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PLAINTIFF'S EXHIBIT

MET-461

SPECIAL COMMITTEE MEETING

of the

ADVISORY EDUCATIONAL GROUP

December 30, 1940

Attended:

Advisory Educational Group

Miss Abbot
Rev. Dr. Cooper
Miss Jean
Dr. Kelly
Dr. Neilson
Dr. Ryan
Dr. Sandiford
Dr. C. Shepard
Dr. Sundwall
Dr. Sutton
Dr. Turner

Home Office

Dr. Armstrong
Dr. Dublin
Dr. Lanza
Dr. Wheatley
Miss Hallock
Miss Williamson
Miss Sefton
Miss Craig
Mr. McCarthy

TENTATIVE AGENDA
SPECIAL COMMITTEE OF THE ADVISORY EDUCATIONAL GROUP
Monday, December 30, 1940

10:00 A.M. Explanation of Program for the Day

10:15 Special Problems Requiring Action

A. How shall the material which we have for school administrators be related to the work of the 1942 Yearbook Commission? - Dr. Kelly, Dr. Ryan, Dr. Sutton, and Dr. Turner.

B. What further steps should be taken in the development of our work with elementary and secondary schools? - Miss Abbot, Miss Jean, and Dr. Sandiford.

C. How shall we strengthen our relationships with the colleges and universities? - Dr. Cooper, Dr. Neilson, Dr. Shepard, and Dr. Sundwall.

(Each group to elect its own leader to conduct the discussion and to present definite recommendations to the entire Committee.)

11:00 Group Action: Special Problem Groups A, B, and C - Recommendations for Decision.

General Problems for Consideration

1. How will the national program for preparedness and defense affect the work of the School Health Bureau during the coming school year?

2. Are there recent developments in the professional health and educational associations which would affect the plans of the School Health Bureau for 1941?

3. What is the status of the Astoria School Health Study?

12:45 P.M. Luncheon

Trends in Public Health

2:15 Film and Film Strip showings in the Projection Room

2:45 Motion Pictures in the Schools.

DR. ARMSTRONG: Ladies and gentlemen, we are all here except Dr. Turner, whom I expect any minute. I think there have been no changes in the make-up of our Committee since the last meeting. I can say we appreciated your assistance and advice perhaps more in certain respects than you individually or as a committee are aware. We have had on the whole, an excellent year. This is true of the work of the Company and also of the work of the Welfare Division. I am going to ask Miss Williamson to say a word about one or two records which you will find in your folder; a chart which has to do with the record of the school activities during the past year. Of course, this is as is always the case, an inadequate measure of the effectiveness and of the character of the work of the School Health Bureau. It is purely a tentative measure and does not reflect more, but it is a guide either as to the volume or as to the effectiveness of our measures and control. The work of the School Bureau has, I think, been highly satisfactory during the past year. I believe that its contributions have been outstanding in the field of health education. Certain advances have been made which will be discussed in more detail later. This has been parallelled by a continuation of our routine activities along other lines; nursing, health education, cooperative efforts with health departments and similar agencies, and certain elements of research as in the past.

We are going to continue our special interest in the control of certain diseases, mortality and morbidity facts with which we have long been concerned. Diphtheria, pneumonia, accidents, and others show a decrease in mortality. Dr. Dublin has been persuaded to speak further about this later in the day. It has been most gratifying to find that among our industrial policyholders they have had, for instance, for diphtheria, a rate of less than one per hundred thousand including the Home Office, the Pacific Coast, Canada and French Canada, where the mortality

remains quite high. Certain other problems apparently show encouraging results. The pneumonia mortality is very low, much lower than ever before. This also includes appendicitis, which shows favorable results. Since 1934, the death rate from that disease has decreased from thirteen per hundred thousand to eight and a fraction per hundred thousand this year. We have made a special effort this year to carry on educational campaigns in other fields, continuing the work with diabetes, for instance, and continuing our contribution to the syphilis program. Preventable diseases, notably whooping cough, which few people realize, is now a comparatively serious cause of death among young children; also that whooping cough is responsible for about twice the number of deaths from diphtheria and for more deaths than scarlet fever and measles combined. There are certain biological factors and therefore we feel that this is a point which we can attack.

I suppose the outstanding interest during the last year has been in the field of nutrition, where we have made contributions through literature and also a film. We are about to launch a film on foods called "The Proof of the Pudding", showing foods necessary for good health and how they may be obtained at a minimum of cost. It is being put out by the Metropolitan and the United States Public Health Service and will be available within a few weeks. We had expected to show you a complete one-reel picture available for theatres and later through more strictly educational channels, such as industries, community organizations, and educational institutions. However, we hope to show you that picture within a short time. We can show it to a Committee, if not to all the Group, or to some members, especially those on the Special Committee.

Another interest that might be mentioned is that of tuberculosis. We have revived a long-standing interest in this disease by making a financial contribution to it, jointly with the State Children's Aid Association, the State Medical Society, the

State Department of Health and other Agencies, to effect a substantial eradication of this disease. Those are just a few highlights of our special interests on the Welfare side without going into any details, without saying anything about the major activities of our Division. Now, to get briefly an interpretation of this chart which has to do with literature and correspondence. Miss Williamson, will you interpret that to the committee.

MISS WILLIAMSON: First, may I tell the Committee how we appreciate your advice and assistance of the past year. You have had material on the various committees throughout the year and additional data will be found on the tables. You will recall that last year we very definitely undertook to reduce the amount of literature sent to schools in keeping with the program of the Welfare Division. With the cooperation of the Staff, we have worked out a plan of distribution. You will note that we did very definitely limit this distribution. The figures for 1939 show that we are about where we were in 1934 according to the number of pamphlets distributed. Of course, the decrease in the distribution of literature would also affect our correspondence. Everything we do is interrelated and the correspondence handled dropped accordingly. In looking over the list for 1940, I was very interested to see our largest number of letters came from school superintendents. A question has arisen in relation to announcing special booklets connected with the work of trade and vocational schools, about which we would like your advice before the end of the day. We had thought of introducing the booklets to the superintendents. Sometimes, then we meet teachers who say they haven't seen that booklet.

MISS ABBOT: What about the principals of the vocational schools? That would be more direct than the superintendents.

MISS WILLIAMSON: If we send them to the teachers, we shall have to work the plan out carefully with the whole-hearted support and maybe at the request of the superintendents. (Some people say that we cannot go in the front door but that is the question that we are considering and with which we will appreciate your help.) We have had requests for material in regard to defense programs, - letters from schools saying, "We are organizing the whole 12 years around defense. We are planning our program according to the defense and preparedness program of the United States. Will you please send us special booklets on Foods or Physical Activities." Then we have had an appeal from one national organization asking us to help maintain the democratic, old formal programs. The members of our staff have seen that same trend. It is something we have been asked to help with.

DR. ARMSTRONG: Today we are going to try a different procedure. We have special problems and we are going to ask you, if you are willing, to associate yourselves in three groups for the special consideration, with members of the School Bureau Staff, of specific questions which need your deliberation and consideration. The first group will be concerned with "How shall the material which we have for school administrators be related to the work of the 1942 Yearbook Commission?". You will remember that we have collected a large quantity of material. We would like to have the group consider that and make a report. That committee will consist of Dr. Kelly, Dr. Ryan, Dr. Sutton, and Dr. Turner. Secondly, "What further steps should be taken in the development of our work with elementary and secondary schools?" We have in mind here particularly certain new educational devices with which we have been experimenting, and we would like Miss Abbot, Miss Jean, and Dr. Sandiford to discuss this question. Finally, "How shall we strengthen our relationships with the colleges and universities?" Here too, we have an accumulation of data, biographical material developed in cooperation with the American

Student Health Association - Dr. Cooper, Dr. Neilson, Dr. Shepard, and Dr. Sundwall. We might suggest that each group select a chairman and bring to this conference, within three-quarters of an hour or so, your recommendations regarding what further steps should be taken with the material presented. We thought by this procedure we might get your attention more employed in the fields in which some are more interested and more fully informed than others. If that meets with your approval and you are willing to function in that fashion, may I say that Group A will have as one of the participants in addition to Miss Williamson and Miss Sefton, Dr. George Wheatley. Dr. Wheatley was Director of pediatric studies of the Astoria School Health Study. He has accepted an appointment to be connected with the work of the Welfare Division beginning January 1. I am pleased to announce this acquisition. I think to most of you, Dr. Wheatley needs no introduction. I asked Dr. Wheatley to join us today and sit in on this conference. Miss Williamson, Do you think I have given enough information as to what we have in mind.

MISS WILLIAMSON: May I say that Dr. Armstrong will be on call from any Group.

DR. ARMSTRONG: Of course.

SPECIAL PROBLEMS REQUIRING ACTION

Group A considered "How shall the material which we have for school administrators be related to the work of the 1942 Yearbook Commission?" - Dr. Kelly, Dr. Ryan, Dr. Sutton, Dr. Turner, Dr. Wheatley, Miss Williamson, and Miss Sefton.

Dr. Sutton nominated Dr. Kelly for Chairman of this Discussion Group. The nomination was made unanimous.

DR. KELLY

I suppose you all know that a life-time ambition of mine has started to materialize - a Yearbook on Health. A Commission has been appointed for that purpose. Dr. Turner and I have the privilege of serving on that Commission. You know a great many of the others, Dr. Bracken, Miss Moss of Utah, Dr. Bauer, Dr. Charles Wilson of Hartford, Dr. Bernreuter of Penn State, etc. The superintendents on the Commission include A. C. Flora, Hamilton of Oak Park, and Dr. Bracken, Dr. Burke of Schenectady, and myself. With Dr. Bell, that's all.

We had a meeting in June, a preliminary meeting in which we tried to orient ourselves and set up a procedure to follow, which included the scope of the work, a general outline, and something of the details. Chapter assignments were made.

We met for three days in Pittsburgh the first week in December and we reported the work that had been done and as a result have gone on home to continue our work until next May when we meet in Philadelphia. It has been a little difficult to best realize the purpose of the whole thing. I have felt that it should be addressed to school administration. While it is supported by the Association for School Administrators, it should be addressed to school administrators to try to set forth their responsibility in a health education program.

MISS WILLIAMSON

Have you outlined it at all?

DR. KELLY

We have the organization of the program, scope of the program and details. the Introductory chapter is Dr. R. G. Bernreuter of Penn State. The one on the school administrator's part in the picture was assigned to me. There are two chapters on the medical phase of the work. Production is slow as there seems to be difficulty in setting up the right terminology for the medical inspector in the schools. Through law in New York State medical services is used. That is misleading and confusing. It implies a medical service which is far from what it is. Health protection has been used. Dr. Bell writes the Health Guidance setting forth the work of the medical staff, nurses, etc. - Dr. Bauer has Health Protection, the disease side of it.-Prevention and the handling of epidemics, the part of the school in relation to that. - Physical Education and Recreation....we almost had a battle over that..Dr. Wilson's Chapter. He did a very good job, satisfying me and I guess the others also. The idea now is to combine the two chapters. - Health Instruction. The tendency in New York State is to absorb it by the medical or physical education group, in the school more than in other places. I have been disturbed by this tendency. However, Miss Moss has written a masterpiece on this. - Dr. John E. Burke has a supplemental chapter to that Instruction Through Supplemental Subjects. A correlated chapter.

DR. SUTTON

Health instruction is the most difficult thing in the whole program.

DR. KELLY

A most important thing. We have in New York State a Regents Council to form an advisory board for the Health Education Division. My designation

is health instruction. Until recently they thought I was representing the school superintendents.

Dr. Turner's Chapter is the Relationship of the School Health Program to other Agencies in the Community, which is highly important. --Dr. William J. Hamilton is handling the Legal Aspects. I do not know if it has a place in the Yearbook, but it is very interesting and handled well in one brief chapter. - Mr. A. C. Flora has Physical and Environmental.....good school hygiene, practice what we are preaching, and being consistent with your school health program. - Dr. Bracken's is the chapter on Training of the Professional Personnel.

DR. RYAN

Does that involve preparation of the superintendents themselves or only health education?

DR. KELLY

I'm going to treat the superintendents as rough as I can.

DR. WHEATLEY

Are you considering the health of the teachers?

DR. KELLY

Yes.

Dr. Charles C. Wilson will have Open Air Schools, Sight-Saving, etc.

MISS WILLIAMSON

Are you doing anything on curriculum revision? We received through our correspondence and requests letters saying they are revising their curriculum.

DR. KELLY

No. It would all bear on it and answer questions on that.

DR. KELLY, continued

There is an abundance of material that can be utilized in curriculum revisions. The Metropolitan puts out valuable material for this.

DR. TURNER

I had a feeling when I read the material from Dr. Ryan (Reference Booklet for Administrators' material) that the question which Miss Williamson raised did not receive the attentinn it should have in Pittsburgh and I thought that Dr. Kelly's chapter was the place it should be given.

DR. KELLY

I wish I didn't have another thing to do until next May but work on this.

DR. RYAN

Is it going to be possible to work out this Yearbook in any other way than the separate chapters? Should not the chapters be related one to the other?

DR. KELLY

It is not a manual on health work. We are constantly referring to the lone teacher. It is the school administration, summarizing along the lines of what there is on administration for her. It should be addressed to the administration.

DR. TURNER

When the Commission meets, everyone reads their chapter and everyone else goes at it. Dr. Frank Hubbard, in the Research Department of the National Education Association, has the responsibility of seeing that all the chapter are correlated. Dr. Hubbard does reference work and is of assistance in getting and finding materials for the chapters and getting them to the members of the commission and in shape.

MISS WILLIAMSON

Can't you take Dr. Hubbard into your schools with you to see the program as you have for us, Dr. Kelly, and maybe Dr. Sutton too. If you would each invite him for two days.

DR. SUTTON

I would.

DR. KELLY

Yes, he needs educating into the school health program.

Last May, we took up each chapter and went after it. We found some omissions, and some inclusions we thought undesirable, and some overlapping. Dr. Barnreuter covered my territory a little. What we want is when a superintendent, whether in New York City or in the mountain section, picks the book up and looks at the contents, he should see something that would attract his attention whether he is rural or city. Something superintendents would understand. Leave out college and million dollar words and give the superintendents something they will understand.

DR. RYAN

This would not only take the place of the reference booklet material but would be better even, an improvement .

DR. KELLY

What would you have in the reference booklet for each individual, for instance, to help them with their chapters?

DR. RYAN

It was not organized that way.

MISS WILLIAMSON

We organized the material by states and analyzed just a few states and then stopped because the Yearbook had been announced.

DR. RYAN

Is it the kind of stuff Dr. Bernreuter could use?

DR. KELLY.

Yes, I should think so. He's very short of material, I understand. I have a lot on sex education which I advanced.

DR. TURNER

How would this do, - to send it to Dr. Hubbard as the person responsible to see that everyone sees all he should on his subject, and let him work on it?

MISS WILLIAMSON

It would be a question of sending this material out of our Office without the permission of the superintendents, etc. who wrote us. We could ask them. When will this Yearbook go to press?

DR. KELLY

We will be finishing the work about a year from now.

DR. SUTTON

Have Dr. Hubbard come up here to see it. Then he can look it over and decide what to do.

DR. KELLY

Dr. Turner and I mentioned your material at our last meeting. Then Dr. Bracken wrote to Miss Williamson, I believe. A lot of those people need the suggested materials.

DR. TURNER

It would be of a great deal of value to get Dr. Hubbard up here to the Metropolitan for a few day, just as educational as getting him into the school systems.

DR. KELLY

Suppose Dr. Turner and I both write to him, as members of both groups. I will ask him to spend some days in Binghamton, also.

MISS WILLIAMSON

We shall be glad to have him come.

DR. TURNER

I was terribly impressed by the material Dr. Ryan sent to me, reflecting the feeling of the superintendents on "how can I get a program for my community?" Get your crowd together and with this plan in mind, they will be ready to go ahead with it. At our last meeting, we did not go into that. If Dr. Kelly, with his other tasks, can give attention to that problem and get it into the Yearbook, it will be a helpful thing. I am not thinking of superintendents like ourselves which are way out in front, but of the average school system.

MISS WILLIAMSON

Part of the value comes of their working it out together. Everyone in the community including the parents should work on it.,

DR. KELLY

I went to Washington and worked out a preliminary of a bill.

DR. TURNER

I wonder, Dr. Kelly, whether this is a problem of such importance that whether the committee should consider a separate section on procedures and problems locally or not. You would have to do it.

