

WHAT DO WE NEED

and

HOW CAN WE GET IT?

Sir Walter Hotel

Raleigh, North Carolina

October 15, 1952

Revens started it

Registration

9:00 to 10:00 A.M.-Mezzanine

Morning Session

Ballroom

10:00 A.M. WELCOME

Charles E. Spencer–Presiding President, North Carolina Health Council Raleigh, North Carolina

INVOCATION

Garland A. Hendricks, Director Church-Community Development Gardner-Webb College Boiling Springs, North Carolina

GROUP SINGING

Mrs. B. L. Tyson Home Demonstration Club Council Greenville, North Carolina

INTRODUCING BUZZ SESSIONS

C. Sylvester Green, Executive Vice-President Medical Foundation of North Carolina, Inc. Chapel Hill, North Carolina

"A MESSAGE FROM NORTH CAROLINA DOCTORS"

J. Street Brewer, M.D., President Medical Society of the State of North Carolina Roseboro, North Carolina

"WHY A RURAL HEALTH CONFERENCE?"

George F. Bond, M.D., Chairman Committee on Rural Health Medical Society of the State of North Carolina Bat Cave, North Carolina "THE MEANING OF RURAL HEALTH" Introduction—Frederic C. Hubbard, M.D. North Wilkesboro, North Carolina Address—Aubrey D. Gates, Field Director Council on Rural Health American Medical Association Little Rock, Arkansas

BUZZ SESSIONS

12:30 P.M. ADJOURNMENT FOR LUNCH

Afternoon Session

Ballroom

2:00 P.M. George F. Bond, M.D., Presiding

"PROGRESS PARADE"

Alexander County-Mrs. Agnes Watts, Taylorsville Brunswick County-Mrs. Lee Kye, Supply Buncombe County-Mrs. Walter Map, Asheville Haywood County-Miss Mary Cornwell, Waynesville Robeson County-Miss. Emily Butler, Lumberton Watauga County-John G. Martin, D.V.M., Boone

3:00 P.M. GROUP DISCUSSIONS

Explanation: Charlotte B. Rickman Raleigh, North Carolina

- 1. WHAT ARE THE MOST EF-FECTIVE WAYS OF SOLV-ING RURAL HEALTH PROBLEMS?
- Leaders Garland Hendricks Boiling Springs Elizabeth Lovell Raleigh
- 2. HOW CAN FARM FAMILIES FINANCE MEDICAL CARE?

Wayne Corpening Raleigh

O. Norris Smith, M.D. Greensboro

- 3. HOW CAN WE GET AND HOLD MEDICAL AND HEALTH PERSONNEL IN RURAL AREAS?
- HOW CAN WE GET FARM FAMILIES TO PRODUCE AND USE FOODS NECESSARY TO HEALTH?
- 5. HOW CAN WE GET SAFE WATER AND SEWAGE DISPOSAL FACILITIES?
 - WHAT CAN WE DO FOR MENTAL HEALTH IN RU-RAL COMMUNITIES?
 - 7. WHAT DO WE WANT FROM OUR SCHOOL HEALTH PROGRAMS?
 - 8. WHAT CAN WE DO TO IM-PROVE THE DENTAL HEALTH OF RURAL CHILDREN AND ADULTS?

- Flora Wakefield, R.N. Raleigh
- J. Street Brewer, M.D. Roseboro
- Ann A. Cain Yadkinville Mrs. Jewell G. Fessenden Raleigh Mrs. Irene Yeates Ahoskie
- Mrs. W. K. Cuyler Durham Mrs. Bartel Lane Raleigh
- Mrs. John Williamson Louisburg Carson Ryan, Ph.D. Chapel Hill
- D. M. Calhoun Elizabethtown Mrs. H. M. Johnson Kinston
- Luther M. Massey, D.D.S. Zebulon Mrs. Charles Graham Linwood

4:15 P.M. BALLROOM

Reports from Discussion Groups and Floor-Wide Discussion

5:15 P.M. ADJOURNMENT FOR DINNER

Evening Session

Ballroom

8:00 P.M. R. Flake Shaw—Presiding Executive Vice-President North Carolina Farm Bureau Greensboro, North Carolina

MUSIC

Mrs. B. L. Tyson Greenville, North Carolina

"THE CITIZEN, THE GOVERNMENT, AND THE EMERGENCY" Allan B. Kline, President American Farm Bureau Federation Chicago, Illinois

ENTIRE CONFERENCE SUMMARY

Harry B. Caldwell, Master North Carolina State Grange Greensboro, North Carolina

9:30 P.M. ADJOURNMENT

Conference Committees

Joint Planning Committee

Charles E. Spencer Ellen Winston, Ph.D. Lucy S. Morgan, Ph.D. W. P. Richardson, M.D., M.P.H. George F. Bond, M.D. Robert Murphy, M.D. Ruth Current Flake Shaw

