

BETTER CARE FOR



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#278

Agricultural & Mechanical College of Texas
College Station, Texas.

MOTHER AND CHILD

WHAT ARE WE DOING TO

● THE CHILDREN'S BUREAU OF THE UNITED STATES DEPARTMENT OF LABOR—Distributes popular bulletins to inform those concerned with the care of mothers and children • Conducts research to discover the best methods of care • Administers the sections of the Social Security Act providing for Federal grants-in-aid to the States for maternal and child-health services.

● 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.

● LOCAL COMMUNITIES, through Federal, State, and local funds, are making provision for—Full-time health departments, with medical and public-health-nursing service • Prenatal and postnatal clinics and conferences • Home-delivery nursing services • Supervision of midwives • Child-health conferences • Consultation services for practicing physicians • Postgraduate education of practicing physicians in obstetrics and pediatrics.

MAKE MOTHERHOOD SAFER?

THE FEDERAL GOVERNMENT



UNITED STATES DEPARTMENT
OF LABOR
CHILDREN'S BUREAU



EDUCATION



RESEARCH



FUNDS

THE STATE



STATE GOVERNMENT

THE COMMUNITY



DOCTORS



NURSES



SOCIAL WORKERS



SCHOOLS



HOSPITAL



HEALTH
CENTER



THE FAMILY

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?

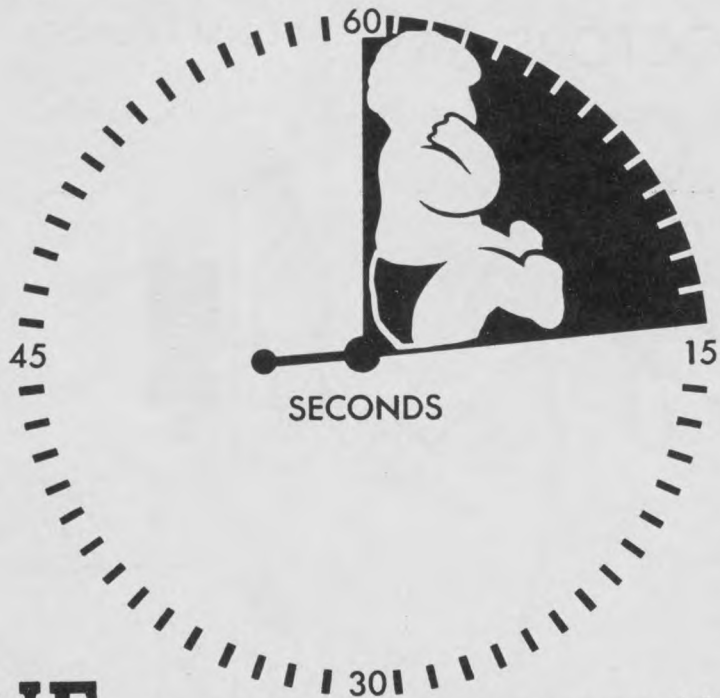
Why are they dying?

Are fewer dying now than in the past?

[The following pages answer
these questions with figures for
the year 1939]

HOW ARE WE GOING TO SAVE MORE OF THESE LIVES?

2,250,000 BABIES ARE BORN ALIVE EVERY YEAR

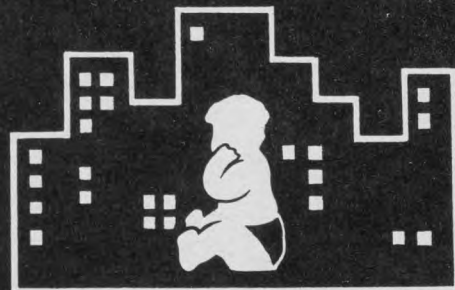


ONE BABY IS BORN EVERY 14
SECONDS IN THE UNITED STATES

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<https://fraser.stlouisfed.org>
Federal Reserve Bank of St. Louis