DR. KELLY

I think that should be in the nature of a sepatate appendix or supplement, for the country and rural sections, cities and remote sections, where teachers do not see administrators from week to week, and have two or

three pupils or a dozen. I am afraid that if I was asked to include that in my Chapter, it would be too cumbersome.

DR. TURNER

The Yearbook Commission has said there are all kinds of programs, and the best we can do is give samples of a few. This publication will say that here is the material, now apply it to your system.

DR. KELLY

I had a group of school superintendents and others, and I gave them the fundamental facts and asked them to work it out and let me hear from them. They wrote me and it was marvelous, what those fellows had done in working out their own programs. It was a challenge and they met the challenge.

MISS WILLIAMSON

We shall have about five minutes to give this to the entire Group Meeting. Do you wish to make a recommendation for them?

DR. RYAN

Let Dr. Kelly make the report. He has been Chairman of this Group A, so let him give the recommendations.

DR. WHEATLEY

I suppose you might include some of the results of the Astoria School Health Study.

MISS WILLIAMSON

Dr. Wheatley would also have a lot to contribute to the Yearbook.

DR. WHEATLEY

We dealt with the doctor and the nurse, and how we brought them into the picture with the work they do, and have them contribute to the whole.

DR. SUTTON

Was there anythigg on mental health?

DR. KELLY

There is something on mental health; also, special schools and exceptional schools. There was some controversy on this but they were included.

DR. RYAN

Would it be possible to get a series of statements in question and answer from on the whole situation?

DR. KELLY

I can stress some things in preparing my Chapter.

Our time is up.

(rejoined Entire Group)

SPECIAL PROBLEMS REQUIRING ACTION

Group B considered "What further steps should be taken in the development of our work with elementary and secondary schools?" - Miss Abbot, Miss Jean, Dr. Sandiford, Miss Hallock, and Miss Craig.

Miss Jean was elected Chairman of the group.

MISS JEAN: Miss Williamson has put into my hands several questions which we are to consider now. The chief question is "What further steps should be taken in the development of our work with elementary and secondary schools?" We will consider first one particular project.

MISS HALLOCK: The idea is to get definite recommendations for the publication of the booklet for young children, "About Us and Our Friends."

MISS JEAN: If, after this booklet is available, might there be other similar publications for other age groups?

MISS HALLOCK: "About Us and Our Friends" would be for pupils up to the third grade and the Health Heroes are for sixth grade through high school, which leaves grades four and five without special material. Since this discussion group is particularly concerned with "About Us and Our Friends," let us get the recommendations regarding it.

The group unanimously recommended publication of this booklet.

MISS JEAN: Miss Williamson has asked for a recommendation regarding the basis of distribution of "About Us and Our Friends."

MISS CRAIG: I have some figures about the number of children in primary grades. I think a good many people like the distribution of one to a student, ~~but I think~~

that is out of the question, and we may want to distribute on the basis of two to a teacher or five to a classroom.

MISS ABBOT: We must take age groups into consideration. Kindergarten can't read, and for first graders the vocabulary is too difficult.

MISS HALLOCK: It might be a good idea to limit the distribution in Kindergarten and first grade. However, to limit the booklet to children when they can read in the second and third grades might be considered an unfair policy.

DR. SANDIFORD: I feel that it would be practically useless to give a thing with words like "recess" and "together" to Kindergarten.

MISS HALLOCK: It is worded for the third grade.

DR. SANDIFORD: Who did the sketches?

MISS HALLOCK: Miss Nutter did and though the ones you saw were a little rough, the final sketches are a great deal improved.

MISS ABBOT: As Miss Craig pointed out to me when I was a little critical, a technical artist might not get the spirit in these.

MISS JEAN: Then we agree that our recommendation would be that the book is acceptable to us, first, and second, that we suggest distribution of one to a child in the second and third grades, while one to a teacher and one to a library corner in the lower grades.

DR. SANDIFORD: Could we not say that we recommend this as desirable, if practical? Then we can see how distribution goes.

MISS ABBOT: The book is suited much nearer second grade than third grade. A little bit babyish for third.

MISS HALLOCK: Wouldn't it be awful hard to distinguish in orders?

MISS JEAN: Could we make it our recommendation that this would be a desirable thing on the basis of it having to be decided on the practicability of the system?

DR. SANDIFORD: I move in the words of our Chairman that in the Kindergarten and first grade, the distribution be to teachers or to library corners and that in the second and third grades, as desirable, the distribution be to individual pupils.

MISS CRAIG: If the distribution seems to be going too greatly, would you limit it perhaps to five in a classroom or would you limit it only to the one?

MISS JEAN: If it proves impractical to do this, you may find it impractical to make the division. Would it not be advisable to indicate that it would be best to limit five to a classroom all the way through?

Then shall we say, it was our opinion that the distribution would be five to children if the other plan proves impractical.

This booklet should prove very valuable in the home because of the length of time since the Company published a booklet of this type.

The next item to be considered concerns a booklet for teachers to accompany "About Us and Our Friends."

My recommendation would be that we accept it in principle, and that we approve it highly, but we suggest that it be worked over on the basis of changing its form to suggestions.

I feel that it is extremely valuable material and very well done. It is entirely right in principle, but as I went over, word by word, the section that was entirely finished, it seemed to me it should be changed in form. The introduction of each phase of the little book covers shelter, food, and so on and then offers suggestions of things that may be done in actual teaching. It would fit into the old fashioned formal school and would also be suitable for progressive groups.

MISS ABBOT: Another thing, it makes this book very valuable as a teachers manual. It supplements the idea that this is just a reading book. The illustrations are beautifully supplemented as well as its being sound educational philosophy.

DR. SANDIFORD: Will it be a regular monograph?

MISS HALLOCK: Yes, similar to Biographical and Scientific Material in Health Teaching.

DR. SANDIFORD: I think that is excellent.

MISS JEAN: I think it is something the School Health Bureau will have to do to greater extent. It may be a little fuller than it needs to be.

MISS ABBOT: Yet on the other hand, it is going to be such a boon to the unsupervised rural teacher. She isn't resourceful. She'll read it. They are just hungry for such material.

DR. SANDIFORD: There are a lot of sesquipedalian words.

MISS HALLOCK: We can cut a few syllables off some words.

MISS JEAN: We must think of the country teacher who doesn't have too much education and training.

If you notice, all the way through, Miss Craig has used the form, "The group might even develop". I suppose she is doing this not to be didactic, but I think it would shorten it and make it more forcible to say, "The following suggestions are offered." It might be put in the form that these are things that are being done.

MISS HALLOCK: It could be made direct if you say, "The following suggestions." All text books use this form.

MISS JEAN: On page 9, the section on bacteriology I think is too advanced.

MISS HALLOCK: For the ones who can do it, it will be interesting. The ones who can't, just let it go.

MISS JEAN: Is it advisable to state that the children in class might visit health departments, factories, farms, etc?

MISS ABBOT: We need this because by cutting it out for everyone, you are depriving those who can make the most of these excursions. The whole emphasis in the big city has been seeing sops. We need direct experience and it is practical if you get after it.

DR. SANDIFORD: Is there a cow in the New York City zoo?

MISS JEAN: Out of this would come a suggestion that in preparing the material, the suggestion be made that if the farm or if the factory is not available, an effort be made to utilize the zoo or other facilities.

MISS CRAIG: The memorandum on the front of the material lists the first four suggestions which are on clothing, communicable diseases, safety, and weather. Four other topics are suggested. Would you have any others?

MISS JEAN: Are there any additional points that might be included in the material itself?

MISS HALLOCK: Certainly sleep and rest and food.

MISS JEAN: There is enough there to cover all phases.

MISS ABBOT: I wish we could use another term rather than mental hygiene.

DR. SANDIFORD: I like Joy of Living.

MISS HALLOCK: I think that's fine.

MISS JEAN: Would it be good to have a third book prepared for parents? Good idea!

MISS CRAIG: Would the one for parents be for distribution through the schools and attempt to interpret to parents the school health program?

MISS ABBOT: "Are You Training Your Child to be Happy" is one of the best things to give to parents when we have health day.

DR. SANDIFORD: Are we not duplicating a lot of work here? Isn't it possible to combine instruction to parents and teachers?

MISS CRAIG: This booklet would have to be much simpler than the one for teachers and would be trying to get over to parents what the school is trying to do.

MISS JEAN: It would also serve to show what the school is trying to do - one more means of combining school and home. It could be a simple folder.

MISS ABBOT: I don't think the Metropolitan has done this.

MISS JEAN: Only the Health Bulletin. Could there be a simple folder that would accompany the teachers' material?

DR. SANDIFORD: I agree.

MISS HALLOCK: We couldn't do much under twelve pages.

MISS JEAN: It is the desirable thing to do if it proves practical.

Are there special groups to whom "About Us and Our Friends" should be announced? The School Health Bureau is probably in a better position than we are to decide.

MISS ABBOT: It should be announced to kindergarten teachers, perhaps the National Association for Nursery Education, as well as the Association for Childhood Education

and probably the principals of some of the elementary schools.

DR. SANDIFORD: Education in Canada is very formal and everything is controlled through central offices and central departments. Dr. Burnette knows the situation in Canada.

MISS CRAIG: We would announce it in Canada in our usual way.

MISS HALLOCK: One more problem - we want to get the group's opinion on a combination of the Health Heroes Series into one book. I think it would be a good thing to do, probably because it would mean that you would have something more valuable. Students might mislay single copies or throw them away when they get sort of bored. If the combination booklet is kept in school as a regular book for reference, it would have to have a very heavy paper cover, because we do not have facilities for board cover.

DR. SANDIFORD: About how many pages would it make?

MISS HALLOCK: About two hundred.

MISS JEAN: What would you think of doing it on a small edition and continuing to issue the single copies of the supply of Health Heroes on hand. We could try distributing the combination booklet in one school system to see how it would work.

MISS HALLOCK: The technical problems in getting the thing produced would prevent this from being feasible.

DR. SANDIFORD: I notice that the older Health Heroes are pretty well distributed. However, the latest one - Marie Curie - is not yet being used in very large numbers. I feel, in studying these figures, that certainly this ought to be continued as an individual pamphlet even if we cut off the distribution of the others or if we combine them.

MISS HALLOCK: We had quite a large number of the Marie Curie booklet on hand because we printed a large edition for the New York City Cancer Committee for distribution at the New York World's Fair.

MISS JEAN: Our recommendation, therefore, would be if this proves a practical thing, that a combination is desirable for library use, but that we continue to distribute the single copies on hand.

DR. SANDIFORD: It should be an exceedingly valuable thing.

MISS HALLOCK: There is no problem so far as the publications are concerned. There are, however, complications inasmuch as they are printed in different colors, and the type in some instances is different. Probably they will all have to be reset. Some of the engravings may have to be done over.

MISS JEAN: All you want from us then is the recommendations for considering this and then it will be judged as to its practicability.

MISS JEAN: Before we go, I would like to bring before the group a problem, which I think one of the other groups is also going to present here today, - the preparation of an outline of the whole school health program. It seems to me that the time has

come when one group in the United States should offer in simple terms, what constitutes a school health program. I see it as a question and answer affair about the size of the Health Bulletin. There is a vague idea on the part of superintendents, principals and school teachers who are not enlightened, as to what constitutes a real good school health program. To teach health instruction or environment or any of the other instructional phases by itself is not enough. May I ask you to support this proposition.

DR. SANDIFORD: There are syndicated articles in the press on health and weight and everything under the sun. Couldn't you supply those people with material that they could use in their syndicated articles? They must be fishing around all the time. I am quite sure they would be glad to get some such information.

MISS JEAN: There is very little publicity given to publications of the School Health Bureau in regular articles.

GROUP C
MINUTES OF THE SUBCOMMITTEE
on
HOW SHALL WE STRENGTHEN OUR RELATIONSHIPS
WITH THE COLLEGES AND UNIVERSITIES?
(Dr. Cooper, Dr. Neilson, Dr. C. Shepard)
(Dr. Sundwall, and Mr. McCarthy)

DR. SUNDWALL:

We elect the chairman first, do we?

DR. SHEPARD:

Yes, you being the senior member, John, should act as chairman, I think.

DR. COOPER:

You have two votes already.

DR. SHEPARD:

Unanimous vote.

DR. SUNDWALL:

Elected - Chairman.

MR. MC CARTHY:

I believe there will be some recommendations which this Committee may wish to make concerning the bibliography for college teachers. Dr. Shepard, do you wish to make some comments regarding the material?

DR. SHEPARD:

May I just describe the material. Last year, at the American Student Health Association meeting, I announced the formation of a subcommittee to work on the preparation of a bibliography for college hygiene teachers. Three people, I believe, have gotten together a large amount of health materials suitable for the use of these educators. The members of this committee were in a position to know the subject. The Metropolitan Life Insurance Company has published health materials and the Association asked if the Company was in a position to edit and publish the

bibliography. The editing has been completed and the material is now all set to go. We certainly are most grateful to Miss Williamson and the help that has been given in the difficult job to collect all this reference material.

DR. SUNDWALL:

Then we are in a position to announce that the Metropolitan Life Insurance Company is ready to publish this bibliography?

MR. MC CARTHY:

May I say that before publication it will have to go through certain channels for approval.

DR. SHEPARD:

Then we better simply announce that the material is ready for publication.

MR. MC CARTHY:

It is not in its final form as yet. Dr. Turner has just returned the edited material. Dr. Scott included her recommendations. There will have to be a final revision.

DR. SHEPARD:

There are more additions to be included. Dr. Gould and I discussed them the other day.

DR. SUNDWALL:

Our first recommendation, as I understand it, is, that we, as agreed here, approve and recommend the publication of this material.

DR. SHEPARD:

It will be ready soon.

DR. SUNDWALL:

Our Members' appreciation to the Metropolitan Life Insurance Company and other friends in the Welfare Division.

DR. SHEPARD:

It is a curricula of bibliography. We have never had that.

DR. SUNDWALL:

To what extent should this publication have to be revised?

DR. SHEPARD:

Your bibliography on school material has to be continually revised.

MR. MC CARTHY:

We always have to keep our material up to date. For example, "Biographical and Scientific Material in Health Teaching" was completely revised this past year.

DR. SUNDWALL:

Any committee involved in getting this material together should receive our appreciation too.

DR. SHEPARD:

Dr. DeKruif, Dr. Turner, and Dr. Scott.

DR. SUNDWALL:

Is Dr. DeKruif involved in this too?

MR. MC CARTHY:

Do you make any recommendations as to whom this material is to be sent or announced?

DR. SHEPARD:

Provided it is published.

DR. SUNDWALL:

I wonder if the Company would be good enough to send it to each member of our Association?

DR. SHEPARD:

To the person or persons involved in the teaching of hygiene.

DR. SUNDWALL:

The second recommendation then has to do with the plan of distribution. Should it be sent to each institutional member of the American Student Health Association, if published?

DR. NEILSON:

If published.

DR. SHEPARD:

This approximates 180 institutional members of the American Student Health Association.

DR. SUNDWALL:

I think it should go to all college people teaching courses in hygiene.

MR. MC CARTHY:

Would that include all presidents of the colleges and universities?

DR. SHEPARD:

Do you think it would be better to go to instructors than college presidents?

DR. SUNDWALL:

You know how things may get lost? I think, perhaps, if we get together we could ask the president to refer the bibliography directly to the teachers of college hygiene. Frequently there are several in one institution.

DR. COOPER:

Colleges and universities would have individual listings.

DR. SHEPARD:

Another thing we can do, we can send it directly to the members or to the representatives of the institutions, for instance.

DR. SUNDWALL:

We should also include the teachers in college hygiene.

DR. SHEPARD:

Our friend in the Office of Education, Dr. Rogers, has such a list of college teachers. He has quite a bit of material you and I made this year. I made a complete survey for our Committee, then.

DR. SUNDWALL:

In respect to distribution, we have representatives of the institutional membership of the American Student Health Association who are teachers in college hygiene.

DR. SHEPARD:

This is a certain thing. We did not get into this the great number of teachers colleges. A great many of the teachers do not belong to our Health Association.

DR. NEILSON:

Get a list of the names of the teachers colleges belonging to the Association.

DR. SHEPARD:

That is one thing, the other is to get a list from the teachers' catalogue. How can we get a list of the Teachers Colleges?

MR. MC CARTHY:

There is a total of 1,699 colleges and universities in the United States. Of this total, there are 673 colleges and universities, 256 professional schools, 169 teachers colleges, 58 normal schools, and 435 junior colleges. In addition there are 108 negro colleges.