Charlotte Rickman

Publicity Committee

William Humphries Agricultural Extension Service William Poe, Progressive Farmer William H. Richardson State Board of Health Edwin S. Preston, N. C. State Board of Public Welfare William Hannah, N. C. Farm Bureau William Hilliard Medical Society of North Carolina

Hospitality Committee

Miss Ruth Current, State Home Demonstration Agent, Chairman Mrs. Roscoe McMillan, President, Auxiliary to Medical Society of N. C. Mrs. H. A. Helms, P.T.A. State Health Chairman Mrs. Marie B. Noell, Exec. Sec., N. C. State Nurses Association

Group Leaders Committee

Elta Mae Mast, School of Public Health, University of N. C. Charles E. Spencer, School Health Coordinating Service

Loud Speaker System and Tape Recording

Roger Whitley, North Carolina State Board of Health Mrs. Annie Ray Moore, School Health Coordinating Service

Summarization and Proceedings

Fannie Memory Farmer, N. C. State Board of Public Welfare Charlotte B. Rickman, Medical Society of North Carolina

Registration

Ina Ruth Woodruff, Medical Society of the State of North Carolina Mary Lee Beck, N. C. State Nurses' Association

North Carolina Health Council

Executive Committee

Charles E. Spencer, President Mrs. Ernest Hunter, Vice President Ruth Penney, Secretary E. B. Crawford, Treasurer J. W. R. Norton, M.D., M.P.H. E. G. McGavran, M.D., M.P.H Ellen Winston, Ph.D. William P. Richardson, M.D., M.P.H. Mrs. H. A. Helms I. G. Greer

Member Agencies

N. C. Department of Agriculture N. C. State Board of Health N. C. Division, American Cancer Society N. C. Commission for the Blind N. C. Congress of Parents and Teachers United Fund of Winston-Salem and Forsyth County North Carolina College at Durham Community Council of Charlotte and Mecklenburg County N. C. Dairy Council N. C. Dental Society N.C. Dietetics Association N. C. Education Association N. C. Board of Eugenics Hospital Care Association, Inc. N. C. Hospitals Board of Control N. C. Heart Association Hospital Saving Association of

North Carolina, Inc.

Health Publications Institute, Inc. N. C. Society for Crippled Children and Adults, Inc. N. C. Library Commission Medical Society of North Carolina Medical Foundation of North Carolina, Inc. N. C. Mental Hygiene Society Auxiliary to Medical Society of N. C. N. C. Medical Care Commission N. C. State Nurses Association N. C. Public Health Association N. C. Dept. of Public Instruction National Foundation for Infantile Paralysis N. C. State Board of Public Welfare N. C. Recreation Commission N. C. Tuberculosis Association School of Public Health, U.N.C. Division of Vocational Rehabilitation

Medical Society of the State of North Carolina

Committee on Rural Health

George F. Bond, M.D., Chairman Bat Caye John A. Payne, III, M.D., Sunbury Charles I. Harris, Jr., M.D., Williamston Rechel D. Davis, M.D., Kinston W. Edwin Miller, M.D., Wolfewille Milton S. Clark, M.D., Goldsboro W. Ghio Suiter, M.D., Weldon William W. Stanfield, M.D., Dunn John Irwin Biggs, M.D., Lumberton Robert J. Murphy, M.D., Raleigh William P. Richardson, M.D., Chapel Hill W. Reece Berryhill, M.D., Chapel Hill W. Reece Berryhill, M.D., Shelby William L. Wood, M.D., Yadkinville Frederic C. Hubbard, M.D., North Wilkesboro Verne H. Blackwelder, M.D., Lenoir

Advisory Committee

Harry Caldwell, N. C. Grange James G. K. McClure Farmers Federation David Weaver Agricultural Extension Service Ruth Current Home Demonstration Agent A. E. Branch, D.D.S. N. C. Health Council Flake Shaw, N. C. Farm Bureau L. Y. Ballentine, N. C. Board of Farm Agencies and Organizations Mrs. H. A. Helms, Congress of Parents and Teachers William Poe, **Progressive Farmer** Mrs. D. C. Mangum, Associated Women of Farm Bureau Mrs. W. K. Cuyler Home Demonstration Federation A. C. Teachey, Supervisor of Agricultural Education Catherine Dennis, Supervisor of Home Economics Education D. M. Calhoun, N. C. Department of Public Instruction