More than **ONE MILLION**
IN THE COUNTRY



More than **ONE MILLION**
IN THE CITY

IN A SINGLE YEAR 148,000 DEATHS

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

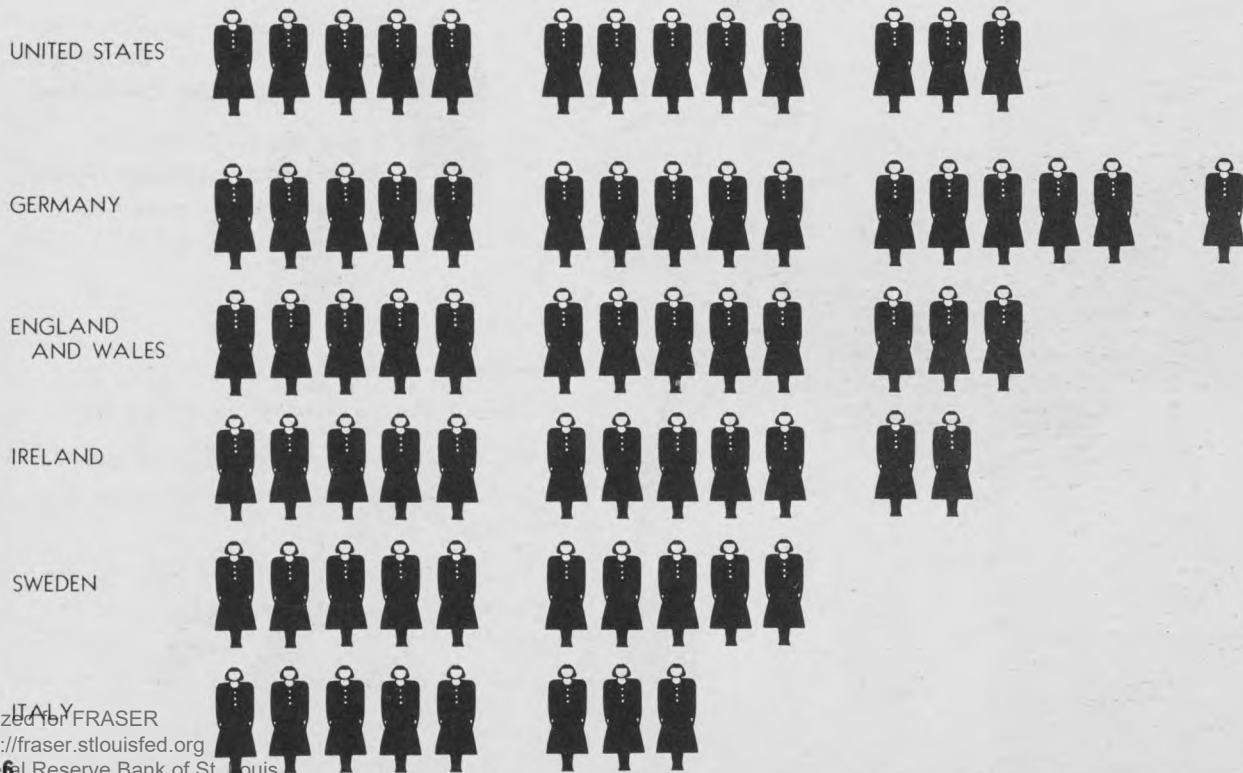


1 OUT OF 3 DEATHS OF YOUNG BABIES CAN BE PREVENTED

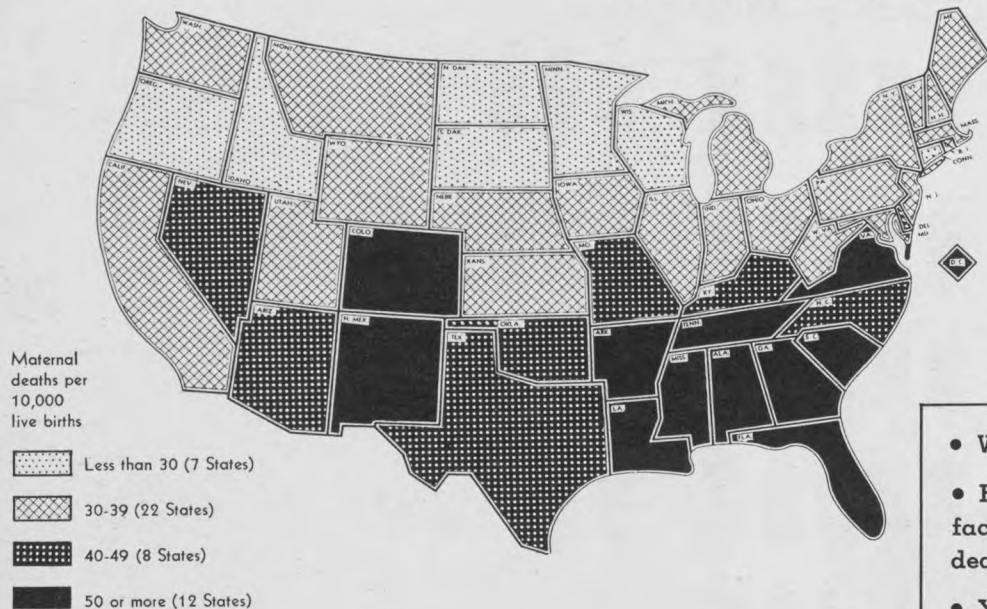


DO MANY MORE MOTHERS DIE IN THIS COUNTRY THAN IN THE COUNTRIES OF OUR ANCESTORS?

Each symbol represents 3 deaths per 10,000 live births



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



