indestructible. It is made
from sugar bags and joined with cord the same as the curtains.

The waste-paper basket is a small-size peach basket, enameled and deco-
rated. The baby stand is a cheese box and its lid. The desk drawers are all
cocon boxes. The mattress was stuffed with the excelsior which came in the
grades and boxes and the shavings from the carpentering, with a thick cotton
pad on top.

Every clipping from the sewing went into the stuffing of the dolls. All ends
sawed from the lumber were planned and sandpapered for building blocks. The
children like my blocks best; they call them real wood.

The books are made from heavy wrapping paper, with pictures cut from the
advertisements of magazines. The bedtime stories are clipped from the evening
paper. The children hunt and cut out their own pictures to suit the story. The
grocery order book which they use in playing store is from the pictures and
labels that come on canned goods, biscuits, etc., with their market price written
below. They tell me from the pictures what they have in stock. I write my
order and price on a pad which they copy. In this way they learn to read
writing, write, spell, make figures, and add, and learn the market price of each
commodity.

I did most of this work when I had one or more of my grandchildren with
me, and worked on their clothes at the same time. I am 56, keep no help, do
the work for a family of three. I argue that an interested child is a busy child,
and a busy child is a good child. The description of the pad on the desk is for
my grandson of 7, and is decorated in this manner: Uncle Sam looking at the
signers of the Declaration of Independence, a picture of the evacuation of
Boston, the American eagle, the Stars and Stripes, Washington, and Grant.

Provided by the Maternal and Child Health Library, Georgetown University
ILLUSTRATION NO. 1.—BABY WEEK WAS CELEBRATED ON INDIAN RESERVATIONS.

Reproduced from "Indian Babies, How to Keep them Well," published by the Office of Indian Affairs, Department of the Interior.
ILLUSTRATION NO. 2.—"THE BABY SPECIAL" RUN BY THE CAPLEVILLE COOPERATIVE CLUB TO THE EXHIBIT AT MEMPHIS.

A practical example of cooperation between city and country.
ILLUSTRATION NO. 3.—A BABY-WEEK PARADE IN NORTH DAKOTA.
ILLUSTRATION NO. 4.—EXAMPLES OF BABY-WEEK PRINTED MATTER USED IN DIFFERENT TOWNS.
ILLUSTRATION NO. 5.—A BABY-WEEK NEWSPAPER CARTOON.

Reproduced by courtesy of Baltimore Evening Sun.

Provided by the Maternal and Child Health Library, Georgetown University
IF GROWNUP FOLKS
WOULD ONLY THINK
HOW OFTEN
BABY
WANTS
A DRINK!

ILLUSTRATION NO. 6.—THIS PRIZE-WINNING POSTER IN A NEWSPAPER CONTEST WAS MADE BY A
SCHOOLBOY. THE PICTURE WAS CLIPPED FROM A MAGAZINE; THE GLASS, BOTTLE, AND LET-
TERING WERE DONE BY HAND.

Reproduced by courtesy of Baltimore Evening Sun.
ILLUSTRATION NO. 7.—ONE METHOD OF ADVERTISING BABY WEEK USED IN HELENA, ARK.
Illustration No. 8.—Attractive Lessons on an Unpleasant Subject.

Designs used for posters and pasters issued by the New York Association for Improving the Condition of the Poor. Design shown at the right won first prize among public-school children of New York City.

Illustration No. 9.—Suggestion for a Fathers' Day Leaflet.

From The Chautauquan, Valley City, N. Dak.
ILLUSTRATION NO. 10.—THIS CERTIFICATE, PRESENTED TO THE PARENTS OF EVERY NEWLY REGISTERED BABY IN CLEVELAND, STIMULATES INTEREST IN BIRTH REGISTRATION AND THE REPORTING BY PARENTS OF UNREGISTERED BABIES.
ONE YEAR OF PENNSYLVANIA'S DEATHS FROM DIARRHEA AND ENTERITIS UNDER 2 YEARS OF AGE, GROUPED BY MONTHS.

ILLUSTRATION NO. 11.—A PANEL FROM THE BLUE PRINT EXHIBIT PREPARED BY THE PENNSYLVANIA DEPARTMENT OF HEALTH.

Provided by the Maternal and Child Health Library, Georgetown University
ILLUSTRATION NO. 12.—EVERYTHING PREPARED FOR A DEMONSTRATION OF BABY CARE (STAMFORD, CONN.).

Provided by the Maternal and Child Health Library, Georgetown University
ILLUSTRATION NO. 13.—WELL-ARRANGED EXHIBIT OF FOOD FOR YOUNG CHILDREN, AT ERIE, PA.
ILLUSTRATION NO. 14—A PUBLIC-HEALTH EXHIBIT FROM LAWRENCE, MASS.
ILLUSTRATION NO 15.—CLOTHING FOR A LITTLE GIRL AT MINIMUM COST, EXHIBITED AT BOONTON, N. J.
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