DR. COOPER:

How is this material suited for advisory educational agencies? If we have to deal directly or indirectly with teachers colleges, I am not sure that the nature and use of the material might possibly be suitable to that health advisory group.

DR. SHEPARD:

We might see that the health advisory group gets copies of the material.

DR. COOPER:

I am not sure of the exact name of the Association.

DR. SHEPARD:

I know the Secretary of the Association would probably be glad to furnish a list.

DR. SUNDWALL:

The Advisory Educational Group of the colleges and universities might be contacted.

DR. COOPER:

The college groups are given a different name where health is related to other student problems.

MR. MC CARTHY:

Do you have any recommendations as to the quantities? Dr. Boynton suggested 1,000 copies of the bibliography. Do you think that 5,000 would be sufficient?

DR. SHEPARD:

I don't believe we need that many.

DR. SUNDWALL:

I think we probably will if we include the various teachers colleges, colleges of hygiene, state universities where they are teaching college hygiene. In Illinois, there are twenty that offer such courses. So, I think a minimum of 5,000 would be necessary if we include the teachers colleges.

DR. NEILSON:

Perhaps 5,000 letters with requests will come to us!

DR. SUNDWALL:

I am confident you will have to double that in a couple of years. There will be new books coming out all the time.

DR. NEILSON:

There are 1,699 colleges including negro schools.

DR. SUNDWALL:

Five thousand would not be enough. There will be on an average five or more instructors to an institution.

DR. NEILSON:

That number will be safe.

DR. SUNDWALL:

I think 5,000 is a good estimate.

DR. COOPER:

Five thousand or so.

DR. SUNDWALL:

So much for this time.

MR. MC CARTHY:

Do you have a particular time you wish the Company to publish this booklet?

DR. SUNDWALL:

The earliest possible date.

DR. SHEPARD:

I would like to see them all distributed before the end of the present school year.

DR. SUNDWALL:

Allright. Now ..!!!

DR. SHEPARD:

That all has a probability that the Metropolitan Life Insurance Company will publish the bibliography.

DR. SUNDWALL:

It occurred to me that it would be a splendid thing if we could have a college Health Bulletin.

MR. MC CARTHY:

You mean the monthly "Health Bulletin for Teachers" be distributed to colleges?

DR. SHEPARD:

To teachers on the college level.

DR. SUNDWALL:

With a particular language addressed to teachers on the college level.

DR. SHEPARD:

Those are the people that need help.

DR. SUNDWALL:

I want it to be for both groups, for students and teachers.

MR. MC CARTHY:

This last year, single copies monthly of the "Health Bulletin for Teachers" were made available to college students who were doing their practice teaching. The bulletins also have been distributed in quantities to instructors and professors for classroom use. We sent a check-up card in June to these college students. More than 35% of these people replied and have been retained on the special mailing list. During the year, there were 440 individual requests from college students to be placed on the mailing list.

DR. SHEPARD:

Your question (referring to Dr. Sundwall) was, whether the present bulletin is prepared for the use of college teachers and whether the Company might think it more desirable to prepare one for other school people.

DR. COOPER:

The present one is so worked out as to meet both needs. A good many of these bulletins need one thing as well as the other.

DR. SUNDWALL:

The present bulletin particularly belongs to teachers in training, but there

are so many other important things that come up in that age level.

DR. SHEPARD:

Something specific can be much more technically explained on the college level.

DR. NEILSON:

Don't you feel that the "Teachers Health Bulletin" is over the heads of most of the people who get it now? There is a good deal of technical material in some of them.

DR. COOPER:

It requires very careful reading. You have to follow right through to get the whole picture.

DR. NEILSON:

All of this raises the question: Is it a little too highbrow?

DR. SUNDWALL:

It is very difficult for us to judge that.

DR. COOPER:

The biology college student understands it.

DR. NEILSON:

I read the Bulletin and I do not know whether it goes to elementary teachers. Does it? I can just see one classroom teacher who gets the Bulletin and won't do a thing about it.

DR. COOPER:

Some of these bulletins are particularly difficult to follow for those who are not keeping in touch with changes in the field.

DR. SHEPARD:

That is something I cannot criticise.

DR. SUNDWALL:

I do wonder to what extent promotions have been going on to have teachers colleges give instruction in school hygiene with particular reference to school health problems.

DR. SHEPARD:

There is a great deal going on that does not meet our attention although there came to us some very interesting suggestions.

DR. SUNDWALL:

Let us see them. It is very important to do something.

DR. SHEPARD:

During the last year we have been doing something about it. The results of the material obtained was read at our meeting and this is the recommendation. Since there is little knowledge as to the attitudes and behavior of students and since many teacher-training institutions are dealing with the problem, the Committee recommended to the Association that during the year 1941, a survey of the health knowledge, attitudes, and behavior of students entering college be undertaken, in order to learn whether such students have been inadequately prepared in health instruction in the home and in the lower school levels. This testing program should lead to a more accurate knowledge of the health instruction in the lower schools. (On the results obtained, certain revisions and experiments might be made. If we could tell how much a student knew about health before he came to college, we could better know what to stress in teacher-training schools.) Three steps are to be taken: (1) Teachers are to be prepared to teach health

and that health materials be included in the curricula. (Within the last six weeks, I also had an opportunity to find out just what they are doing in the teacher-training schools.) (2) An effort be made to find out how adequately the teachers are prepared to teach these students. (3) That the teacher-in-training institutions should make an effort to prepare the teachers more adequately in the school health problem.

DR. SUNDWALL:

Now as I understand it the American Student Health Association has taken some action.

DR. SHEPARD:

No. It is recommended by our Committee and any action that would be taken would be simply by the Committee as a project.

DR. SUNDWALL:

Is the Committee willing to accept certain funds if they are offered?

DR. SHEPARD:

We won't need very much. As a basis we could take some of the work done at the University of Chicago and at the University of Virginia. We can get this material together without any outside help. Perhaps Dr. Patterson could be of assistance. It would be of help, though, to get these forms printed for possibly twenty or thirty institutions.

DR. SHEPARD:

Do you think the Association will want us to make the request?

DR. SUNDWALL:

Our time is getting close. Let's have some action on the suggestion relative

to the Health Bulletin for college students. They get out some wonderful literature here. Does the Committee want to approve that?

DR. NEILSON:

I think that would be a fine idea.

DR. SHEPARD:

They (bulletins) would be on a more technical level.

DR. SUNDWALL:

Do you want to make, as a body, this recommendation?

DR. NEILSON:

For a college bulletin.

DR. SUNDWALL:

The motion is carried and so recorded.

DR. NEILSON:

On this problem (referring to the health knowledge and attitude tests) will it take a year before it goes through?

DR. SHEPARD:

No. It will take less than that.

DR. SUNDWALL:

Do you want to make a particular motion in respect to this?

DR. SHEPARD:

Well, I would like to get your end on it.

DR. NEILSON:

The Committee will need some financial help so that this problem will be

carried through in the lower schools. I think it is very important.

DR. SUNDWALL:

As I understand our time is up now. This problem is important. This is a Committee to discuss how we shall strengthen our relationships with colleges and universities. Are there any other aims we ought to consider today?

DR. NEILSON:

We ought to consider our relationships in colleges and universities. To what extend is the health material distributed to colleges in this country?

MR. MC CARTHY:

We have no definite number as to quantities of the "Health Bulletin for Teachers." It would take quite a long time to go through the different channels to get that information. The Bulletins are used extensively in colleges. For teachers colleges we made up a selection of Monographs 1 and 7, the biographies of the "Health Heroes," "Health Through the Ages" and wall chart, and "Biographical and Scientific Material in Health Teaching" with sample copies of the "Health Bulletin for Teachers."

DR. SUNDWALL:

They are waiting for us.

DR. NEILSON:

Do you have a list of people in the colleges and people in the field of health? I think you could get that together on paper.

(rejoined Entire Group)

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DR. ARMSTRONG: I would like to show you, before we start the meeting again, the new window card. We thought the illustration was a good one to go with our nutrition film. The only change was to insert the post covering the boy's hand. The original picture had a large crop of poison ivy covering the boy's hand.

We will return now to the program and go back to Group A, trusting that we may have a report from the Chairman of that Committee.

DR. KELLY: As you might guess, according to my comments of last year, we have started a Yearbook. It is in the process of construction. We have two from this group on that Commission, Dr. Turner and myself, who have attended the two meetings in which we prepared tentative outlines covering the work of the Yearbook. It seemed to many of us that the greatest need we had in the field of education was something that a school administrator could read and get from it the necessary information that would make him recognize the importance of health education and the place it has in the program, and be willing to give his wholehearted support to carrying it out in his program. We are endeavoring to establish a book for superintendents, written in the language that he can understand, setting forth provisions of the school health program. Dr. Ryan is the one who has been prepared on the question, "How shall the material which we have for school administrators be related to the work of the 1942 Yearbook Commission?"

DR. RYAN: Dr. Kelly refers to the material prepared two years ago, — to find out in the first place what the universities are offering and then to secure from the superintendents themselves some notion of what they want. A considerable body of material was collected for a reference booklet for Administrators. In view of the proposition we have just heard, it would seem most suitable for the Metropolitan

to turn over this material and place it at the disposal of the Commission through Dr. Turner, Dr. Kelly, and Dr. Hubbard, to make every use of it they can. The Metropolitan might place it at Dr. Hubbard's disposal. If he came here and saw it, he could allocate it to the various members of the Commission whom it would help. In lieu of a separate publication, I propose the Metropolitan turn over to the Commission the material it has to be used in the preparation of this Yearbook.

DR. ARMSTRONG: You have heard the motion as to the disposal of the material which we have accumulated here. It is obvious that for us to attempt to duplicate the work of the Yearbook Commission would be an unwise procedure.

DR. KELLY: Second the motion.

DR. RYAN: Dr. Kelly has succeeded in getting this Yearbook. This procedure would not only avoid duplication but will make the best possible use of the material.

DR. KELLY: Dr. Hubbard is the Research man at the National Education Association. Perhaps, if he could come here and study what you have, he could pass the information on to the Commission?

DR. ARMSTRONG: If there are no questions, I think we might have definite action on this proposal. Those in favor say aye. Opposed? I assume then that it is unanimously agreed.

On the Group B committee, Miss Jean acted as Chairman.

MISS JEAN: Our task was a very easy one because we had the new book for young

children placed before us. Dr. Sundwall, Miss Abbot, and I have been working with Miss Craig. It is excellent. Have you all seen it?

MISS WILLIAMSON: The text of the book has gone to the Committee but the material for teachers has gone only to the Subcommittee.

MISS JEAN: We have all gone over the material and recommend it heartily, with certain changes to be made which are just a matter of detail. The next question is whether a bulletin should be prepared to go to the parents. We recommend it heartily if it appears a practical thing to do. Would it be practicable to distribute it by agents? Those were the only points that were considered, except that we considered it desirable and recommend that steps be taken to prepare a booklet of the same nature as the one for kindergarten, first, and second grades, for the group of fourth and fifth grades. We need something for the group that lies between the small children that will use "About Us And Our Friends" and the children who use the Health Heroes Series.

The question as to whether the Health Heroes Series should be brought out in one volume also came up. This would make a practical reference book in libraries, both classroom and school, as well as general libraries. We recognized that it would probably be a matter of whether the expense was warranted, from the Company's point of view. The next point was whether we would consider it advisable to continue the single copies. It was suggested that we continue using the individual copies and study the re-action of lessening their use, and next year determine whether or not to discontinue the individual copies.

DR. ARMSTRONG: You do not recommend the combination in place of the single copies, a complete substitution, and discontinue the single booklets?

MISS JEAN: Our feeling was that it would be a desirable thing to do both. We weren't sure whether it was desirable to discontinue the single copies.

DR. SANDIFORD: Certainly you should continue to distribute "Marie Curie." Do you intend to add to the Health Heroes Series?

DR. ARMSTRONG: We have none in mind, but we might. You do not, as I understand it, suggest a combined volume of the Health Heroes Series, then.

MISS JEAN: It might be practicable to bind the Health Heroes Series together with a wire binding for library and file purposes.

DR. SUTTON: I was not in that Group Discussion but I think it would be almost tragic to do away with the separate distribution.

DR. SUNDWALL: I agree with Dr. Sutton. I think it would be wonderful to have the various libraries in this Country equipped with these publications. If we could have all of your publications bound for the libraries, particularly those booklets on teaching, it would be very valuable. Why limit it to the Health Heroes Series? Everytime we have a new class, we devote a little time to the publications of the Metropolitan and find our booklets are gone or have been carried off.

DR. ARMSTRONG: Several of the publications have been bound together from time to time. The difficulty is keeping them up to date.

DR. KELLY: Has the Group B Committee given any consideration to the school administrator?

MISS JEAN: We considered him in our Committee and thought needed material would include a four-page folder about the size of the Health Bulletin for Teachers, but perhaps in question and answer form, on what a school health program involves, including the environmental and instructional school health phases. The school administrators become interested in one phase or another and they fail to see that that one phase is of little value in the program unless it has all phases.

DR. KELLY: True - Depends somewhat on what the program is. Some have a medical or physical program worked out and think they have a program. The phases are just not correlated.

DR. ARMSTRONG: I think we have that in mimeographed form.

MISS WILLIAMSON: Not exactly on that line, just the school health needs as described by the administrators themselves.

DR. ARMSTRONG: I misunderstood your suggestions, Dr. Kelly.

MISS WILLIAMSON: We find in our correspondence that there is a need for something of that nature. It came out in connection with Dr. Neilson's Committee on School Health Experiments.

DR. ARMSTRONG: I should say a program of that kind would be taken care of by a number of Agencies; the Office of Education, the Children's Bureau, the United States Public Health Service, the Association of School Physicians, Dr. Neilson's organization, and other groups. We could participate.

DR. NEILSON: Why not give it to the National Cooperation Group of which Dr. Turner is Chairman?

MISS JEAN: None of them have any money. If they did this, they would have to sell it. The Metropolitan is the only group that is in a position to finance this material. It could be brought together with these organizations which you mention, and be a joint project.

DR. KELLY: The superintendent needs simple language. He can't understand their high, technical language.

DR. SHEPARD: I talked to Dr. Rogers and he has, in preparation, that very thing. Several State Departments of Education have them. We have one in California.

DR. TURNER: As Miss Jean implied, if it is tried, to help with a project like this, we might be able to facilitate such a brief statement which we are discussing here. I do not know what Dr. Rogers has in mind. If this group, looking over the field, is interested in helping to produce that sort of material, I think we might use the National Conference as a Clearing House. There is a need for this thing. As you have been asking about it, I've been thinking it has not yet been done. This would be something more concise, brief. If the Metropolitan would be willing to produce this material, it could come from the National Conference, with the endorsement of the separate groups that wanted to give it. We could recommend that at our Meeting the end of February and first of March. The Executive Committee of the Conference on School Health Education is going to recommend that the Conference further the work on School Health Policies. The conference will try to get from each of its members, their ideas of the changes

which should be made on the Policies report and let them each endorse it as they will. Similarly, the committee here might facilitate a brief statement, such as we think is needed. If it originated in one of the groups like the Metropolitan and we could get the endorsement of the individual groups, it would educate the national groups as well.

DR. ARMSTRONG: Do you think it worthwhile for our Group to appoint a Sub-committee to take further steps with your Conference? I think the Metropolitan is not a member of your Conference. Yes, it is. We would have a direct contact then.

DR. TURNER: It certainly would be.

DR. NEILSON: Dr. Turner and I make up the Agenda for February and if you wish we can include that.

DR. ARMSTRONG: Does someone want to move?

DR. KELLY: I move that we have a subcommittee on that.

DR. SUTTON: Seconded.

DR. ARMSTRONG: I assume then that that is a desirable step unanimously approved.

In place of the now very old publications ABC and Mother Goose which were used in the schools, but were not prepared for that purpose, is the book, "About Us And Our Friends," which we hope to have by the first of the year. The text has been approved by the subcommittee and submitted to the rest of the members. It

has also been enthusiastically cheered by the executives here. It requires a certain type of press. As soon as we have facilities for printing it or decide that we can have it printed outside, we hope to have it available for school use and also for policyholder-families. I would like to take this opportunity to express the appreciation of the Company and Bureau to Miss Abbot for the assistance she has given us in the preparation of this material. Miss Jean and Miss Hallock also deserve our congratulations and Miss Craig has been working on some material to go with it. We are deeply grateful too, to Dr. Kelly, for aiding Miss Craig and giving his time.

MISS ABBOT: We would like to congratulate and express appreciation of the range of Miss Hallock's talents.