SPONSORED BY THE NORTH CAROLINA HEALTH COUNCIL and THE COMMITTEE ON RURAL HEALTH of the

MEDICAL SOCIETY OF THE STATE OF NORTH CAROLINA

with the cooperation of its

RURAL HEALTH ADVISORY COMMITTEE



Annual RURAL HEALTH CONFERENCE

NORTH CAROLINA'S

6TH ANNUAL RURAL HEALTH CONFERENCE

Theme: "DIVIDENDS OF HEALTH"

NCRTH CAROLINA STATE COLLECE Textile Building Auditorium Wednesday, October 21, 1953 Raleigh, North Carolina

SPONSOR

Medical Society of the State of North Carolina

CO-SPONSORS

Farmers Federation Federation of Home Demonstration Club Women N. C. Board of Farm Agencies and Organizations North Carolina Congress of Parents and Teachers North Carolina Farm Bureau Federation North Carolina Grange North Carolina Health Council The Progressive Farmer

HOSPITALITY COMMITTEE

Mrs. W. K. Cuyler, Chairman Mrs. Harry Caldwell Mrs. Jesse G. Yates Mrs. E. T. Beddingfield Mrs. Irby Walker Miss Ada McRackan Miss Ruth Current

ACCORDIANIST AND SONG LEADER

Mrs. Mary Sue Jarrett Cleveland County Tuberculosis Association Shelby, North Carolina

ORGAN AND PIANO

John Vaughn Raleigh, North Carolina

REGISTRATION

Miss Betty Mason Miss Phyllis Whitfield

FROCEEDINGS

Miss Chloe Hodge

MORNING SESSION

9:00 to 10:00 A.M. REGISTRATION Hallway, Textile Building

10:00 A.M. GENERAL SESSION

Honorable L. Y. Ballentine, Presiding Commissioner of Agriculture

INVOCATION

Vladimir B. Bensen, M.D. Raleigh, North Carolina

DEVOTIONALS

Shaw University Choral Society Harry Gil-Symthe, Director Raleigh, North Carolina

WELCONE

George F. Bond, Capt., M.C., USNR Committee on Rural Health Medical Society of Morth Carolina

ADDRESS

"Dividends of Health"

Mrs. Charles W. Sewell Advisory Committee Council on Rural Health American Medical Association Otterbein, Indiana

11:00 A.M. PANEL DISCUSSION

"ACCENT ON YOUTH"

---- accomplishments in personal, family and community health

Leader: Harold Langdon, Johnston County Norma Jean Short, Catawba County Loree Keen, Wayne County Billy Bryan, Bladen County

SUMMARY : "HEALTH DIVIDENDS FOR YOUTH".

I. G. Greer, Executive Vice-President North Carolina Business Foundation Chapel Hill, North Carolina

11:45 A.M. FROGRESS PARADE

"Henderson County Families Budget For Health" --- a report on the Farmers Federation Hospital Insurance Project in Western North Carolina

> R. L. Bennett, Farm Agent, Hendersonville Miss Leila Patterson, Fletcher

"Hillsboro Health and Recreation Club Aims at Complete Health"

--- what a group of Negro citizens are doing for themselves and their children

M. C. Burt, Farm Agent, Hillsboro

"Forsyth County Faces The Future" ---- the long-range plans and activities of a community development program

> Mrs. W. H. Howard, Secretary Vienna Community Council Mrs. Lester Boger, Pres., Home Dem. Club

"Everybody Cooperates in Smith's Community" --- an account of inter-agency and community cooperation in Robeson County

> Mrs. Hubert Barnes James W. Wilson, Jr. Mrs. Joe Nicholson J. Stafford Sessoms

"Farmers Build Themselves a Town"

--- a pioneering story which includes building a clinic and securing a doctor to serve rural areas

> Maddrey W. Bass, President Exchange Club Newton Grove

> > *******

12:30 to 2:00 P.M.

NORTH CAROLINA DUTCH PICNIC - FAMILY STYLE

PULLEN PARK

\$1.55 Per Person --- Tickets May Be Purchased at the Registration Desk or from the Hostesses at Pullen Park. Food Prepared by C. G. Baxley, Raleigh

AFTERNOON SESSION

Rachel D. Davis, M.D., Presiding

- 2:00 to 2:15 P.M. 4-H CLUB RHYTHM DAND Spencer Braswell, Rt. 1, Smithfield Harold Langdon, Rt. 1, Smithfield Tom Clifton, Rt. 1. Benson Sherwood Parker, Rt. 1. Smithfield
- PANEL: "PEOPLE BEST BUILD THEMSELVES"
 - (1) Self-Motivation
 - (2) Group Cooperation
 - (3) Community Action

MCDERAICR: Mrs. Jean Ogden, PhD. Community Services, Extension Division University of Virginia