THE RATE FOR THE UNITED STATES WAS 40 IN 1939



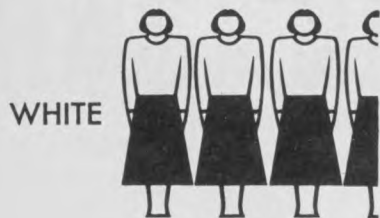
The maternal mortality rate varies in different States from 22 to 65 per 10,000 live births.

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.

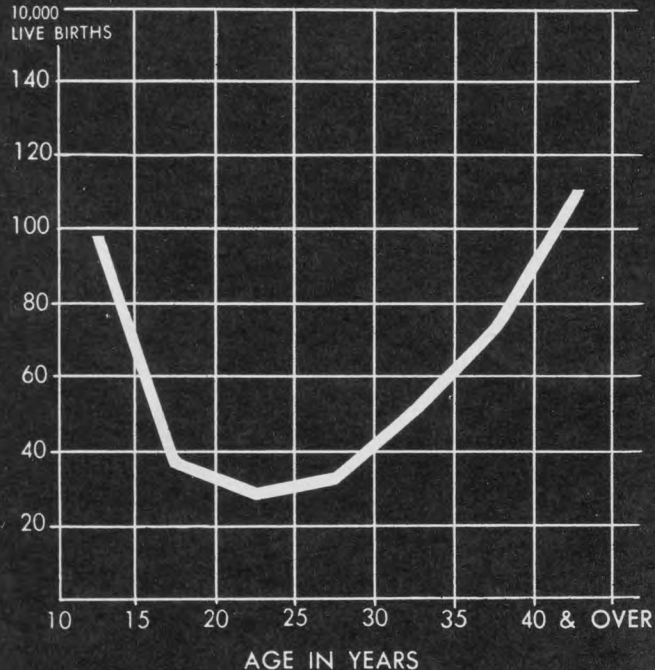
WHO ARE THE MOTHERS THAT DIE?

Each symbol represents 10 deaths per 10,000 live births



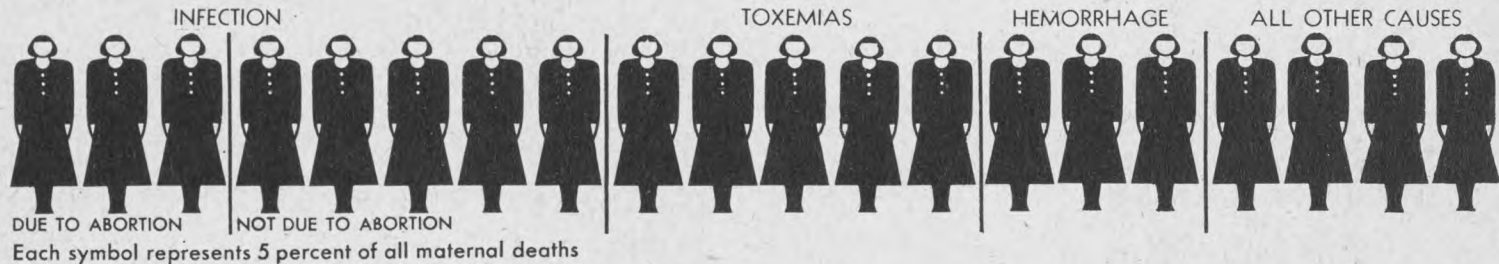
HOW OLD ARE THE MOTHERS THAT DIE?

DEATHS PER
10,000
LIVE BIRTHS



WHY DO THESE MOTHERS DIE?