DR. ARMSTRONG: We come to Group C.

DR. SUNDWALL: In the first place, we considered the source material for teachers of college hygiene which have been prepared very effectively by a committee. This has also been in the hands of the Metropolitan where very splendid service has been given to this material. We express our appreciation of the effort given it so far. I am going to ask Dr. Shepard to briefly tell us something about it.

DR. SHEPARD: This subject was discussed very briefly last year. Two years ago a subcommittee of three or four members was appointed - Dr. Turner, Dr. Gould, Dr. Scott, and Dr. De Kruif - to select a bibliography on reference materials which could be used by teachers of college hygiene. We found that these teachers have very little opportunity to refresh themselves with bibliographical material and do not know where to go for material on certain subjects. It seemed appropriate

to set up a bibliography, which was done with considerable effort. Then Miss Williamson and her staff were kind enough to edit it. The material is almost ready for publication. It is definitely the recommendation of our Committee to ask if the Metropolitan would be interested in publishing it and help in its distribution.

DR. SUNDWALL: The Committee recommends that a minimum of 5,000 copies be published at the very earliest date, with a view to distribution during this academic year. It recommends, among other things, that the distribution be institutional - to the American Student Health Association, which now has 190 institutional memberships. Also to be distributed to teachers of college hygiene, to the advisory committees in connection with the colleges and universities, and to teachers' colleges. I am making a motion, Mr. Chairman, that this material be published and distributed according to the recommendations made.

DR. ARMSTRONG: Is that seconded?

DR. SHEPARD: I second it.

DR. ARMSTRONG: Any questions or comments?

DR. TURNER: I would like to say the three of us, Dr. Scott, Dr. De Kruif, and I, who did most of the work on the Bibliography, and Dr. Gould, who worked on a separate section, are extremely appreciative of the splendid work which your staff did. Miss Craig did the detail work. The manuscript which came back to the Committee from your staff was excellent. We feel that the result of the bound effort of the Committee and your department is producing something which will be helpful.

DR. ARMSTRONG: I believe our library staff is to be commended for their work, also. All in favor of consideration as to our printing this material please say aye. Then it is unanimous. Miss Williamson will then take up the matter of our printing plans and also discuss, with the Association interested in it, the proper way of presenting it to the public.

DR. SUNDWALL: The second matter is the advisability of a recommendation that a bulletin on college health be published, somewhat akin to the Bulletin published for teachers. A bulletin of this type would, we think, contribute immeasurably to the health of the college student, not only in the teaching of college hygiene but also as a contribution to college services. The Committee would like to recommend or make a motion to the effect that those concerned explore the possibilities of a college health bulletin.

DR. ARMSTRONG: For teachers?

DR. SUNDWALL: For teachers, staffs, and faculties of the colleges and universities.

DR. SHEPARD: I think that would be a very helpful thing not only for college hygiene teachers but for those teaching in colleges. Something is needed at a higher level. I'd like to see our teachers' health encouraged. Anything that we could do to help the teacher there?

DR. TURNER: I can conceive of some health officers who would find it helpful in the educational programs if we would do such a bulletin as this.

DR. ARMSTRONG: Very interesting. I think a possible by-product might be considered.

DR. DUBLIN: I would like to know further, what is your conception of the field which that bulletin would cover every 10 months?

DR. SUNDWALL: They are to include the substances, scientific materials, new contributions, both in respect to personal, physiological, and community health problems. Another section perhaps could be devoted to methods and materials, and any new contributions in respect to organizing college health machinery.

DR. ARMSTRONG: This is a new suggestion and I would not like to discuss it further without asking Miss Williamson and other members present several questions. I can conceive one possible question arising. Would this be a good time to start a new bulletin? It might be considered that we have exhausted the possibilities of the Teachers Health Bulletin in its present scope, shifting the field from the present high school and junior high level, abandoning that, and substituting something for another level, including college groups. We have consciously done some duplicating. However we would find ourselves unable to prepare, write, and finance 2 bulletins each month.

DR. SUNDWALL: We all appreciate the contributions of the Health Bulletins and the possibility of some such combination was discussed, but none of us felt that we would want to abandon it as it is extremely valuable.

DR. ARMSTRONG: What do you think of this, Father Cooper?

FATHER COOPER: As I understand it from the Committee discussion, there is no question of suppressing the present School Health Bulletin but adding a new one for another level. Some of us who are not specialists in this field have felt

that some of the high school bulletins were a little advanced. They are extremely well done, beautifully done, but a little hard to follow with high school groups.

DR. SANDIFORD: Not for our teachers in Canada.

DR. ARMSTRONG: We have that same feeling. We should get back on a practical, concrete program. Putting these two years together constitutes a volume of superb interpretation of a complex system which is invaluable in that form.

FATHER COOPER: It does meet a need.

DR. SANDIFORD: As an educator, I look upon it as an unusual piece of literature and I consider the one who writes the Health Bulletins a genius. I look upon it as a beautiful piece of exposition.

DR. SHEPARD: We would be disappointed if the Health Bulletins were discontinued. Could another be gotten up, more advanced, possibly one in a technical field and one a little less technical?

DR. ARMSTRONG: Perhaps coordinating the present one with something more advanced would do it. The need which you stress becomes more obvious with the discussion.

DR. DUBLIN: If the emphasis is on the needs of the high school teacher, it is just as well, because then it will surely be understood by the teachers in the colleges. I have felt these last two years, and I have been, perhaps, ungracious in saying so, that this splendid material which has been prepared by Miss Hallock was way above the capacity of the high school teacher. It was tough, although

splendid reading, but if I know anything about the general run of teachers, it was an exercise for them to stick to it. Now if that material had been available to teachers in the colleges, it would have been perfect. They would have eaten it up and it would have given them a scientific point of view of the health problem. Some things produced for high schools would have been better served to the teachers of the colleges. Perhaps something can be produced which would serve the teachers of colleges and the teachers of high schools in the upper grades, but it ought to be so prepared that the teachers in the lower levels who get it understand it all, and in this way we would be sure that the college groups will get it too. If we aim for this imaginary highbrow level, then I think nobody will get it.

DR. SANDIFORD: The Canadian teachers are very clever. It just hits them. It may be too much for Americans.

DR. SHEPARD: Do you have any idea how many school health bulletins now go to colleges?

MISS WILLIAMSON: We do not have our figures organized that way, but in reviewing returns of the Bound Set, I should say one of the striking things is the increase from the colleges and universities. It has been our feeling that the colleges and universities and also high school teachers have, as a group, rather scorned health education as something beneath them, as not ranking with Latin, French, or geometry. I know the difficulty in getting two hours' credit in hygiene. We have felt our Bulletin has helped raise the respect of college teachers for health education. If we give the college teachers the same thing we give elementary teachers, they are still going to feel it is beneath them. We have to consider our audience very carefully and also grade it accordingly. When Dr. Winslow was writing the Bulletins for us the question arose whether or not to give them to the elementary teacher.

Dr. Winslow said he could prepare one for elementary teachers, one for high school teachers, but not one for both. We yielded and we have been aiming at the high school audience.

DR. RYAN: I wonder if the increased demands from universities doesn't in part develop from the curriculum laboratory set up. They think that the teacher bulletin is particularly good for that purpose. Either way, teachers and prospective teachers have use for it.

DR. ARMSTRONG: I should say all of these suggestions should be very carefully canvassed when we take up with the subcommittee, the health bulletin program for next year and, in mapping out that program, we will have in mind all suggestions made this morning.

MISS JEAN: Recommendation: there is a need for particular material on the teacher's own health and I should like to recommend that there be one Bulletin devoted each year to the health of the teacher. We have just had in New York City, the death of a man who was in charge of health education in one large high school, who died from rabies because he declined to accept the opinion of his physician. This sort of thing is going on all over the country.

DR. ARMSTRONG: In addition, there are two or three matters that we want to bring before the Committee. We want to thank the special committees for having worked on these projects. It seems to me we covered a good deal of ground and the procedure was profitable.

There are certain other matters that we thought timely to present to the group,

not requiring action particularly but for interest. We have listed them here, and shall have to pass over them fairly rapidly. You will note the question "How will the national program for preparedness and defense affect the work of the School Health Bureau during the coming school year?"

What we had in mind first was the development in the training for defense activities in industries and in vocational schools of large groups of young people, a matter with which Dr. Lanza has had some contact. It involves the question of teaching safe practices, and the possible greater use of materials available for the instruction of students as regards industrial hazards than they are getting through the teaching process. I think Dr. Lanza has had some contact with this. I think you know we have one Bulletin called Safety Education in Vocational Schools. It is possible that this whole development may disclose needs that have hereto not been recognized. I thought I'd ask Dr. Lanza whether he would like to comment on that.

DR. LANZA: There are two items in this particular subject which are related but on different sides of the fence so to speak, but both of which are essential educational problems. One is the plan or project which is now underway with respect to men who are taking vocational courses that are being conducted in the schools here. There are about 20,000 they estimate who will take these courses during the coming year in New York City. One half of those revealed they are from vocational schools and the other half from W.P.A. projects, - all people who have jobs and take courses at night.

It was felt it might be worthwhile to conduct a rather thorough physical appraisal of these people because there wasn't much object in teaching them, to have them

rejected on a preliminary physical examination before they could get to work. They have set up, in conjunction with the five county medical societies, the health department, and other special bureaus, a very comprehensive scheme for the physical examination of all these people, to be conducted somewhat on the army type of examination. That has now reached the point where the plan and scope of the examination, which I might also say includes a Wasserman test and X-Ray of chest, has been approved by county medical societies. The present status of that is that Superintendent Campbell and Commissioner Rice are taking steps to procure the necessary money from the Office of Education in Albany to carry this plan out. The last time I heard the estimate of the cost it was somewhere in the neighborhood of $100,000. They have gone one step further, not only to make the physical examination but have set up the machinery to follow through. That is the social service side, seeing that those who have certain types of disabilities or diseases, that are capable of being remedied, will be followed up and action will be taken to make the necessary corrections. This is a very promising thing, extremely interesting and set up on a very thorough basis. My only fear is that before they get through they will find out it is more costly than estimated. The original estimates were a little bit on the too conservative side. I expect that this plan will get underway within the next two or three weeks. It has been done in other places, in Syracuse, and in Rochester too.

DR. SUTTON: Will this financial aid be available through the money appropriated from the Office of Education?

DR. SHEPARD: It is being conducted in Los Angeles.

DR. SANDIFORD: It is frequently done in Canada. They pay them a small retaining

fee while they are being trained in the technical schools. Is that true here?

DR. LANZA: Not here. The Council on National Defense has set up various committees which are both advisory and executive. One is a medical committee which, in turn, is broken down in various committees, one being a medical committee on industrial health which finds itself immediately confronted by the problem that the government agencies, that is the Navy and Army, have become enormous employers of labor. It is expected that, before the end of the year, the Navy will be the largest employer in the United States. They have between 160,000 and 175,000 civilian employees and expect to double that number before the end of 1941. The army will not be quite so large. Aside from the war, the necessity for trained personnel to deal with the general subjects, health, environmental conditions, and safety, this trained personnel is not thoroughgoing, at least is not available with respect to what is commonly called industrial hygiene. Neither in the medical or engineering personnel of the Army or the Navy, are the types of persons available who have had instruction in this field. Then the need for training people becomes apparent and courses in industrial hygiene are contemplated, to be set up at strategic points throughout the country to which medical officers can be sent for training. This however, is not as simple as it looks because the Army and Navy are somewhere between 12,000 or 14,000 medical officers shy. Out of this there will possibly come a plan by which the instruction will be carried to the plant. Thus, instead of sending to the doctor and the engineer, they will have to come to the plant. This is still in the process of milling around with no definite concrete results having come out of it yet except the extreme necessity of doing something to provide for the proper safety and health of the workers. These are primarily in the Government employ, and I might say every type of health hazard known to science and a great many that are not known to science are presented. It presents a prob1—

in education that will have to be met both ways, by training and by bringing the training to the people where they work.

DR. COOPER: There is one other development of the national program, twin committees of nutritional needs and food habits. The Committee has not met yet, but will have its first meeting January 3rd and 4th. I think it may perhaps ask some advice from the School Health Bureau in trying to modify food habits that are undesirable.

DR. ARMSTRONG: Perhaps when our new film on nutrition is available, you and your Committee may be interested.

DR. LANZA: Have you seen the publication on food and national health in Canada?

DR. SANDIFORD: May I ask, are you training your workers in the night shift from 12 to 8?

DR. KELLY: From 10 to 4 in the morning.

DR. SANDIFORD: What are your training shifts?

DR. KELLY: We are taking in two different types, the refresher course, for those who are in industry working, and have had some training and experience, and need to be developed into higher skills. We are running those on a three-hour program in summer vacation time starting at 9 and running through 10, because schools are in use. The beginners, one group starts at 5 and runs through 6 hours, and the other starts at 10 until 4 in the morning. The first class started 1st of July.

DR. ARMSTRONG: We will have to pass on to another item. We thought the committee would be much interested in, and we have the privilege of asking Dr. Neilson if he will be willing to say a word about the status of the legislation proposed dealing with physical health and health education, related as that is to the whole question of public health, and school health in particular. This refers to the bill 10606 in which Dr. Neilson is interested. The Committee would like to have the last word as to what is happening.

DR. NEILSON: The bill was introduced by Schwert on October 5. It is being sponsored by our Association, a Department of the N. E. A. When it was introduced there were 350 copies printed and sent to the document room. We had quite a job in getting others acquainted with the bill, so we ordered 10,000 printed in the Government printing plant. President Jones appointed one field agent in each state, to distribute the bill to moneyed groups and others. Briefly the bill provides for an allotment of money to states to be spent through state education agencies for two purposes. First to establish adequate programs in health education, physical education, and recreation in the schools and second, to encourage education to go forth on a new venture, - thus the establishment of educational camps rather than military and work camps. The amount of money will be increased from year to year to 100 million dollars for one purpose and 100 million for the school camp idea. This also has relation to other health bills.

We are getting our general support from education. This may later be combined into a Federal Aid Bill. In other words our association with 10,000 members and state organizations in each state are actively promoting the bill. The National Education Association is taking some action on that, although not taking official action. The executive secretaries of the State Teachers' Association met in

Arkansas and passed a resolution favoring the bill, 2/3 of the State Teachers' Association, American Legion, Ilks, and the Federation of Labor.

Some opposition to the bill is coming from the W. P. A. recreation people, from the municipal recreation people and the private camp people. They are afraid their programs will be interfered with. I think their fears are ungrounded.

We considered many suggestions sent in for revising the bill and I think there will be a revised edition prepared within a week to be presented again at Congress, in the House, early in January or February. Senator Mead is sponsoring it in the Senate but failed to introduce it for several reasons.

DR. ARMSTRONG: I expect most of the members are familiar with this development but it is a privilege to be advised by Dr. Neilson.

We will go on to item 2. Dr. Turner as you know is Chairman of the National Conference on Cooperation in School Health Education which brings together a great many agencies interested in this field. Do you wish to tell us something of this Group?

DR. TURNER: I am glad to do that briefly. Before doing it, I would like to mention two other matters, one is the extent to which our group participates through staff members. Miss Williamson has put in my hands, information on that score and I find that some twenty group conferences, most of them national in character, have been attended by members of this group or the staff, that college classes from two institutions have come to this office, that some six university groups have been addressed by members of the School Health Bureau, that there have been two educational universities groups addressed by the Safety Section,

The other item which Dr. Armstrong mentioned is the National Conference in which is represented each of the national agencies which are concerned with school health education, both governmental like the Office of Education and voluntary like the National Education Association, American Medical Association, National Tuberculosis Association and all of those agencies. The conference will have its next meeting within a few weeks (last day of February and first day of March, Hudson Hotel, New York City). Dr. Neilson is Secretary of that group and his office is the center of these activities. It isn't a super-organization; it is merely a conference. It has a very modest budget which merely takes care of operation and mailing expenses covered by $5.00 fees. It doesn't attempt to make decisions, but attempts to bring groups together to work jointly on problems about which more than one group is concerned. Perhaps the best way to indicate some of the relationships here would be to read to you some of the recommendations made by the executive committee for the next conference:

Whenever possible the National Conference shall act through its member agencies.

That each member agency be requested to contribute $5 each year for secretarial service.

That member organizations be notified to contribute special assistance in the preparation of needed materials for distribution.

That members of the constituent organizations other than delegates may attend the Conference meetings as visitors when introduced by their delegates and upon the payment of a registration fee of $1. They may be allowed the privilege of the floor upon the request of their delegate but may not vote.