Jess Ogden, PhD, Director, Community Services Extension Division, University of Virginia Aubrey D. Gates, Field Director

Council on Rural Health, American Medical Assoc. R. Flake Shaw, Executive Vice-President

- N. C. Farm Bureau Federation, Greensboro Frank Jeter, Editor, Department of Information
- State College of Agriculture and Engineering Mrs. Corrine Grimsley, Family Life Specialist
 - Agricultural Extension Service, State College
- J. Street Brewer, M.D., Past-President Medical Society of North Carolina
- L. Y. Ballentine, Commissioner of Agriculture, Raleigh

E. G. McGavran, M.D., Dean, School of Public Health, University of North Carolina

"EVERYBODY PARTICIPATES" _--- DISCUSSION

SUMMARY: R. C. (Bob) Francis, Farmer and Philsopher Rt. 3, Waynesville

ADJOUR NIVENT AT 4:30 P.M.

SPECIAL MOVIE SHOWING

For all those who are interested and who would like to remain in the auditorium, there will be a special showing of the new movie:

"A CITIZEN PARTICIPATES" - 25 minutes

which tells the story of how one community secured a doctor to serve their rural area.

It was produced by the American Medical Association

For further information on securing this movie for showing in your community, write:

Mr. William N. Hilliard Executive Assistant for Public Relations Medical Society of North Carolina Box 790 Raleigh, North Carolina

CONFERENCE EVALUATION

Please do not forget to fill out the evaluation blank in the back of this program, tear out and hand to one of the Hostesses before leaving. Tell us what you liked best and what you didn't like. This will help us plan a better Conference for 1954.

FROCEEDINGS

At a future date a mimeographed copy of the proceedings of today's conference will be mailed to each person who registers.

Committee on Rural Health Medical Society of North Carolina

J. Irvin Biggs, M.D., Lumberton, Chairman Frederic C. Hubbard, M.D. North Wilkesboro, Co-Chairman John A. Payne, III, M.D. Şunbury Rachel D. Davis, M.D., Kinston W. Edwin Miller, M.D., Whiteville W. Ghio Suiter, M.D., Weldon Robert J. Murphy, M.D., Raleigh Wm. P. Richardson, M.D., Chapel Hill W. W. Washburn, M.D., Boiling Springs Verne H. Blackwelder, M.D., Lenoir George F. Bond, M.D., Bat Cave Melvin Webb, M.D., Burnsville

Advisory Committee

Harry Caldwell, N. C. Grange James G. K. McClure, Farmers Federation David Weaver, Agricultural Extension Service Ruth Current, State Home Demonstration Agent A. E. Branch, D.D.S., N. C. Health Council Flake Shaw, N. C. Farm Bureau Federation L. Y. Ballentine, N. C. Board of Farm Agencies and Organizations Mrs. Laura Venning, Health Chairman,

N. C. Congress of Parents and Teachers William Poe, Progressive Farmer

Mrs. Jesse Yates, Associated Women of N. C. Farm Federation

A. C. Teachey, Supervisor of Agricultural Education Catherine Dennis, Supervisor of Home Economics Education

D. M. Calhoun, N. C. Department of Public Instruction

EVALUATION

Please write down frankly the things you liked and didn't like about today's Conference. It will help us plan a better Conference next year. Thomas wastes gule - Mutug to shug-

The things I liked best about today's Conference:

Portugation of young people as as adult

reagle but they should be capled down

The things I did not like about today's Conference: I did like the to the poten of marin he

I suggest the following things for next year's Conference:

Keep speakers to their time time.

NO NEED TO SIGN YOUR NALE - PLEASE TEAR OFF AND HAND TO REGISTRATION DESK OR TO ONE OF THE HOSTESSES EEFORE LEAVING.

PIEASE FILL OUT

EVALUATION ELANK ON

OTHER SIDE

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FROGRAM PLANNING COMMITTEE FCR . The 6th Annual Rural Health Conference.

L. Y. Eallentine, Chairman Rachel D. Davis, M.D., Co-Chairman Charlotte Rickman, Secretary William N. Hilliard, Publicity Committee Chairman Laura Ross Venning, M.D., Program Committee Chairman Mrs. W. K. Cuyler, Hospitality Committee Chairman G. C. Applewhite, M.D., E. S. King, M.D. W. G. Suiter, M.D. James T. Barnes R. Flake Shaw

PUBLICITY COMMITTEE

William Hilliard, Chairman Jean Anderson, Department of Information

State College of Agriculture William H. Brake, Ruritan National, Rocky Mount William Hannah, N. C. Farm Bureau Federation Frank Jeter, Department of Information

