BETTER CARE FOR

MOTHER AND CHILD

Agricultural & Mechanical College of Texas
College Station, Texas
WHAT ARE WE DOING TO


THE STATE HEALTH DEPARTMENTS, through Federal and State funds, are—Strengthening their divisions of maternal and child health. Training more doctors and public-health nurses. Helping the public to understand the problems and how to meet them. Cooperating with local communities in providing maternal and child-health services.

But—we are not doing enough. There are still too many avoidable deaths of mothers and young babies. We need to ask ourselves:

How many mothers and babies are dying?
Where are they dying?
Why are they dying?
Are fewer dying now than in the past?

The following pages answer these questions with figures for the year 1939.
2,250,000 BABIES ARE BORN ALIVE EVERY YEAR

ONE BABY IS BORN EVERY 14 SECONDS IN THE UNITED STATES

More than ONE MILLION IN THE COUNTRY

More than ONE MILLION IN THE CITY
9,000 mothers die from conditions of pregnancy and childbirth.

73,000 babies are born dead.

66,000 babies die in the first month of life.

DOCTORS SAY: AT LEAST 1 OUT OF 2 MATERNAL DEATHS CAN BE PREVENTED

1 OUT OF 3 DEATHS OF YOUNG BABIES CAN BE PREVENTED
DO MANY MORE MOTHERS DIE IN THIS COUNTRY THAN IN THE COUNTRIES OF OUR ANCESTORS?

Each symbol represents 3 deaths per 10,000 live births

UNITED STATES

GERMANY

ENGLAND AND WALES

IRELAND

SWEDEN
DO MANY MORE MOTHERS DIE IN SOME STATES OF THIS COUNTRY THAN IN OTHERS?

The maternal mortality rate varies in different States from 22 to 65 per 10,000 live births. If the rate for Idaho (22) prevailed in the whole United States we would save 4,200 mothers in a year.

- What is the risk to mothers in your State?
- Find out if your State has adequate facilities and personnel for lowering the death rate.
- Your State health officer needs the cooperation of every citizen in reducing the risk.

The rate for the United States was 40 in 1939
WHO ARE THE MOTHERS THAT DIE?

Each symbol represents 10 deaths per 10,000 live births

WHITE

NEGRO

DEATHS PER 10,000 LIVE BIRTHS

AGE IN YEARS

10 15 20 25 30 35 40 & OVER
WHY DO THESE MOTHERS DIE?

MEDICAL CAUSES

<table>
<thead>
<tr>
<th>INFECTION</th>
<th>TOXEMIAS</th>
<th>HEMORRHAGE</th>
<th>ALL OTHER CAUSES</th>
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<tbody>
<tr>
<td>DUE TO ABORTION</td>
<td>NOT DUE TO ABORTION</td>
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Each symbol represents 5 percent of all maternal deaths

SOCIAL AND ECONOMIC FACTORS

- POOR SANITATION
- POOR FOOD
- DIRT
- IGNORANCE
- POVERTY
- INACCESSIBILITY
For many years there was little change in the maternal death rate but a decline has begun.

WHAT WILL PREVENT INFECTION? Strict cleanliness in technique of doctors and nurses. Avoidance of abortion, unnecessary operation, and injury.

WHAT WILL CONTROL TOXEMIAS? Adequate medical care beginning in the early months and continuing throughout pregnancy.

WHAT WILL CONTROL HEMORRHAGE? Competent medical and nursing attendants. Facilities for blood transfusion.
WHO ATTENDED THE MOTHERS AT DELIVERY?

IN HOSPITALS ATTENDED BY DOCTOR

IN THE CITY

AT HOME ATTENDED BY—DOCTOR MIDWIFE

IN THE COUNTRY

Each symbol represents 10 per cent of the live births

OF EVERY 100 WHITE BABIES

OF EVERY 100 NEGRO BABIES

45 ARE BORN IN HOMES

55 IN HOSPITALS

80 ARE BORN IN HOMES

20 IN HOSPITALS

Midwives attended 3% of the births of white infants, 52% of the births of Negro infants.