That national organizations shall be defined for purposes of membership as independent agencies and shall not include sections, committees, or joint-com-

mittees of such agencies.

That interested persons may be placed on the Conference mailing list upon the payment of an annual fee of $2.

That the National Conference accept the responsibility of securing a revision of the report on "School Health Policies" and that it form a committee on school health policies composed of one delegate or other representative from each member organization wishing to participate in the revision of the report.

That it be the general policy of the National Conference in constituting necessary committees to ask each interested organization to name one committee member and that the chairman of the Conference, with the advice of the Executive Committee, appoint the chairman of the committee.

That the National Conference publish and distribute as far as possible lists of sources of materials and services available from member organizations.

That it be suggested to member agencies in special health fields that they prepare statements of the essential facts which they believe should be taught in the public schools with respect to their particular health interests.

That the National Conference request that the Committee on School Health Policies consider the best policy relating to educational procedures for evaluating unscientific claims for alleged health products and services. The Executive Committee recognizes the importance of the problem of improving the cooperation between school departments and health departments in the field of health education, including the educational aspects of health service. In view of the magnitude of this problem, and the helpful pronouncements that soon may be available from other sources, the committee recommends consideration of this problem by member organizations without Conference action at this time.

DR. ARMSTRONG: Thank you, Dr. Turner. Are there any questions you care to ask Dr. Turner?

The final report of the Astoria School Health Study is still in the process of preparation. Fortunately we have Dr. Wheatley with us, and I shall ask him to say a word about how this is getting along.

DR. WHEATLEY: We are distributing some material that is concrete evidence of the application of the work done by the Astoria School Health Study. First, I should like to mention that the experience we have had in the last 4 years arouses the type of cooperation that is possible between Boards of Education and State Departments of Health. The progress we have made in New York City is due to this opportunity of cooperation which has been developed between the two departments. We have had no direct experience with health instructions or physical education. Our present problem was to study procedures. There really were two distinct phases to the work. One was the investigative or research aspect, and the other was the problem of the staff training. I will mention some of the procedures or new developments which were worked out in connection with the Astoria Study and are now being applied to the City program. They could be divided into two parts, one administrative improvements and the other along the line of technical improvements. By administrative improvements I mean records, filing, etc. One of the first things that was done was the transfer of records. Records were being lost which contained useful information because of the transfer situation. Children, as you may realise, transferring, about a 30 per hundred turnover in the school system, represent a major problem in New York City. Transfer of a record and the method developed was the very simple one of giving the record to the parent along with the academic record when the parent applies for transfer

to another school. I say it is simple and obvious because the Board of Education has been carrying out that idea for years but the Health Department did it through the nurses. This is a type of cooperation. We made a check-study of the efficiency and found that about 80% are now being transferred effectively. We organized the filing system, and put in colored tabs, - green and yellow cards. The green is for girls and yellow for boys. We also developed a new form to be used by the school nurse and physician, and I have samples of those forms with me. The wording of these forms have received careful consideration. We have tried to get away from the feeling of authority. We feel we have gotten much better results by doing that. That leads me to the next point, the improvement in the technical aspects of the service. Parents come to the examinations. Parents did attend the examination in other years but not as a conscious part of the program. Now it is on the basis that the school is also interested in having the parent there. We are getting much better examinations because the school physician is now able to obtain fuller background information from the parent. In planning an educational program, it is important to see that plans are made to carry out the needed treatment. That, we have always felt, is our educational opportunity in the school examination. There are also improvements in other phases of the work - vision testing procedures, etc. We studied the lighting condition and the condition of the charts, and we are now engaged in making an appropriation to see that every medical testing room in the city is equipped with good vision charts. Also attention is being given to what we call teacher-nurse conferences. These were held in previous years but they are now further developed. Previously, the nurse went into the classroom to give a talk on health, which the teacher could probably have done better. Now it is a conference between the teacher and the nurse to discuss children in the classroom and to select for medical attention any child about which the teacher is concerned.

They have about two conferences a year. Where the nursing service is inadequate they only have one conference a year.

MISS ABBOT: Does the teacher or nurse initiate that conference?

DR. WHEATLEY: The teacher initiates it. We have also developed a cardiac classification service, particularly for the children in the elementary schools who have cardiac diseases. When we investigated our records, we found a great deal of confusion. Two or three doctors diagnosed the children and no clear record was available. Cardiac specialists are now available. The children who present nutritional problems are called "below par" because we want to take the emphasis off nutrition. In the past, so much emphasis has been placed on the school physician's diagnosis of the child by saying the child is under-nourished. We now use the term "below par" to select children for the intensive study of improper living conditions of the family, diet habits, etc. Sometimes we find it is a specific disease, for example, Diabetes. That again leads up to the next point of staff education, because we employ this nutrition problem in our schools to educate our school physicians in the complicated problem of nutrition. In the summer of 1938, doctors reported on the living conditions of certain children. We had 100 physicians on duty the whole summer. We selected from the files 5,000 children who were malnourished, went into the homes and studied the children's habits of diet and living, and, as a result of that, there is great improvement in the physicians' understanding of this problem. I'll just mention some of the procedures employed. Most of these procedures were brought about by group conferences. In Astoria we worked with four doctors and eight nurses. We also held conferences with superintendents and principals to acquaint them with our stage of progress. A bulletin was prepared for the teacher, giving them their

responsibility in the school health program. As we went on, meetings were held to present the procedures to the staff of physicians and nurses in a formal way. It is not a completely satisfactory way, but it helps to give them a sense of unity.

DR. SHEPARD: How much were you able to bring the teachers into the staff conferences?

DR. WHEATLEY: We weren't able to get teachers in on staff conferences. We gave talks to teachers at the monthly meetings called by the principals and were able to bring in something at that time. That, in brief, is the stage we have passed through. We are getting splendid cooperation from both the health department and board of education.

DR. SUNDWALL: When will the report be available?

DR. WHEATLEY: The Astoria School Health Study is to be available by the end of June.

DR. SHEPARD: Where will it be available? Through the Office here?

DR. ARMSTRONG: They are hoping some foundation will finance it.

Afternoon Session

MOTION PICTURE AND FILM STRIP SHOWING

MISS WILLIAMSON: First we want to show you the Walter Reed Film Strip which has been revised. After a discussion with Dr. Turner, Chairman of the Motion Picture Committee, it was brought up to date and, I might say, that the same process is being followed with all the Health Hero Film Strips.

(The revised Walter Reed Film Strip was shown)

DR. SUTTON: Very good.

MISS JEAN: Is it at all possible to use colored slides in these films? It would be so much more attractive if it was colored.

MR. FREIN: Colored film runs into a lot of money.

("Our Water Supply" was shown)

"OUR WATER SUPPLY"

Greenwich High School
Greenwich, Conn.

After making three school newsreels, two comedies, two films for the Red Cross and several other minor movies, the Greenwich motion picture production group decided to produce an educational film for classroom use.

There was a demand from the teachers for a film concerning our water supply. The idea of such a movie in color appealed to our amateur cinematographers.

One boy tackled the job of writing the script. To be sure that this script was what the teachers wanted, this student interviewed officials of the Water Company, science teachers, and others who would use the film. As the work progressed, successive versions of the script were read to the group for their approval or further suggestions.

Three months passed before the script was in its final form. It took two months more of shooting on Saturday mornings to achieve the finished product. The cost of the job was thirty-five dollars excluding, of course, the equipment which we already had.

The film is shown in our ten elementary schools to pupils before and after a visit to our filtration plant to clarify their impressions. It is helpful, of course, to those who have missed the trip entirely.

MARGARET MERRILL

(President of the Photoplay Club)

MISS WILLIAMSON: This picture was made by the high school boys and girls of Greenwich High School, Greenwich, Connecticut. This is an old film that they have since revised. The students let us have this old film as a basis of discussion, but we will understand that they have a better one. You will recall that we refuse to give posters to children in schools because we feel that the value is in the making.

DR. ARMSTRONG: Therefore, the question is, will our next motto be "roll your own film"?

MISS WILLIAMSON: I am sure that the students would appreciate any comments. We told them we were showing it to you today.

MISS JEAN: It seems to me that this is very significant. The Metropolitan might do well to supervise this project as a definite possibility of education procedure of the film; giving the cost, how it was carried through, etc.

MISS WILLIAMSON: This is the first one I have been able to find in the health field.

DR. SUNDWALL: I was wondering if they couldn't have told a more definite story. It just occurred to me that they might tell a little more specific story with a little more educational value. The story isn't clear. I think it can be improved a great deal.

DR. SUTTON: I think it is a remarkable project.

MISS WILLIAMSON: Dr. Sundwall brought out a very important point. They need supplementary material to make it educationally valuable.

DR. SUNDWALL: I think the biographical factor is important.

MISS WILLIAMSON: We see beautiful work being done in art, English, etc., but when it comes to health, there is something lacking.

DR. SHEPARD: Another thing occurred to me, it is just an ad.

MISS WILLIAMSON: They are not showing it outside. They show it to the students before and after the visit to the plant. (?)

Dr. Neilson expressed approval of the picture.

DR. COOPER: I hope they won't let the professional people steal the game, -- let it be a little less perfect.

Everyone agreed.

DR. ARMSTRONG: Well, ladies and gentlemen, that brings us to the last item on the agenda, - the question on motion pictures in the schools. We have only one regret about this meeting today. We had hoped to show you our nutrition picture, at least in incomplete form, but it got to the stage where, to be completed, it had to go out of the Company to get technicolored.

Its immediate release will be essentially for theater use, as was the case with

the pneumonia film. We do not know how it will go. We rather think it will go well. It is in technicolor, with music, short, and on the subject in which the public is becoming somewhat interested; material stressing the relation of health to national fitness and the whole defense program. Furthermore, it has the joint sponsorship of the Metropolitan and the United States Public Health Service. It will be shown to Dr. Parran in Washington and should get off to a good start so far as sponsorship and backing are concerned. Eventually, after we make the most of the theater possibilities we will release it for more limited or rather more specific use through educational channels and organized educational agencies. Before releasing it, we had hoped to show it to this Committee and get their approval or recommendations. If you would authorize us to, we could show it to as many members of the committee as we can get together here when we have a print. Dr. Turner is Chairman of our committee on motion pictures; the other members are Dr. Withers and Dr. Sutton. Then there are several members of the Advisory Educational Group who are fairly near New York, such as Miss Jean, Miss Strachan, Dr. Black, Dr. Wood, and Miss Abbot is not very far away. What we would like to do when the occasion arises, is to submit it to this group for authorization for use in schools.

DR. SUTTON: I wish to move this be a committee.

DR. SUNDWALL: Seconded.

Unanimous approval.

DR. SHEPARD: Will this film be available on the West Coast? Let us know when

it is going into our theaters so it can be mentioned in the schools.

DR. ARMSTRONG: Dr. Shepard will have copies on the Pacific Coast.

DR. SUNDWALL: Could it be shown at this conference meeting the end of this month? Many people will be there.

DR. ARMSTRONG: Would you have equipment if we could provide a print?

DR. NEILSON: I imagine we would have.

DR. ARMSTRONG: Good idea.

DR. SANDIFORD: Do the theaters pay for rental?

DR. ARMSTRONG: No.

DR. SANDIFORD: That's wonderful.

DR. ARMSTRONG: The theaters are generally glad to get a short subject. This one takes about 10 minutes.

MISS ABBOT: In Philadelphia, every theater showed our last picture.

DR. SHEPARD: Is there any way in which colleges may know of the availability of the film in the theaters?

DR. ARMSTRONG: We shall try to notify the college people. It is a little difficult, because the dating of the film is made by the theater manager or by one of our Managers who takes it to the theater, and generally we do try to notify local health departments and other agencies that might be interested. With our safety picture, we made an effort to notify local safety commissions or chambers of commerce.

DR. SHEPARD: I wonder if the college people could not be notified. I shall leave a list of our member colleges for a nucleus.

Miss Hattie please see me P.B.

DR. ARMSTRONG: If the committee approves it, and thinks it is a well treated subject, we will try to work out a plan when it is released that educational institutions can be notified of showings. Probably can be done in many instances.

MISS JEAN: How many copies will you have?

DR. ARMSTRONG: 150 prints to begin with. The average commercial film finds 150 prints quite adequate to cover the country. 35 mm. prints for theaters. We are also ordering thirty five 16 mm. prints which will be available for educational and demonstration purposes.

MISS JEAN: It occurred to me that Miss Elliott and Miss Birdseye might see it.

DR. ARMSTRONG: Yes, Mr. McNutt and the Federal Security Group, too.

Miss Williamson, what else do you wish to bring before the group.

MISS WILLIAMSON: Before we close the discussion, Dr. Neilson asked me to mention the work of the Motion Picture Committee of the American Association for Health, Physical Education, and Recreation. This Committee is trying to raise the standards of the professional motion pictures in this field for use in schools, and it is studying the work of all motion pictures committees that have pictures available for schools. It is also trying to organize a group of experts who would help guide the making of motion pictures to prevent these mistakes in technical aspects. We are working out a plan of having a small committee with a large group of consultants to whom we can turn on these various aspects. We are stressing that we should have educational psychologists to guide the educational side of it.

DR. ARMSTRONG: Ladies and gentlemen, that brings us to the end of our formal Agenda. Are there any additional matters?

DR. SHEPARD: It occurs to me that this matter of visual aids is becoming very important in our whole educational procedure. Isn't it time we made some comment encouraging state departments to make some provision for equipment in the schools?

DR. RYAN: Make a provision for people to know the sources and how to handle and manipulate motion picture machines and visual aids machines. Teachers leaving colleges should be equipped to run the films when they go out to teach.

DR. KELLY: Are not well-regulated school systems making provisions?

DR. RYAN: In North Carolina all distribution of film material goes through the school.

MISS JEAN: Isn't there also the question of people having definite knowledge of how to prepare to use the motion picture? It isn't just a question of presenting something on paper, as it were, but is a matter of preparing the students in advance and having the discussion afterwards.

DR. KELLY: There are three types of moving picture visual aids. The school project, that is student manufactured on student interest, has value different from any of the other types. Then you have something which gives certain factual information. Another type has to do with the actual instruction in the classroom, fitting into the lesson itself. For example, I recently saw a film on the production of coffee. There is no better way that you can show that to a class than through a film that shows the people out in the coffee plantation picking the coffee and the way they gather it up, all operating as a whole.

DR. ARMSTRONG: Dr. Shepard, I don't know whether you got an answer.

DR. SUTTON: There is a great deal being done. I don't know of anything liked so universally. Even little children are more than pleased to make their own slides and negatives.

DR. ARMSTRONG: Are there any other questions or suggestions that should be presented? Doesn't all this lead up to a point that we brought up downstairs? It would prove helpful to put into some sort of form the knowledge we have in connection with the use of films and the making of films. I am not at all sure we would be the best organization to do it. There are a good many film agencies, educational film agencies, that are definitely that and nothing else.

DR. TURNER: But none of them are doing this. I did a lot of research, and dealt with all the motion picture people in the United States, and found that only the professional groups, such as New York University, are really interested in utilization of motion pictures from an educational point of view. Other groups are concerned with selling their films.

DR. ARMSTRONG: May we take it under consideration?

DR. NEILSON: There is a national organization (National Motion Picture Research Council) of which President R. L. Wilbur, President of Stanford University, is Head. That is just their purpose.

DR. ARMSTRONG: If there are no other comments, I want to thank you for your cooperation, not only today but throughout the year, and for your participation in this wholehearted manner in our program. I think our little experiment of a slightly different procedure expedited the consideration of a variety of topics. You will find the expense vouchers in the back of these folders, and I trust that coming today has not taken you too far out of your way. We deeply appreciate your willingness to sit down with us for a full day and discuss these matters. We realize that everyone is extremely busy and we take it in a complimentary fashion that what we are doing is of interest and concern to you.

DR. SUTTON: We thank you. This is an inspiration to start the year right.

ADVISORY EDUCATIONAL GROUP
Special Committee
December 28, 1936

Present: Miss Abbot, Miss Jean, Dr. Kelly, Dr. Mi.eault, Dr. Ryan, Dr. Sherbon, Dr. Sundwall, Dr. Sutton, Dr. Turner, Dr. Armstrong, Dr. Dublin, Dr. Lanza, Miss Williamson.