State College of Agriculture Gene Knight, Farmers Cooperative Exchange William Humphries, Farm Editor, <u>News & Observer</u> William Poe, <u>The Progressive Farmer</u> Edwin S. Preston, State Eoard of Public Welfare William H. Richardson, State Eoard of Health

NORTH CAROLINA HEALTH COUNCIL

Member Agencies

N. C. Department of Agriculture N. C. State Board of Health N. C. Division, American Cancer Society N. C. Commission for the Blind N. C. Congress of Parents and Teachers N. C. Congress of Colored Parents and Teachers United Fund of Winston-Salem and Forsyth County North Carolina College at Durham Social Planning Council of Charlotte and Wecklenburg County N. C. Dairy Council N. C. Dental Society N. C. Dietetics Association N. C. Education Association N. C. Board of Eugenics Farmers Federation Hospital Care Association, Inc. N. C. Hospitals Board of Control N. C. Heart Association Hospital Saving Association of North Carolina, Inc. Health Publications Institute, Inc. N. C. Society for Crippled Children and Adults, Inc. N. C. Library Commission Duke University School of Medicine Duke University School of Nursing Medical Society of North Carolina Medical Foundation of North Carolina, Inc. N. C. Mental Hygiene Society Auxiliary to Medical Society of North Carolina N. C. Nedical Care Commission N. C. State Nurses Association N. C. Department of Public Instruction N. C. Pharmaceutical Association N. C. Optometric Society National Foundation for Infantile Paralysis N. C. State Board of Public Welfare N. C. Recreation Commission N. C. Tuberculosis Association School of Public Health, U.N.C. Division of Vocational Rehabilitation

SONGS

1. Workin' on the Railroad

I've been workin' on the railroad All the live-long day I've been workin' on the railroad, just to pass the time away, Don't you hear the Whistle blowing, Rise up so early in the morn, Don't you hear the breakman calling, Dinah, blow your horn.

2. Wait 'Til the Sun Shines, Nellie

Wait 'til the sun shines, Nellie And the clouds go drifting by, We will be happy, Nellie, Don't you cry-Down lovers lane we'll wander Sweetheart, you and I Wait 'til the sun shines, Nellie By and By.

3. Gymnastic Relief (Tune: "Till We Meet Again")

(All Smile)

4. There's a Long, Long Trail Awinding

There's a long, long trail awinding Into the land of my dreams. . Where the nightingales are singing and a white moon beams-There's a long, long night of waiting, Until my dreams all come true, Till the day when I'll be going down that long, long trail with you.

5. Let the Rest of the World Go By

With someone like you, a pal good and true, I'd like to leave it all behind and go and find, Some place that's known, to God alone, Just a spot to call our own We'll find perfect peace, where joys never cease, Out there beneath a kindly sky; We'll build a sweet little nest, somewhere in the west And let the rest of the world go by.

6. Six Health Doctors (Tune: Yankee Doodle)

> The six best doctors anywhere, And no one can deny it, Are sunshine, water, rest and air, Exercise and diet.

These six will gladly you attend, If only you are willing, Your ills they'll mend Your mind they'll clear, And charge you not one shilling.

Repeat Slowly: The six best doctors anywhere, And no one can deny it, Are sunshine, water, rest and air, Exercise and diet.

7. Silvery Moon

By the light of the silvery moon, I want to spoon, With my honey I'll croon love's tune; Honey moon, keep a shining in June, Your silvery beams, will bring love's dreams We'll be cuddling soon Ey the light of the moon.

8. Daisy

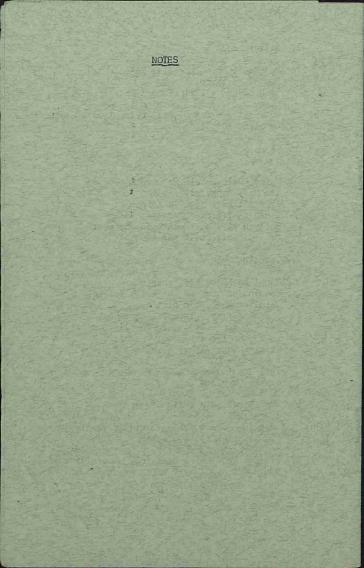
Daisy, Daisy, tell me your answer do I'm half crazy all for the love of you It won't be a stylish marriage I can't afford a carriage But you'll look sweet upon the seat of a bicycle built for two.