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HOW TO MAKE MOTHERHOOD SAFER

BEFORE CHILDBIRTH

EXAMINATION  WEIGHING  BLOOD PRESSURE  URINE TEST  BLOOD TEST  PROPER DIET  REST

GO TO THE DOCTOR FOR—

Complete examination before the fifth month of pregnancy
Repeated tests and general supervision at regular intervals

ADEQUATE CARE BEFORE, DURING, AND AFTER
AT CHILDBIRTH

HOME

PLANNED DELIVERY

HOSPITAL

AFTER CHILDBIRTH

REST

NURSING

HOUSEHOLD CARE

EXAMINATION

CHILDBIRTH IS THE RIGHT OF EVERY MOTHER
One-half of all the babies are born in the poorest homes

In families on relief or with incomes of less than $1,000 . . . . more than 1,000,000 babies a year

In families with incomes of $1,000 or more . . . . more than 1,000,000 babies a year

Each symbol represents 75,000 babies.
DO MANY MORE BABIES DIE IN SOME STATES THAN IN OTHERS?

The infant mortality rate varies in different States from 35 to 109 per 1,000 live births.

If the rate for Oregon (35) prevailed in the whole United States we would save 30,000 babies in a year.

- What is the risk to babies in your State?
- Find out if your State has adequate facilities for lowering the death rate.
- Your State health officer needs the cooperation of every citizen in reducing this risk.

Deaths in the first year of life per 1,000 live births:

- Less than 40 (13 States)
- 40-54 (23 States)
- 55-69 (11 States)
- 70 or more (2 States)

THE RATE FOR THE UNITED STATES WAS 48 IN 1939
WHO ARE THE BABIES THAT DIE?

Each symbol represents 5 deaths per 1,000 live births

WHITE

NEGRO

HOW OLD ARE THE BABIES THAT DIE?

UNDER ONE MONTH OF AGE

1-11 MONTHS OF AGE

UNDER 1 DAY

1-6 DAYS

1-3 WEEKS

Each symbol represents 5,000 babies
WHY DO BABIES DIE?

IN THE FIRST MONTH
- Premature Birth
- Other

AFTER THE FIRST MONTH
- Respiratory and Gastrointestinal
- All Others

Each symbol represents 10 percent of the deaths in each period.
WHAT CAN BE DONE TO PREVENT INFANT DEATHS?

ON THE FIRST DAY OF LIFE
REDUCE premature birth through adequate prenatal care • REDUCE birth injury through good obstetric care • PREVENT syphilis by treating syphilitic women throughout pregnancy.

PROVIDE special care for premature infants • PROVIDE consultation services of specialists for both mother and child.

IN THE FIRST MONTH OF LIFE
REDUCE premature birth • REDUCE birth injury • PREVENT infection by improving medical and nursing care • PREVENT syphilis.

PROVIDE better care for premature babies • PROVIDE supervision by competent physician • PROVIDE consultation services of child specialists.

AFTER THE FIRST MONTH OF LIFE
PROVIDE supervision by physician and public health nurse • ENCOURAGE breast feeding for 6 or 7 months • PREVENT gastrointestinal disease by providing safe milk and protecting food from flies • LESSEN the severity of respiratory infection by early recognition and treatment • PROTECT the baby against colds and other communicable diseases.
WHAT ABOUT THE 73,000 BABIES BORN DEAD EACH YEAR?

OUT OF FIVE STILLBORN BABIES

3 DIE
BEFORE LABOR

2 DIE
DURING LABOR

WHAT CAN BE DONE TO PREVENT STILLBIRTHS?

DURING PREGNANCY:

PROVIDE adequate prenatal care beginning before the fifth month.

PROVIDE early diagnosis and proper treatment of Syphilis, Toxemias, and Hemorrhage.

AT CONFINEMENT:

PROVIDE competent medical attendants.
SOME OF THE GAPS IN EXISTING SERVICES FOR MOTHERS AND BABIES

Of the 2,400 rural counties in the United States—
About half have no full-time health departments.
About four-fifths have no prenatal clinics under State health-department supervision.
About two-thirds have no child-health conferences under State health-department supervision.

Of the 3,072 counties in the United States—
About 800 have no rural public-health-nursing service.
Many rural areas do not have enough well-trained doctors and hospital facilities for the care of mothers and babies.
Many communities lack facilities for expert diagnosis and specialists for consultation with doctors caring for mothers and babies.

TO FILL THE GAPS, EXPERTS SAY,
THESE THINGS MUST BE PROVIDED:

More and better care of mothers before, during, and after childbirth.
More and better care of young babies.
Local centers for diagnosis and consultation.
Better training of doctors and nurses in obstetrics and pediatrics.
Better distribution of qualified doctors and nurses.
Better distribution of good hospital facilities.

These things can be provided through the cooperation of Federal, State, and local governments, private agencies and organizations, with the help of an informed citizenry, to the end that every mother may seek and obtain safe care for herself and for her baby.