Dr. Armstrong

I want to take the occasion to welcome you here to this little meeting and to thank you for your cooperation and assistance during the last year as hitherto. I also wish at this time to express our appreciation here at the Home Office for the assistance given by the other members of the Advisory Educational Group who have expended generously of their energies and efforts, either individually or as members of subcommittees, to aid us in carrying on the activities of the Bureau which has been authorized by the Company and perhaps even more in a fundamental sense by your advice and guidance. I regret that both the Chairman of the Board and the President are out of the city. The Chairman has been away for some time. The President regrets his inability to be present at luncheon and asked me to express his personal greetings and best wishes.

We have attempted to secure your advice from time to time through reports as to the activities of the Bureau and I should like to know before we get through as to whether our procedure in that regard are adequate and whether you feel that you have been kept sufficiently in touch with the activities, at least as to the important ones.

Miss Williamson plans briefly to run over the more important activities of the Bureau and Dr. Dublin has expressed a willingness to give us a little summary of the year to date statistically from the point

of view of the Company. We have, as you see, a somewhat full program, the important part of which is made up of the committee reports and discussions which may ensue and certain new questions which may arise. Therefore, we in our preliminary statements, will endeavor to be as brief as poss ble in view of the greater importance of the reports and discussions which will follow in the program.

I might say just a word about the general status of our activities. In the first place, I think it may be said that the Company and other insurance companies are sharing reasonably in the business and economic recovery that is taking place. The President said the other day that the amount of insurance this Company has in force will have increased by the end of the year to about one and a quarter billion dollars - 21 billion and a quarter dollars will be the total. This indicates a continuous success in insuring the American people. Incidentally, it was pointed out recently in a report that some one recently calculated that in this country there was ten times as much insurance per capita as is the average throughout the rest of the civilized world. The contrast is not surprising to any of us but the figure is a striking one. This year also is the best year we have had in the history of the Company since 1929 with reference to termination of policies. I think it is very probably that at other times in industry on the upward curve show more marked increases than do the more stable investments. Now is the time when money is becoming more interested in making more money and more rapidly and returns for investment of the more speculative character are characteristic of this phase of business cycle. Nevertheless, insurance is coming along quite satisfactorily.

The Chairman of the Board, Mr. Baker, made one interesting remark recently that I thought was impressive of the stability of this Company and reflecting also the stability of the insurance business as a whole. He pointed out that among our 50,000 employees, including Home Office and field staff, during the entire depression at no time has any individual been laid off because of lack of work. There has been no curtailment in force. The total number of employees has considerably increased during that period.

The work of the Welfare Division in general has gone along the much the same channel. We have endeavored as far as our expenses are concerned to keep within the level of last year which we considered an optimum, at least for the present, for the Division. For many reasons this year, some of which are obvious, the volume of usage of our educational materials has markedly increased. Our exhibits, our window displays, our special exhibits for educational purposes, have doubled from somewhere in the neighborhood of 1200 to about 3000. The total amount of educational literature as distributed through all channels will have exceeded a total of 60 million, which is probably six or seven million more than in previous years. Our Nursing Service has run along on about an even keel as the last two or three years. Though our Nursing Service is considerably older than our School Bureau yet we have found it advantageous in our nursing organization to take a leaf out of the school work and have created an advisory nursing committee made up of certain of the more important and and outstanding visiting nursing associations and national nursing organizations so that we find here the experience that you gave us and hve given us is being profitably translated in another field.

There are other things that I ought to call to your attention and that probably during the day we will have an opportunity more fully to discuss. They will come up in conjunction with other discussions. I do want to mention that we are continuing an increasing interest in our efforts to bring pneumococcus pneumonia under more adequate control by exhibits, by educational material, by cooperation with State Departments of Health, and State medical societies, by continuing contribution to the New York State Department of Health and the State medical society here in a special demonstration in the early diagnosis by typing, the serum treatment for appropriate cases, the extension of nursing care and all of those measures we try to bring lobar pneumonia under better control. This is the most important objective of the Company.

We have from time to time adopted several objectives but from time to time some one of them has stood out as most conspicuous. (Dr. Armstrong then briefly outlined Framingham and Thetford Mines Demonstrations as two previous conspicuous objectives). Our third was diphtheria. The death rate has been reduced from 27 per 100,000 to 1.7. Next in the list is pneumonia. It costs us nine million dollars a year in death claims. It surely is preventive to 25 or 30 per cent and we are convinced that that is the important thing for us to stress at this time. It is the logical outgrowth of our past efforts. If we could today, and we can, together with the cooperation of the health departments and medical societies, bring under control pneumococcus pneumonia and reduce the mortality rates by 30%, we would save in a few months xkk in death claims all the research money we have spent.

We are considering the possibility of a pneumonia film. We have a number of suggestions that have been submitted. It is difficult to get the right kind of scenario. We are in no great hurry to get out a lay educational film. The medical profession needs first to be educated. A professional film may be the kind that in most states should be used before a lay picture should be released. We canvassed the states in that regard and know what is being done. There are only five states in the whole country that can be said to have an awareness of an adequate program, let alone an adequate program, for the early diagnosis and treatment of pneumonia so that they feel that time must be given to educate the medical profession.

We are also now aware of the growing interest and the increasing opportunities for education in the field of syphillis control. We have having in February another advertisement on this subject. We have just revised THE GREAT IMITATOR which has been brought up-to-date with reference to statistics and figures and is now available for use. You have all been aware of the remarkable breakdown in the taboo in reference to this disease largely attributable to Dr. Parran. We are cooperating with him. We are quoting him in the ad. We are referring to the United States Public Health Service campaign. None of that is new except in volume but we are liberalising our policy with reference to our literature. Hitherto the Great Imitator has been given only to educational agencies. We are now making it available to our own managers and agents for restrictive use but we are approaching the point of putting it on an equal basis with any of our other pamphlets.

We will discuss later undoubtedly some of the questions of safety.

In our 1957 series of special advertisements, the February issue deals with school boy patrol. We are considering the feasibility of a safety film or film strip. I have here some safety charts that have been gotten up by Dr. Dublin and his associates concerning accidents of all kinds, for all ages, and all causes. This was displayed for a medical meeting but they have now been reproduced and are being sent out. They might be used as a basis for a film strip for use in schools. You will be interested to know just one other thing.

The physical defects study in which this Company has been interested. As you know its first stage was reported in the bulletin entitled "Physical Defects - the Pathway to Correction." No one knew what might happen after that although we were all aware that the observations there were in some respects inconclusive. There was an indication of a need for further study in certain directions and certainly for the practical demonstration of certain conclusions and recommendations. Through the initiative largely of the Health Department of New York City, with the help of Dr. Van Ingen, additional funds have been secured for the continuation of certain phases of that study - attempts, for instance, to try to show what could be accomplished with a more adequate and reliable record system. What could be accomplished by a greater degree of cooperation between teachers and medical examiners, between health department and department of education, and between the other agencies that are involved in giving a service to the child. What could be accomplished by application of screening and other methods recommended by that report.

The Health Department has secured sufficient funds from three sources: The Liquidating Committee of the American Child Health Association, the Milbank Foundation, and the Company, to carry on that work under somewhat new auspices but along the same lines under the guidance of Dr. Van Ingen as Chairman. There is nothing more to be said about that now. It is simply getting under way.

Also, we will have for your consideration in some form shortly certain parallel studies that have been made by Dr. Shepard and associates in cooperation with educational and health authorities in the schools of Berkeley and Palo Alto. There was a feeling that while the Physical Defects was an important one and great contribution, yet as it stood and as it terminated it left a taste of defeat and failure to some extent. It pointed out defects, where the pathway failed rather than where it succeeded and Dr. Shepard and his associates have attempted by an inquiry in Berkeley and Palo Alto where they think unusually fine results are being accomplished to bring out what can be done. We will send you the report subsequently.

DR. DUBLIN

Dr. Armstrong said before that the Company had arrived at a point where there were 21 billions of insurance in force. I think the group might be interested in having that translated into the terms of human beings. That would mean 27 and a half million people in the United States and Canada of all ages, both colors and both sexes. This has been an extraordinarily good year. We shall have increased our total policyholders

by close to a million. That is, of course, an unprecedented record. From the point of view of the health of these people, we cannot throw much light on the state of their health except as we have this record of their dying. That is the primary experience of this Company. These records are tabulated weekly. We have currently a good record of what is happening. You will be interested to know that 1936 will prove to be almost as good as 1935, which was our record year from the point of view of mortality. The indications are that we shall show a mortality about 1% higher than last year. That in spite of two very serious circumstances occuring in two different parts of the year which had the effect of rapidly increasing mortality. You will remember about this time last year we were in the throes of a very severe cold spell which continued right through January and a large part of the country was suffering severely from blizzards and cold. That carried with it a sizable increase in mortality. That meant pneumonia. Later in the year there was another serious happening - drouth and severe warm weather and deaths mounted. Yet in spite of these two serious events the mortality at the end of the year was not quite 1% higher than the best year on record. (Figures refer to Industrial policyholder

On the other hand in the country at large the indications are that it was not quite so good. We have a report from 86 cities. The record shows a mortality about 6% higher than for the year before. We made an inquiry ourselves among the State health officers and got returns from 34 or 35 states which show the same story. In contrast with that situation our own people apparently came through without much change. It is difficult to explain differences of that sort but to those of us who are associated with what the Company does in attempting to control mortality,

it is gratifying to see this. From the point of view of details of the picture you may be interested in some of the high spots. The tuberculosis death rate is continuing to fall. It was dropping very rapidly in the first part of the year. For three months there was a reversal, the rates were higher than the year before. There will probably be a 3% improvement over the year 1935. The total death rate from tuberculosis will be in the order of 52 or 53 per 100,000. The rate will not be as low as I thought it would be at the end of the year. This is a rate of working people and their families, a rate which means a rate of 42 or 43 in the general population of the United States, from a condition which only a generation ago was nearly 200. Mortality from tuberculosis has been reduced to about one-fifth of what it was twenty to twenty-five years ago. The communicable diseases of childhood have had another good year. Each of the four principal ones all showed declines. The total is certainly low. The end of November the rate of all four was on the order of 6 per 100,000. Not so many years ago diphtheria alone was 3 or 4 times that. Diphtheria this year will strike a new low. It means the campaign is effective.

We were running very low on automobile accidents during the first part of the year. Then there was a change in the picture and now it is just a bit lower than last year. The rate for the year for pneumonia is about 6% lower than last year. There was a striking increase during the first quarter. Influenza is about the same as last year. The rate has gone up for a number of chronic conditions, heart, diabetes. There has been a reversal in the rate for cancer. We must expect the mortality of the higher ages to go up as the mortality of the lower ages goes down. The average age of our policyholders is slowly climbing.

All of this means that the work that is done in the field of health conservation is effective. It is reflected in these ways. Perhaps you will be glad to have one figure I use a good deal in my own thinking in summarizing the whole picture. I have in mind the expectation of life at birth. An amazing thing has happened among the working people. In 1911 the expectation of life was 48.4 years. At that time the expectation of life in the general population was 55. In 1935 it was 60.3. In the general population in 1934 it was 60.8. The differential is wiped out. That is what has happened. These figures are accurately computed. Through the processes of the printed and spoken word, through the use of the newspapers, a great many people learned simple things. The training of thousands of young men in medical schools in the profession of medicine. A thousand things are happening and the accumulation of them———. There is nothing like it in the world. With regard to the population our country has done very well and it stands on top of the pile in terms of gain. It is not quite on top of the pile in achievement. In gain it is about the same in England and Holland. It is a little less than the Scandinavian countries.

Dr. Sutton: Has there ever been a movement like that for rural people?

Dr. Dublin: Yes. Some years ago there was a considerable agitation in insuring large groups of farmers but we got nowhere. The difficulty was collecting premiums. It was also foreseen that during depression times there might be very serious dropping of insurance. Although we were anxious to cooperate with the farmers nothing came of it.

Dr. Sutton: I should think the death rate would be very much higher, among rural people. In the question of tuberculosis I wonder how

the different sexes and the different age groups are in that decline. I read that our girls and young women had a higher rate.

Dr. Dublin: The greater gain has been in the male sex. The application of knowledge wipes out differentials. The male suffered more from all sorts of disability - occupation, ignorance, bad habits. The processes of education and training eliminated the differences between the two groups. The expectation of life for the negroes in the United States is 49 years which is higher than the expectation of life for Italians in Italy. The negroes are picking up. They are learning the tricks. Their tuberculosis death rate is dropping almost as fast as among the whites.

MISS WILLIAMSON

The influence of the Advisory Educational Group has been strongly felt throughout the year, especially in strengthening our relationship with other professional groups. The way you have taken advantage of opportunities to put other groups in touch with our services here has been very marked. There is not time to mention all of the instances of this exchange of professional contributions, but one of the most recent examples is Dr. Ryan's suggestion to the Editor of the Progressive Education magazine that she secure our advice in planning the number on health, which is to appear in January. Both Dr. Ryan and Miss Jean were most cooperative in contributing to the programs of the Health Education Section of the New York Society for the Experimental Study of Educatio, of which I am chairman. The Society is publishing a Yearbook for the first time this year, which gives us an opportunity to extend the influence of this organization through the distribution of this Yearbook. It will include a chapter from the

Health Education Section giving outstanding experiments in school health education. Dr. Sundwall has asked for active participation on committees of the American Public Health Association and in the College Hygiene Conference. Dean Withers requested and received professional assistance in a pioneer movement for the education of school administrators through a summer course at New York University. Dr. Kelly, you will recall, gave us advanced information on this course at our committee meeting last year. He had a vital part in making the course a success. Dr. Turner includes us in his world perspective and gave us the pleasure of helping to arrange conferences for Sir Hassan Suhrawardy, Director of Health for the East India Railway, while he was in this country.

My first visit to the University of Toronto during the summer of 1935 led to the privilege of our having three representatives of the Department of Education and Health for the Province of Ontario present their experiments in teacher education before our New York Society for the Experimental Study of Education and the preparation of a special bulletin of the Society on this subject. I spoke to the class for teachers at the University again last summer.

We hope to extend our cooperation with professional groups to include school librarians and school nurses. The way has been opened by recent invitations to speak at the meeting of the School Librarians' Association of Philadelphia and Vicinity and at a conference of school nursing supervisors of New England, New Jersey and New York. The latter invitation will be refused since it conflicts with other engagements but Miss Eleanor Fair, our medical Librarian, will speak at the Librarians' conference January 7, on the nature, source and distribution plan of our

pamphlets suitable for high school use.

Another example of professional cooperation is an experiment in furnishing field work for a University student who is majoring in public health. Dr. Haven Emerson asked Dr. Armstrong to provide three months' field work for Miss Doris Hochstadter which was required for her Master's degree. At the end of the three months Miss Hochstadter accepted a position as Assistant Supervisor of Health Education in the Connecticut State Department of Health. This proved to be an interesting experiment. While she was with us she was given opportunity to participate in different types of work conducted by the School Health Bureau.

Miss Sefton, a member of our staff who is a specialist in the field of physical education, is active on the Executive Committee of the Women's Division of the National Amateur Athletic Federation and this year has been appointed Vice-Chairman. Her articles "A Guide to the Literature of Physical Education, Including Certain Aspects of Health Education and Recreation" and "Knowledge Test on Source Material in Physical Education Including Aspects of Health Education and Recreation" appeared in the RESEARCH QUARTERLY. They were in part reprinted in the DIGEST OF HEALTH AND PHYSICAL EDUCATION and EDUCATIONAL ABSTRACTS. We ordered 100 reprints which were sent to a selected list. At Teachers College an instructor in the Department of Health and Physical Education mimeographed the Knowledge Test for his students and assigned them the task of filling in the blanks from the Guide.

We are also having prepared for Canadian professional schools for teachers a translation of our Monograph 8, "Health Programs in Professional Schools for Teachers," into French. Dr. Miresult is helping us with this.

All such activities have a direct bearing and relationship to our correspondence, which has definitely increased during the past year. You have the figures before you. The increase in letters from school administrators is explained by the unusually heavy demand for the bound set of the Health Bulletin for Teachers, the popularity of our new booklet "Biographical and Scientific Material in Health Teaching" which is a revision of "Some Ways of Using the Health Heroes Series," and the answers to Dr. Armstrong's letters to school superintendents asking them whether or not they would like a course in school health administration.

Our Bureau is organized for the purpose of filling gaps in school health education and while this correspondence with school superintendents is encouraging there is still no question about the fact that one of the greatest gaps is help for the school administrator. This letter from the Superintendent of West Point United States Military Academy has special significance. In the first place it is a long personal letter to Dr. Armstrong in answer to a form which shows that the Major General has taken the form very seriously. (Letter read).