MEDICAL CAUSES



SOCIAL AND ECONOMIC FACTORS



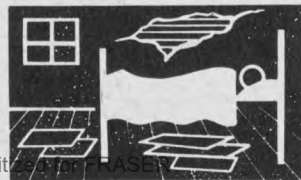
POOR
SANITATION



POOR FOOD



POVERTY



DIRT



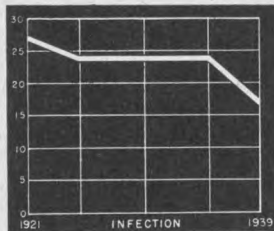
IGNORANCE



INACCESSI-
BILITY

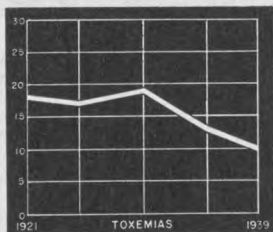
THE CAUSES POINT THE WAY TO THE CURES

DEATHS PER 10,000 LIVE BIRTHS

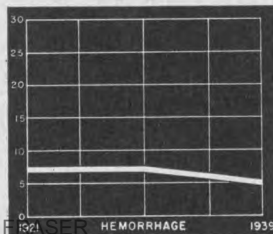


For many years there was little change in the maternal death rate but a decline has begun.

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

AT HOME ATTENDED BY—
DOCTOR MIDWIFE



IN THE CITY



IN THE COUNTRY

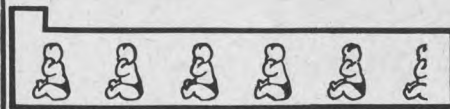


Each symbol represents 10 per cent of the live births

OF EVERY 100 WHITE BABIES



45 ARE BORN IN HOMES



55 IN HOSPITALS

OF EVERY 100 NEGRO BABIES



80 ARE BORN IN HOMES



20 IN HOSPITALS



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

Each symbol represents 10 babies

HOW TO MAKE MOTHERHOOD SAFER

BEFORE CHILDBIRTH



EXAMINATION



WEIGHING



BLOOD
PRESSURE



URINE TEST



BLOOD TEST



PROPER DIET



REST

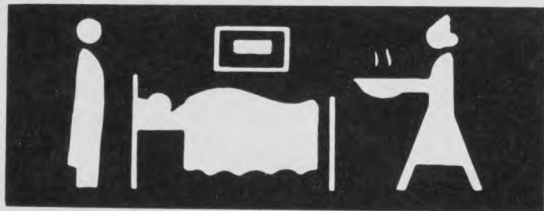
GO TO THE DOCTOR FOR—

Complete examination before the fifth month of pregnancy

Repeated tests and general supervision at regular intervals

12 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 13

WHERE ARE BABIES BORN?



LARGE CITIES



MEDIUM-SIZE CITIES



SMALL CITIES AND TOWNS



VILLAGES AND FARMS

Each symbol represents 75,000 babies

One-half of all the babies are born in the poorest homes



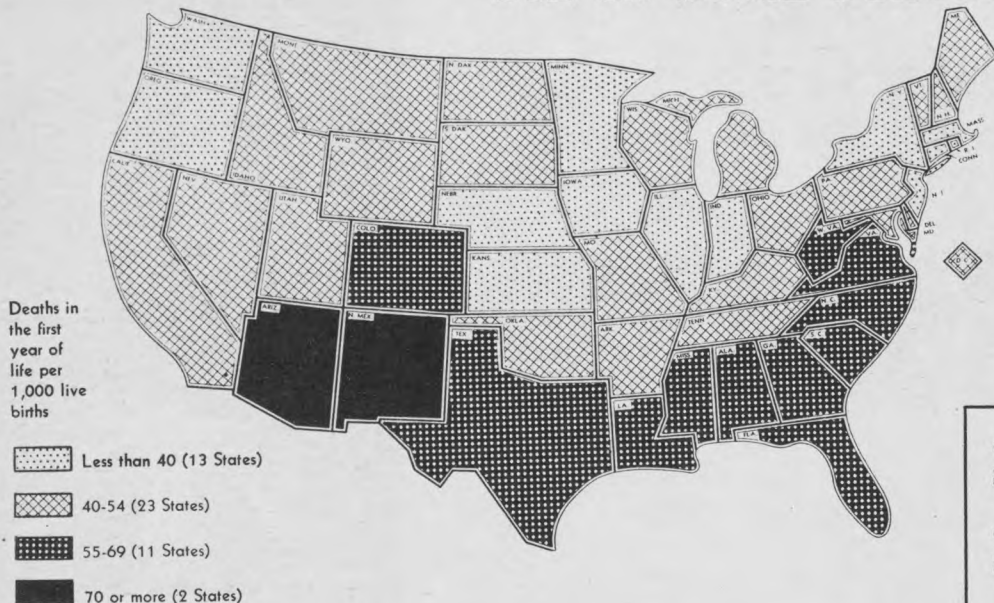
In families on relief or with incomes of less than \$1,000 more than 1,000,000 babies a year



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

DO MANY MORE BABIES

DIE IN SOME STATES THAN IN OTHERS?