9. Carolina Moon

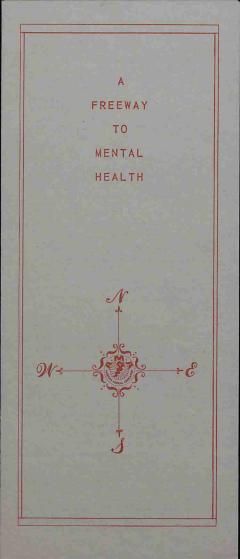
Carolina Moon, keep shining shining on the one who waits for me. Carolina Moon, I'm pining, pining for the place I long to be. How I'm hoping tonight, you'll go go to the right window, Scatter your light, say I'm all right Please do-Tell her that I'm blue and lonely, Dreamy Carolina Moon

10. When You Wore A Tulip

When you wore a tulip, a big yellow tulip And I wore a big red rose When you caressed me, twas then Heaven blessed me, What a blessing, no one knows, You made life cheery, when you called me dearie, Iwas down where the blue grass grows, Your lips were sweeter and julep When You wore a tulip, and I wore a big red rose.







STOP - to consider the problem

The acuteness of the problem of mental health in the nation today is dramatically revealed by the fact that over a lifetime one out of every twelve persons will require hospitalization for mental illness. Many organizations like yours, aware of the serious problem, are focusing attention on mental health needs and methods for meeting these needs. Mental illness - a name covering several sicknesses of the mind - affects the way a person thinks, feels and behaves. Some mental illnesses stem from physical causes and others have no known physical causes. Persons with either mental or emotional illnesses need psychiatric help, just as any person with a physical ailment needs the medical aid of a physician.

LOOK - at the solution to the problem in your community

Though mental illness is mainly a medical problem, which like certain other illnesses may stem from the tensions and pressures of the 20th century world, it is a community problem, too. Alcoholism, drug addiction, and juvenile delinguency, for example, reveal mental and emotional disorders and have widespread implications from the standpoint of the community. Organizations concerned with mental health have worked for many years to provide improved facilities for the care of the mentally ill and have tried to teach the public the facts about mental illness. Much remains to be done. You and your club members can join with other groups in your community who are working for the prevention of mental and emotional illness and for the adequate care and treatment of those suffering from these illnesses.

LISTEN - to these suggestions for planning mental health action

Physicians in your community are vitally concerned with the solution of mental health problems. Your county medical society offers its help to your club in studying the problem of mental health and planning long-range mental health activities in your community.

FACTS COME FIRST

The solution to mental health problems lies in an informed population and the coordinated efforts of all those groups and individuals concerned. To provide your club members with important information about mental health, the following pieces are enclosed in this packet:

"Joe's Nervous Breakdown" – by John Eichenlaub, M.D., reprinted from Today's Health, 1954. "The Psychiatrist" – by Edward Dengrove, M.D., and Doris Kulman, reprinted from Today's Health, 1955.

"How is Your Mental Health?" (skit) — prepared by the National Institute of Mental Health. Testimony of the American Medical Association to Congress on current mental health legislation.

PLANNING YOUR PROGRAM (Speakers and films)

Your county medical society can provide a physician-speaker for your club who will present authoritative information on the subject of mental health. Here are some topics upon which you could base a mental health program:

Methods of improving the care and treatment of the mentally ill in the community as a whole. Your role in community rehabilitation of those who have been hospitalized for mental illness. Good mental health practices in schools.

Organization and operation of a community mental hygiene clinic.

Research provides new hope for the mentally ill.

Here is a list of outstanding films on the subject of mental health which could be shown to your club in connection with a program on the subject:

- "Angry Boy" available from International Film Bureau, 57 East Jackson, Chicago, III.
- "Breakdown" available from National Film Board of Canada, 400 West Madison St., Chicago, III.
- "The Lonely Night" available from the Mental Health Film Board, Inc., 166 East 38th St., New York, N.Y.
- "Preface to a Life" -- available from the National Association for Mental Health, 13 East 37th St., New York 16, N.Y.
- "Emotional Health" available from the McGraw Hill Book Co., 330 West 42nd St., New York, N.Y.
- "Search for Sanity" -- available from Smith, Kline & French Laboratories, 1530 Spring Garden St., Philadelphia, Pa.
- "We, the Mentally III" available from Smith, Kline & French Laboratories, 1530 Spring Garden St., Philadelphia, Pa.

Life today is mighty complicated. There are constant demands upon each of us – continued stresses and strains. No wonder so many Americans find themselves on the road to mental illness. Mrs. Oveta Culp Hobby, Secretary of Health, Education and Welfare, recently testified before Congress that "as much as 6% of the total population, or about 9 million persons, have serious mental disorders." What can YOU do?