This brings up one of the urgent needs in the field of school health education - to define the work of specialists. Their relation to the classroom teacher, to teachers of special subjects, and to school administrators is not clearly established. Dr. Ryan will discuss school health administration more fully in his report.

The specialists are usually more interested in health than the classroom teacher and the school superintendent, and probably always will be. We are still looking to them to take the initiative. One very nice example is that of the State of Louisiana. The State Supervisor of Health and Physical Education sent a circular letter to all superintendents in

Louisiana announcing our material and asked us to mail the Health Bulletin for Teachers to each principal. To the superintendents who did not write to us after receiving his announcement he sent a second letter. As a result our correspondence with superintendents in Louisiana has increased over 50%.

The relationship of specialists is one of the practical problems facing school administrators. Certain significant things that are taking place which will affect this relationship are the organization of the Health and Physical Education Section of the National Education Association to bring about a closer cooperation with the American Physical Education Association, and the interest of the United States Public Health Service and the Children's Bureau in school health education. Appropriations are now being made by national health organizations to health departments for developing state-wide programs in health education.

Our correspondence shows a very decided increase in interest in the subject of safety. We have difficulty in meeting the demand for help on this subject and have very little especially prepared for schools. We are considering a film strip on this subject which Dr. Sherbon will discuss. Our triple publication of the Health Bulletins for high school boys and girls, their parents, and their teachers on "Safety" which will go to press shortly will be a great help. We are considering extending the distribution of this bulletin to others in the community, such as Chambers of Commerce, health officers, medical societies and chairmen of safety organizations. Mr. Sutton will go more fully into the details of our work in safety education.

The Health Bulletin for Teachers continues to be very popular, and we get most encouraging letters from national and university as well as local leaders telling us that they are valuable. Dr. J. F. Rogers of the

Office of Education wrote to us that the bulletin for teachers for the month of September is unique and valuable and that if anything along these lines has appeared in print it has not come to his attention.

Through the cooperation of the Statistical Bureau related articles are being carried in the Statistical Bulletin. Our correspondence reveals increased interest in health statistics. We shall appreciate having suggestions from the group as to topics for the Health Bulletin for Teachers for next year. There are some questions about literature distribution which Miss Abbot and Miss Jean will discuss with you later.

We shall not go into a discussion of the plans for next year until after we have your reports as a background, but there are opportunities for continuing to develop our work along the same five main lines: Demonstrations, correspondence, conferences, preparation and distribution of literature, with all of which we need your help and advice.

DR. ARMSTRONG

Thank you, Miss Williamson. I think you have given the total picture. The total amount of correspondence showed a material increase over last year, in all of our offices. In Canada it is 18%, in the Pacific Coast Head Office 11%, and for the Company as a whole 21%, which is a reflection of the activities in literature, etc. That increase is more marked with educational administrators where it is 55% over last year which is along the lines of our program. The amount of literature used in the schools is about the same as last year.

The letter which Miss Williamson read is an interesting one and raises a number of interesting questions - not only the question of

specialists but Major Connor is a little disposed to favor a little more regimentation than education.

Miss Jean: It seems to me he put his finger on one very vital spot where he says he should have all those concerned work as a team. That we recognize is the greatest weakness in our program. That is not happening as we discovered them we try to find integrated school health programs.

Miss Abbot: But the person who coordinates must have the knowledge and philosophy.

Mr. Kelly: That is one of the most outstanding weakness in the field of administration. Miss Abbot struck the point right there. Your school administrators don't know what it is all about. Your specialist has gone way ahead of your leadership. They qualify for a field and bust that field. Calling it health and physical education is absurd. The physical education people will have their name in the lead. It is a case of getting these specialists, getting anplace for them, and keeping them in their places - that is the job ofour administrator.

The finest thing you have done yet has been your survey. That is the best and most encouraging thing that has been undertaken.

Dr. Armstrong: This study was a reflection of the counsel you gave us. The administration that believes in specialists brings in all kinds of specialists. They are so far ahead that the next administration will put them out.

Dr. Evans: You have your educational administration and you have a type of business administration. Whether it should be your specialist who has your real philosophy or the school administrator, both of them are being seriously handicapped by a mechanistic attitude. In St. Louis, the monograph

about the school system is mostly busin ss, and just a few pages about the children.

Dr. Sundwall: You have spoken of specialists in schools. I think it is a lot of cult that has gotten in here. It is the business of the administr tor to look into the situation. If they got a teacher of chemistry they would look into his training in chemistry. We want th t same type of training in health.

Dr. Turner: May I ask whether you have in mind to discuss later the possibility of providing some professional opportunity for administrators to consider some of the problems of health administration?

(He was answered th t would come under Dr. Ryan's report)

Dr. Sundwall: I am very much interested in your report of the field experience of Miss Hochstetter. We have a program of study along th t line leading to a Master's degree with which we specify three months of field work. Can we send them to you? What can we do about that?

Dr. Armstrong: Th t is our first experience, Dr. Sundwall. We never tried it b fore. Dr. Emerson made the suggestion. The girl came down here. She was given the opportunity of seeing what was going on. Her services were contributed.

Miss Williamson: As far as services are concerned it wouldn't justify the expenditure of time for three months. It does not pay on h t basis. The way we can feel justified in giving that much time to her is she gives a better service throughout the State of Connecticut.

Miss Jean: I had an opportunity to see what she was doing. Miss Williamson arranged a magnificent program for her. She really met and

understood the work of all the national organizations which have offices in New York.

Miss Williamson: It takes a great deal of time.

(In answer to Dr. Sundwall's request regarding sending graduate students here for their field work Dr. Armstrong suggested he take it up separately when the situation came up.)

Mr. Kelly: We have quite a number of specialists coming to our city to study the health work but they are all specialists. They will come to study some particular line of work but no one comes to see the administration.

Professional Schools for Teachers

Dr. Ryan: I will go back to see why this particular committee happened to be established. It was about six years ago. We were discussing the most economical point at which you could eventually affect educational procedure and thereby affect child health. Hence the beginning of material for teacher training institutions. As I look over the outline of material I am amazed at what has been done.

Three monographs have been published since 1931, The one on "Teaching Health to Student Teachers", the "Health Programs in Professional Schools for Teachers" and the Towson description. That is certainly the material which has been filling one gap quite magnificently in the terms of needed material. With regard to the inquiry that was sent out last year. I am not sure that you made quite clear that there were two inquiries.

First to the universities to find out what they were doing, then to the superintendents and principals to find out what they wanted. When they are put together you get a realisation that there are people who want certain things that they are not getting. That is not the only conclusion

but that certainly is clear. These were selected from literally hundreds of interesting comments.

Miss Williamson already mentioned the translation into French of the "Health Programs in Professional Schools for Teachers."

It has also been suggested that some kind of publication be attempted which might put together in convenient form the information that we think graduates of teacher training institutions ought to have on personal and community hygiene and the essentials of a school health program. That might perhaps some time be a next step for a publication.

It seems to me the two things that we need most to consider have already been touched upon. In the first place I think this interest in health education material is symptomatic of a real change in the preparation of teachers. If I see it right a very interesting thing has happened. We have adopted a philosophy of education which involves a major control of health. We have put that policy into effect in a good many schools particularly for young children. We did not set up a teacher training program to meet those needs. There is a gap between what we really know and do. It is a matter merely applying in preparing educational workers, applying what we already know. I have been saying all along some encouraging things have been happening but I am convinced that we shall have to go unnecessarily slowly until we train teachers.

If you take the offerings of institutions training teachers, the proportion of courses that are actually offered in terms of health is amazingly small. If there are are 77 courses, not to exceed 7 will have something to do with physical and mental health. When you analyse the courses that are given it is very rare that the opportunities are used. The one exception is with young children. It is one of those simple things that

you don't like to elaborate but it has not been won over. We have been saying for years that we are not interested in merely academic programs. We have said we are interested in human beings. We have said that but we are not doing it. It seems to me anything you can do to make available what you are doing to contribute toward the kind of material that will make easier the changing of the teacher training institutions.

Miss Williamson: What would you think of a demonstration of a course in a summer school? A course set up for administrators?

Dr. Ryan: I would imagine the sort of thing that started last summer is distinctly what should be done. It is going to take more than one demonstration.

Dr. Turner: I suggested in reply to the letter that it might be possible to arrange a three or four day institute in connection with the Department of Superintendence at which people who spoke with national prestige could present to school superintendents the question of problems in school administration.

Dr. Kelly: Is health education recognised in this year's Superintendent program?

Dr. Ryan: What bothers me is that the recognition is almost 100%.

Miss Williamson: Dean Withers made a beginning last year. He had about seven lectures on the subject of school health. They were given by school administrators in almost every case. Would you think that it would be well to consider a demonstration at New York University with Dean Withers directing it.

Dr. Kelly: It was disturbing the few people we had there.

(Dr. Armstrong asked Dr. Ryan if he had any recommendations to make)

Dr. Ryan: We have not had a meeting of the committee and I am not prepared to make any concrete suggestions.

Consult Committee //

Dr. Armstrong: Would your committee be willing to take under consideration the suggestion that has been made this morning? //

Dr. Ryan: I think there are several suggestions of this sort that might be practicable.

Dr Sutton: It did occur to me one use that I put this report to. I made out of it fife bulletins for my principals and teachers. I selected from these comments and suggested the things that were helpful. If the committee could in some way get across to the average school superintendents that the facts here contained might be applied to their own constituencies in a way that might be worthwhile. We used to have a health conference in our city four times a year. It hadn't met for some time. I called this health conference. We sent invitations to 600 organizations to the conference of one hour. If they couldn't come to have some representative. In that one hour we took fifteen minutes for the ~~head of~~ the public health department; the dental side had five minutes, the public health nurse, 5 minutes, the doctors 5 minutes to tell what was being done in the schools. We gave the teaching association 15 minutes. I took 15 minutes to ~~exhort~~ exhort and at the end we took 15 minutes to have 30 seconds' speeches of what you can do with your program in the organization. The only thing we asked them was to have five minutes for the Labor Union, five minutes for the debutante club, etc. We have over 200 organizations represented. In spite of the fact that we limited it to one hour they wanted another hour. ~~The American Legion~~

Wrote Dr. Sutton for letter.

Miss Jean: Couldn't Dr. Sutton give you a one page letter telling of this which you could send out to the superintendents simply quoting Dr. Sutton as having conducted this particular piece of work and you send it out to the superintendents as a follow up? It could go particularly to those who replied to you and have indicated their interest.

Dr. Armstrong: I should like to have the consideration of the committee on this.

Dr. Ryan: Good.

Miss Jean: I have one other suggestion. The question of getting the superintendents to attend these group meetings. We have all been impressed by the fact that at the N.E.A. meeting that when there is a good program that the people who need to be there most are not present. You are going to continue to have a small group until some greater incentive is offered. We offered students to the universities that would offer courses in health education. That is the way those courses began in the United States. Instead of subsidizing a course that there be fellowships or scholarships offered to administrators attending such courses. In other words make it seem important.

Dr. Turner: You suggest that we subsidize the university with students instead of dollars.

Miss Jean: Exactly.

Dr. Armstrong: It might be considered. We have in times past subsidized universities.

Dr. Dublin: It seems to me that what Dr. Ryan said would make a good editorial. It could be boiled down to 500 words describing the

the change of attitude, the lack of machinery. I bet it would make the first page of the N.E.A. Journal. If you write such an editorial I am inclined to think that they would jump at it and print it.

Dr. Armstrong: If there is anything our office can do to help I am sure Miss Williamson would be glad to help. I have a very distinct impression that Dr. Ryan himself has devoted considerable time and attention to this report. I know he has been in the office several times working with our staff so that we owe Dr. Ryan a very great deal of thanks for the time and effort that he has put in to the work of the committee in the last year or two and hope that one good turn may deserve another turn and that we might have some more assistance in working out the application of suggestions that have been used today.

Dr. Ryan: One suggestion was the possibility of doing this very thing in some of the educational journals. I am sure that "School and Society" would take the report practically as it is. It might be possible to make a page or two summary of it to send to journals.

Dr. Sutton: I think that some such summary as Dr. Dublin suggests would find place in educational journals.

Dr. Armstrong: In Canada Dr. Mireault is translating Monograph 8, "Health Programs in Professional Schools for Teachers" for distribution in cooperation with Dr. Burnette to Canadian French Schools in Province of Quebec.

Dr. Mireault: I have been asked to rewrite and re-adapt it to the Province of Quebec. It would be of advantage if we could come in contact with the superintendent of our colleges in education because there are some attempts being made by school schools like Our Lady of Assumption

but there are very few and they are enclosed in their building. They are not expanding outside. I can tell you that our leaders in education, the directors, and all the leading men of the University of Montreal would see health education programs promulgated in the Province of Quebec and they will foster that movement. I have a letter from our Minister of Health. He wants to reorganize the health instruction in the Province of Quebec. There was almost no organization so far but they don't know how to plan it. I inquired from him if they had something they wished me to do here and to submit toyou. They replied they don't know. I believe that we must, some organization or some individuals, must help them to plan and set up what is to be done. Our people are lacking totally of the knowledge of health but since a few years I noticed with satisfaction that it is coming up. They are very interested in the scientific development which come into their reach. It would be an easy thing to put that in the minds of all the people. That is the way I contemplated the thing and that I see the situation.

Dr. Armstrong: Thank you, Doctor. Dr. Mireault is in close touch with Dr. Burnette who is in charge of our Canadian office.

Dr. Mireault: I am not often in touch with him.

Dr. Ryan: I understood Dr. Mireault suggested that he would take it up with other colleges. If he took the bulletin, gathered together all colleges, there is something that has not been done. Wouldn't that lead to the fundamental discussions that we hoped would be given? Actually put it to a group of people and ask them exactly what is being done.

Dr. Mireault: I am planning to meet 20 of these people every month but I have been advised by the man who is in contact with them to meet them

separately first because if I meet them together there will be a fight and nothing would come of it.

You could make out of it another Framingham demonstration. We have a unique control and we could have statistics made up. I would like to know if it is not possible to have statistics for morbidity just as we have for mortality. Is it not possible to have through health centers or in the country or through your visiting nurses in the city statistics for morbidity?

Dr. Dublin: The key is held by the physician. If you could get the physicians to complete records of their patients as they visit them.

Dr. Miresulti: I hope we will have the physicians to cooperate. In every district we have an outstanding educational establishment.and

Dr. Dublin: It has never been done excepting in countries where the physicians are employed by the State.

Dr. Miresulti: We have three different sources of information - physicians, sanitary units, educational establishments.

Dr. Dublin: What would the Minister of Health for the Province say to your idea?

Dr. Armstrong: I suggest that you discuss it with him.

We are due to lunch at 1?:45 which means that we have about 20 minutes now before we stop the morning session. Miss Williamson suggests that we might have any suggestions that committee members may have before luncheon. We might at this time ask if members of the committee have any new proposals or suggestions which you would like to bring before the group before the day is over.

The next topic that of safety education I feel will take perhaps a little more time than is provided and also we need Mr. Cole, the Head of

our Safety Bureau. The report on motion pictures could be discussed now perhaps unless there are any suggestions that committee members may have. I am glad to say that Dr. Dublin has agreed to stay with us during the entire day and I am asking him to preside this afternoon.

Dr. Sherbon: I want to ask when the time will be ripe to go on the radio with health education as a project for the Bureau.

Dr. Armstrong: That, of course, necessarily bears a direct relation to the Company's general policy and that is the question of use of the radio with educators or other groups. At the moment I know of no change in general Company policy in the direction of a revival of the use of the radio. We at one time, you may recollect, did give a series of general health educational talks for adults and school children as well, running them over a period of a year or so. That must have been eight to nine years ago. That was for a limited time and was discontinued when that period elapsed. About that time we started the use of the radio for morning exercises which ran for about ten years. Every few days some one makes a radio suggestion to the Company. The attitude of the Chief Executives up to this moment are contrary to entering into the radio field again.

Dr. Sutton: You need something on the radio to counteract the awful propaganda.

Dr. Armstrong: There are certain influences at work to try to improve it.

Dr. Sutton: It strikes me that one of the chief [illegible] where we might meet gaps in health is in the rural sections. I don't know of anything

in the world th t is so greatly needed in my part of the United States as better health inform.tion and health habits and gen.ral care than among the rural people. They ought to have some of the good things of life as far as health and life insurance are concerned. I wonder if these cooperatives might not be a way to get this group insu ance and through them distribution of the type of literature and information and possibly health service and nurses. I realize the difficulty in getting around makes it a great problem. Soil conservation is a great problem. How to bring security and health and economic security to those people. It does seem to me that if something could be done to put the blessings that have come to the rather poor and once disinherited industrial worker as far as living and length of years. If something could be done to this great mass of rural people.