THE RATE FOR THE UNITED STATES WAS 48 IN 1939



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.

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

UNDER 1 DAY



1-6 DAYS

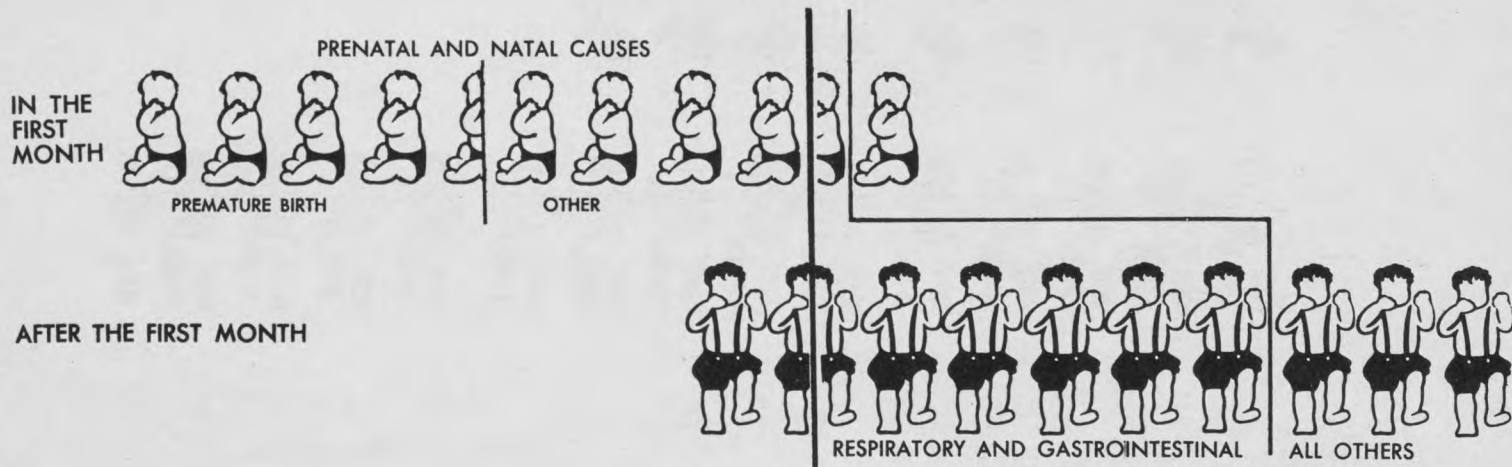


1-3 WEEKS



1-11 MONTHS OF AGE

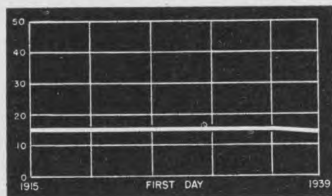
WHY DO BABIES DIE?



Each symbol represents 10 percent of the deaths in each period

WHAT CAN BE DONE TO PREVENT INFANT DEATHS?

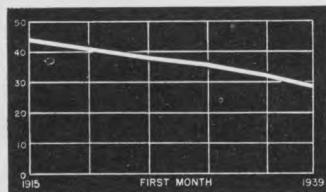
DEATHS PER 1,000 LIVE BIRTHS



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.

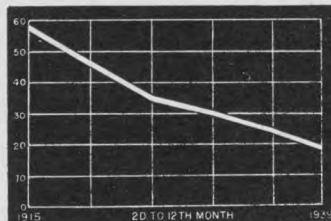
PROVIDE special care for premature infants • **PROVIDE** consultation services of specialists for both mother and child.



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.

U. S. GOVERNMENT PRINTING OFFICE : 1941—O—406860

UNITED STATES DEPARTMENT OF LABOR

CHILDREN'S BUREAU . . . PUBLICATION NO. 278