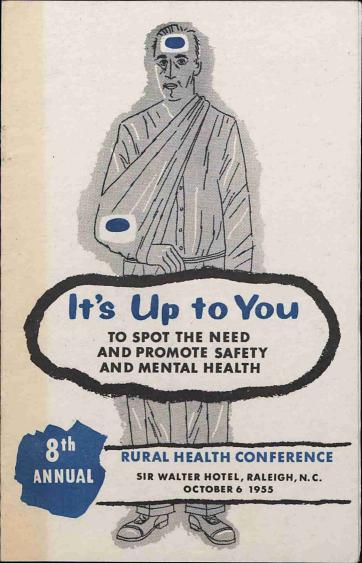
ADDITIONAL REFERENCES

These reprints can be secured from the Order Department, American Medical Association, 535 N. Dearborn Street, Chicago, III.:

- "Your Stake in Mental Health" by George S. Stevenson, M.D., reprinted from Today's Health, 1953, 10 cents. "How Teachers Can Build Mental Health" - by Rudolph Novick, M.D., reprinted from Today's Health, 1951, 10 cents.
- "Where Mental Patients Rule Themselves" - by Murray Teigh Bloom, reprinted from Today's Health, 1954, 10 cents.
- "Planning for the Feebleminded" by Kenneth Robb, reprinted from Today's Health, 1952, 15 cents.
- "The Teacher's Role in Mental Hygiene" - by Herman Jahr, M.D. and Fred V. Hein, Ph.D., reprinted from Today's Health, 1947, 15 cents.

Here are other reference sources to help build a sound program on the subject of mental health:

- "List of mental health publications and audio-visual aids" — prepared by the National Association for Mental Health, 1790 Broadway, New York 19, N.Y.
- "Reading lists of pamphlets distributed by National Institute of Mental Health," National Institute of Mental Health, Bethesde 14, Maryland.
- "Reference Guides to Pamphlets Distributed by Principal Mental Health Program Agencies," National Institute of Mental Health, Bethesda 14, Maryland.
- "The Organization and Function of the Community Psychiatric Clinic," published by the National Association for Mental Health, 1790 Broadway, New York 19, N.Y., 1952.



ADVISORY COMMITTEE MEMBERS

- Mr. David Weaver, Director, Agriculture Extension Service, North Carolina State College, Raleigh, North Carolina
- Miss Ruth Current, State Home Demonstration Agent, Agriculture Extension Service, N. C. State College, Raleigh, North Carolina
- Mr. R. Flake Shaw, Exec. Vice-President, North Carolina Farm Bureau, Greensboro, North Carolina
- Mrs. Jesse Yates, State Health Chairman, Associated Women of the North Carolina Farm Bureau, Greensboro, North Carolina
- Dr. L. M. Massey, Chairman, Rural Health Committee, North Carolina Farm Bureau, and the North Carolina Dental Society, Zebulon, N. C.
- Mr. Harry Caldwell, Master, North Carolina Grange, Greensboro, N. C.
- Mr. Morris L. McGough, Executive Vice-President, Agriculture Development Council, Asheville, North Carolina

Mr. Garland A. Hendricks, Wake Forest Seminary, Wake Forest, N. C.

- B. M. Drake, M. D., Division of Local Health Services, North Carolina State Board of Health, Raleigh, North Carolina
- Mr. A. L. Teachey, Director, Vocational Agriculture, North Carolina State Department of Public Instruction, Raleigh, North Carolina
- Miss Catherine Dennis, Director, Vocational Home Economics, North Carolina State Department of Public Instruction, Raleigh, North Carolina

Mr. William Poe, Associated Editor, The Progressive Farmer, Raleigh, N. C.

Mrs. Fernie Laughinhouse, State Health Chairman, Health Committee, Home Demonstration Federation, Pantego, North Carolina

Dr. Verne S. Caviness, Health Chairman, State PTA, Raleigh, North Carolina

- Mr. J. W. Crawford, Director, Agriculture Extension Challenge program, N. C. State College, Raleigh, N. C.
- Mr. Jack Riley, Public Relations Division, Carolina Power and Light Company, Raleigh, North Carolina
- Dr. E. G. McGavern, Dean, School of Public Health, Chapel Hill, President of N. C. State Health Council
- Dr. John M. Mewborn, Rural Health Chairman, Academy of General Practice, Farmville, North Carolina

STATE MEDICAL SOCIETY'S COMMITTEE ON RURAL HEALTH

W. Wyan Washburn, M. D., Chairman, Boiling Springs, N. C.
William H. Romm, M. D., P. O. Box I, Moyock, N. C.
Rachel D. Davis, M. D., 111 E. Gordon Street, Kinston, N. C.
W. Plato Starling, M. D., Box 297, Roseboro, N. C.
Thomas J. Taylor, M. D., 201 Jackson Street, Roanoke Rapids, N. C.
Daniel S. Currie, Jr., M. D., 302 Old Street, Fayetteville, N. C.
R. Vernon Jeter, M. D., Piymouth Clinic, Plymouth, N. C.
Vernon W. Taylor, Jr., M. D., 102 Cold Street, Canone, I. Elkin, N. C.
Charles E. Cloninger, M. D., P. O. Box 245, Conover, N. C.
Hugh A. Mathews, M. D., 44 Academy Street, Canton, N. C.
James Donold Bradsher, M. D., Box 158, Roxboro, N. C.