Dr. Armstrong: It has been investigated from the insurance angle a number of times and at present it seems impossible to organise from the point of view of a private organisation. As far as our own services are concerned we are restricted by two considerations. Our efforts are primarily direct d to our policyholders and our policyholders are largely urban and our education for policyholders and their families are through the family and through the agents' contact with the family so that most of the material is distributed through that group. We do have a little relationship. Our farm contacts through the Farm Loan Division of the Company are fairly numerous. Our representatives in the Farm Loan Division do a certain amount of education but we have no organised effort.

Dr. Dublin: The Government is very conscious of what Dr. Sutton is saying.

Dr. Sundwall: I was wondering if you could look into certain school health programs in the United States which are outstanding in several respects. If these programs could be called to the attention of other people throughout the country through your bulletins. We all recognize that our doing of health lags far behind our knowledge. I realize that when we talk of the doing of health with respect to health services, correction of defects, etc., that we are getting into the economic problem which is responsible for t is great controversy that is going on at the present time. I have often been asked where is there an outstanding program where they really are getting results. If you could offer some incentive in some way or through your force whereby they accumulate and publish in your journal and through your bulletin a narration of how things are being done. That is one of the outstanding things which we know.

Miss Williamson: We would like to have suggestions from the group where to find such places. We had a committee but we were not able to get very much.

Miss Jean: We tried to limit ourselves.

Miss Williamson: If at any time you find a program that is worth studying I wish you would let us know;

Dr. Armstrong: I think, Dr. Sundwall, we are in a position to make an inquiry of that type and could readily find channels for the dissemination of the such material probably, if th re are sufficiently outstanding and conspicuous examples of excellent school health programs to warrant dissemination of information about them.

Mr. Kelly: One difficulty is that the superintendent in other ... places will not admit it if you find something outstanding in one place.

Dr. Turner: We could find here and there particular activities which are helpful and constructive and have shown results which meets Dr. Kelly's objection.

Dr. Armstrong: I should like to ask, Dr. Sundwall to put down such suggestions that might occur to him. Would you be willing to think that over and let us have any concrete suggestions that might occur to you.

Dr. Sundwall: You mention integrated programs. I should like to limit it very largely to that phase of it to show how these things are being done as far as correction of defects etc. Of course, an integrated program would involve all that but one could make a very comprehensive study of an integrated program and find it would be very weak in that phase. Just how are we getting this done.

Miss Williamson: At a recent visit at the University of Ohio I found some interesting things going on at the school. The next step needed was to have a research student to find out what each department in the University was doing and how it is coordinated.

Dr. Ryan: A place like that would have much value since it is the result of an eight-year study. If anything were done there it would have a far-reaching effect.

Dr. Armstrong: It is promising.

Dr. Mirsault: Which would be the piece of teacher education? How do you want them to be trained for the job? Will they be physiologists?

Dr. Ryan: Are you going to have teachers that modify human behavior? It is a fundamental problem.

Dr. Mireault: I am not satisfied with it. It does not give me the impression that students and student teachers will be impressed. We must find a way to show them.

Dr Ryan: There is a commission at present on the preparation of teachers with McAndrew as the head. An effort that has been going on to attempt to answer what it is that we are fundamentally after in the preparation of teachers. I will send a copy to Dr. Mireault.

AFTERNOON SESSION

Dr. [redacted]: Dr. Sutton, will you be good enough to give us your committee report?

Safety Education

Dr. Sutton: The pamphlet on "Industrial Safety Education in Schools" of which I wrote a little summary is now ready for press. I don't think I can take your time to go into details of the report which will come out soon and speaks for itself. You may, or may not, know we had four or five people who collaborated in production of this booklet on industrial safety in the schools. I think it is going to be avery fine piece of work and will serve a real need as far as industrial education is concerned. Dr. Whitney wrote a part of that work. Dr. McCarthy, Dr. Cressman and Mr. Stier are the other authors. It is a piece of work that will be very valuable. I have one thing in particular to report in reference to it. I hope there can be a follo-up of that pamphlet in such a way that it can make a demonstration of its worthwhileness and of its need for revision or its lack so that we might in the future include it. One of the best things that could be done would be to find some school system where industrial education is some

feature of it and where shops, home economics, sewing and other phases of teaching in industrial arts are included where these papers could be made a basis for teaching industrial safety in the schools. That would be my chief recommendation in the future.

The kind of mind is needed that would adapt itself to modern conditions to make a safe world. There is something in our having to adjust ourselves to the dangers that beset us and if we can begin in the industrial school where people commence to use machinery and where there are difficulties and dangers around them and can teach people to adjust themselves to that machinery as well as how to make machinery safe. We have two tasks; one making machinery machinery safe, the other making the person safe for the machinery.

Miss Williamson: Dr. Sutton spoke of the demonstration in industrial schools and at the special Committee last year he spoke about our looking into the school at Milwaukee. We have since done and also have looked into the Central Needles Trade School in New York City. Mr. Cole and I agree that is one of the schools which offer opportunities for such a demonstration and we should like to see the emphasis on the relation of the students' health to his safety. So far as we know there has been no such demonstration and the emphasis has not been ———.

Dr. Sutton: I should like to see a demonstration where the mental hygiene part of it is emphasized in such a way that we could study the relationship between a normal healthy child in relation to safety as contrasted where the health is not normal and the mental and nervous condition does not seem to warrant safety. Get people into that type of work where they are mentally fitted. A demonstration could be made showing the effect of diet, general health ~~exercise~~ on safety.

Mr. Cole: I think that the demonstration Dr. Sutton has outlined is most valuable, not only from the school side but as a guide to probable future study in industry. If the schools can take the initiative in starting certain studies of that kind it could be imitated in industry where it is needed very much.

It could have two major phases: (1) A try-out of the monograph itself; and (2) a study of the relationship of health to safety. According to the law of New York State there is authorized an Advisory Committee of the Board of Education and various bases of the vocational school work composed largely of outstanding industries here in the community in which those particular activities are carried out after the school phase. They have sub-councils each one dealing with various phases of industrial work. An advisory council composed of medical men has been recently set up and an advisory committee on safety to that group. The committee is headed by Mr. Arthur Williams, President of the Safety Council, composed of several very outstanding individuals of this community. In talking with Mr. Williams I felt that it was considered advisable that our demonstration might in a way be carried on with this particular committee of the Board of Education which would give us rather official backing for that demonstration.

Dr. Sutton: That strikes me as being a splendid thing to do.

Dr. Ryan: If there is any demonstration outside of this area I happen to know that a pretty good vocational man was recently put in charge of safety education in the Indian Service. His name is Norman Swann. They have schools which provide a variety of occupations. If you are at all interested he would try out anything you wanted done.

Committee on Motion Pictures

Dr. Sherbon read her report as Chairman of the Motion Pictures Committee.

Dr. Sherbon: Dr. Armstrong indicated in a letter that there has been some interest in pre-natal care. I wonder if it might not sometime be possible to issue a film on that subject for high school classes.

Dr. Dublin: I presume, Miss Williamson, that you are planning to send this report to all of the members.

Dr. Turner: One of the men from the Yale Institute of Human Relations came to see me several months ago and said that Mr. Haas (?) and Mr. Milliken were making available films from the screen which could be re-cut for educational purposes and they were trying at that time to work out plans for handling it with an advisory committee.

Dr. Ryan: Contact has been made. They have turned over the material to ———. They have made considerable grant to make available all this material. They can either cut, recut or they are authorized to make new films.

Miss Williamson: We have had conferences on that subject. Dr. Armstrong thought it was a good plan.

Committee on School Health Appraisal Forms

Dr. Turner: We considered two years ago the advisability of further appraisal forms. There are two elements against further action. Are we ready to go rapidly in appraisal forms? For example, in the correction of defects, the study which we made here seems to indicate that we ought not to _____ what we know today. Second, it may be that through the cooperation of some of the groups who are cooperating in the Health Section of the World Federation of Education Associations there may be in the next year or

two some steps toward the development of a cooperative council representing the various associations and groups concerned with school health and an appraisal form ought to involve the activity of such cooperating groups.

It would seem to me that it would be wise to continue a committee of the Company in this field and that this committee should keep the group informed as to what developments there are and what possibilities. I doubt if we are ready to take specific steps toward an appraisal form.

Dr. Sundwall I hope this committee will be continued .

Committee on Coordination of Health Education Activities in the School and in the Home

Dr. Turner: The area in this situation is where there is a tendency for school work to be taken over to somewhat greater extent by health agencies. There is a tendency toward generalised nursing. Many school superintendents feel that the health of the community is not primarily their consideration and it seems as though the supervision of health education is providing another supervisor. That is always a difficulty. The public health people realize that a person suitably trained in education and health can make a very distinct contribution there but most of the health officers are thinking of communities and not of what is being done in the schools. ———— a plan by which the health authorities and the school authorities may come to a better understanding of what should be done and the kind of people that should do it. I think we can get a great deal of help if the health authorities agree that there is a useful service to be rendered. My feeling is that something which is vitally needed and which would make a very distinct contribution would be a study which might be undertaken in connection with some institution in which two things might be done over perhaps a three year

period. First, bring to ether the knowledge that is available concerning successfu. relationships between the school health education program and the community health. A study of school health activities and public health education activities and the inter-relationships, the second step of which would be to experiment with the cooperation of a few selected communities with particular projects in which it might be possible to demonstrate the effectiveness with which elements of community health program might be furthered through the school health education program. I haven't a detailed plan to propose. The suggestion that I would have to make for the consideration of the group would be this:

That the group believes that a contribution can be made through a study of the scope and relationship of school health education and public health education and that a committee be appointed which might draw up a specific plan of procedure to recommend to the Company and that if a plan acceptable to the Company would be set up that this group would believe it worthwhile to have such a study with a nominal expenditure of perhaps $5,000 a year over a three year period.

Dr. Dublin: Have you any places in mind where this experiment has been consciously worked out?

Dr. Turner: No. There are various communities which have approached the problem in different degree but none have gone very far. Almost entirely the school health program has been separate from the community program.

Dr. Sutton: I should like to second that motion. I think Dr. Turner is striking at possibly the most fundamental thing in the whole health set up. Trying to get those different agencies to work together. I don't believe there can be such a thing as a school health program and yet there

is that distinction there consistently. We have this kind of a set up. The Public Health Department of the City of Atlanta is also the School Health Department. They don't provide enough money for our school nurses to provide enough nurses and services so we have to supplement that money but the two do work together. The idea of these three distinct services - the community, the public health and the school health, and the idea of having some study made suggesting how they might work together would be a very valuable thing.

Dr. Sundwall: I am fully in accord with the suggestions which Dr. Turner has made. This problem of whether the school health activities should belong to the department - school board or to the city health department - is rapidly becoming one of the very important problems in public health administration in this country. We find here in the United States every gradation from a full time school physician in many communities to the other extreme where the school health activities in the largest measure are taken care of by the local health department - either municipal or the county health department. Both extremes together with all of the gradations that take place are local situations. There are communities in the United States, of course, where the school board and school superintendent can handle the situation much better than in the more sparse parts of this country such as county health units. I believe that eventually the departments of education, that is the school board and the school superintendent, will have to provide for a school health program which, of course, the city cannot or will not take care of. In a large measure one can look at a school health program in the same way that one can look at an industrial health program and the more we get into health education, into what we call physiology or personal hygiene, with its health examinations, prevention and correction of defects, that

there is a distinct place in the United States for a school physician and school nurse who has specialised along certain lines which the average practitioner of medicine will never know anything about so that we have to take these two extremes. At any rate th t is the development at the present time. Assuming that we have these two extremes I think that some such agency or committee Dr. Turner propos s would be a good thing. It would at least bring together the extremes and in a large measure show the way.

Dr. Dublin: I take it then that you suggest, Dr. Turner, that a committee be set up for the purpose of canvassing the situation and they might bring in such a report as you suggest. Find a place where the problem can be studied and that a budget be made available to it from the Company.

Committee on Elementary School Publications

Miss Abbot: This committee has been asked about the basis of distribution of material that is prepared for schools. You will see on your agendas that we have various numbers. The committee suggests that these publications be divided into two groups: One set be distributed to teachers only - one copy to a teacher and the other one to a pupil, if you agree to this new basis of distribution. If you are willing we should have a motion to that effect.

Motion seconded and passed.

Miss Abbot: The committee would welcome suggestions from the group, regarding the two booklets about which we have been asked: Information for Expectant Mothers and Care of the Baby.

Miss Jean: Neither of these two are suitable for schools.

Dr. Sharbon: They might be rewritten.

Miss Abbot: I agree with Miss Jean. I think the outline on "The Baby" are much nearer the high school girls.

Dr. Sherbon: There is an interesting possibility there. Her place in the home where there might be younger children.

Miss Jean: In answer to Dr. Armstrong's query as to whether "The Expectant Mother" and "The Baby" are suitable for distribution I should move that these booklets not be distributed to schools.

Dr. Sundwall: That they are not suitable for distribution in high schools.

Motion passed unanimously.

Miss Jean: Dr. Sherbon suggests that it would be extremely useful if special material could be prepared for the young girl on the baby. I move that the preparat: of such material be considered with the special view of the age levels of the senior high school girls. The attitude of the public needs to be changed but I don't think the Metropolitan is in a position to do this.

Dr. Sutton: We have a publication that has a good deal of material on the girl as a prospective mother. I think this question of the Company including these home relationships is very important.

Miss Jean: I think the wise teacher can begin with the kindergarten child.

Dr. Turner: Could we leave this with the statement on the records that the committee feels that this phase of the program should be approached with care?

Dr. Sundwall: It is the opinion of this group that a new edition of "The Baby" be prepared for the senior high school girls.

Motion passed unanimously.

Dr. Sutton: We put in Dr. Turner's suggestion that we are not eliminating the whole subject. I

Dr. Turner: I move that it be the expression of the committee that materia: on the hygiene of the expectant mother be considered carefully and that great care

needs to be exercised in the preparation.

Miss Abbott: Something constructive on family relationships. Could we say that this pamphlet on "The Baby" be enlarged to include family relationships?

Dr. Sherbon: Why not issue a pamphlet on the high school girl in the home? Not label it baby or expectant mothers. Parent education.

Miss Jean: In answer to Dr. Armstrong's question the Group considered "The Baby" and "Information for Expectant Mothers" unsuitable to schools but they recommend preparation of new material for high school girls accentuating the home and incorporating the information regarding the baby and the preparation of the baby's arrival.

Motion carried unanimously.

Cooperation with Professional Groups

Dr. Kelly: I have no formal reports. We have been discussing throughout the day more or less informally various attempts which have been made in this respect. I succeeded in getting into a summer school session last summer. Unquestionably one of the greatest needs we have in the field of health education is to develop a more intensive campaign for education in relation to the training of teachers and administrators.

Dr. Sundwall: Any further comments or suggestions?

Dr. Sutton: If you can just follow up the material that was sent out with some type of letter that would call attention to that again.

Mr. Kelly: That is the greatest contribution that has been made to date. We ought to take that as just a start and go into it from there.

Dr. Sundwall: I wonder if we are forgetting the fact that there are other professions in the United States than the teaching profession which should be actually interested in health education. I wonder if we are overlooking the medical profession. It is my purpose this second semester to see to it if I can possibly get the material to put into the hands of my medical students the ———.
A good many of our difficulties lie in the fact that we have been emphasizing this thing in school health education. I think we have to take particular pains to ~~distribute~~ some information to medical students in the United States and to the nurses, particularly the school and public health nurses and also the dental schools.

Dr. Kelly: My experience has been the best with the dentists.

Dr. Sutton: They know how to handle the child.

Dr. Sundwall: I am thinking of the physician as the adult health educator as well. I think we should look into that.

Committee on Health Heroes

Dr. Turner: I spoke with some of you about the possibility of getting a health hero booklet on Baron Kitasato. One or two of the men who worked with him are still at work in his Institute in Tokyo who will give us material we could not get after their death. I wonder if we could not ask the Committee on Health Heroes to decide before next summer because if we do we might use the opportunity next summer to get information.

Meeting adjourned at 5:00

(Dr. Armstrong, Chairman in the morning; Dr. Dublin started afternoon session and since he had to leave for a meeting also asked Dr. Sundwall to finish the meeting)