9:60-10:00 Registration 16:00-10:80 Opening Session; Presiding - W. Wyan Weshburg, H.D., Chairme Committee on Street Health

STH ANNUAL RURAL HE ALTH CONFERENCE

Helcome - Fred D. Wheeler, Mayor of Releigh Response - W. Wyan Warnburn, M.D., Boiling Springs

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three county non-fatal accident survey)

Hotel Sir Walter, Raleigh, North Carolina October 6, 1955

 St. J. C. Ferguson, Fam Salary Spacialist, Agriculture Extension Service, N. G.
 State College
 Precision provided for traction providence

Dr. L. M. Mussey, Chairman, Surah Health Constitues, M.C. Dontal Scotety, Zebuler

Sponsored by Committee on Rural Health Medical Society of the State of North Carolina

Hobert Yeongy M.D. Health Officer, Halifax Gb.
 Hobert Yeongy M.D. Health Officer, Halifax Gb.
 Fersons having unperienced a fain or home
 accident to briefly relate their story,
 d-H team demonstration on farm and home chemicalax
 Lechard Westhersphon, Apax Senior 4-H Club,
 Holly Springe, H.O.
 Faye Lewis, Knichtdale 4-H Club, Ht. L. Neuse

9:00-10:00 Registration 10:00-10:30 Opening Session: Presiding - W. Wyan Washburn, M.D., Chairman

putation learn from the motopes of other people,

Committee on Rural Health Group singing - G. L. Carter, Assistant 4-H Club Leader

Invocation - L. M. Massey, M.D., Zebulon Welcome - Fred B. Wheeler, Mayor of Raleigh Response - W. Wyan Washburn, M.D., Boiling Springs

10:30-12:15 Session on Farm and Home Accidents Within yerk 42% when Moderator - Charles M. Cameron, Jr. M.D. M.P.H. Director, Accident Prevention Section, N. C. State Board of Health (summary of Burn, foisen three county non-fatal accident survey)

> Mr. Maynard Coe, Director, Farm Safety Division, National Safety Council, Chicago, Ill.

Mr. J. C. Ferguson, Farm Safety Specialist, Agriculture Extension Service, N. C. State College

Dr. Edgar T. Beddingfield, Practicing physician, Stantonsburg, N. C.

Dr. L. M. Massey, Chairman, Rural Health Committee, N.C. Dental Society, Zebulon

Resource members:

J. Fred Colvard, Durham, N.C. - Representative of the N.C. Equipment Dealers Association Robert Young, M.D. Health Officer, Halifax Co. Persons having experienced a farm or home accident to briefly relate their story.

4-H team demonstration on farm and home chemicals. Leonard Weatherspoon, Apex Senior 4-H Club,

Holly Springs, N.C.

1926 house + male priore 1/2 million-1955 - we have strike that much

Faye Lewis, Knightdale 4-H Club, Rt. 1, Neuse Safety- Enforcement, Enquieering, Educations Floor Discussion: Intermission for lunch -- 12:15-1:45 p.m.

Presiding: W. Wyan Washburn, M.D., Boiling Springs 1:45-2:00 Group singing and introduction of the afternoon program — Mr. G. L. Carter

2:00-4:00 Mental health session

Moderator: Roger Wm. Howell, M.D. M.P.H. School of Public Health, University of N. C.

Panel Members:

Robert Fink, School-Health Service, Department of Public Instruction, Raleigh, N. C.

Bruce Blackmon, M.D., Practicing physician, Buies Creek, N. C.

Joseph Carpenteri, M.D. Practicing psychiatrist, Raleigh, N. C.

Rev. Richard Young, Baptist Hospital, Winston-Salem, N. C.

Mrs. Corine J. Grimsley, Extension Specialist, Family Relations, Raleigh, N. C.

Mrs. Hazel Parker, Negro Home Demonstration Agent, Tarboro, N. C.

Other resource persons:

Nancy Johnson, Rt. 1, Newton, N.C.-Pres. of the 4-H Club organization.

Jimmy Hunt, Lucama, N.C .-- Pres. of the F. F. A. Clubs

Manly Wilder, Middlesex, N.C.-State 4-H King of Health

Rachel Jurney, Statesville, N.C.--State 4-H Queen of Health

Judith Hamlett, F. H.A. Representative Ernest Macon, Jr., Methodist Youth

Fellowship, Greensboro, N. C.

One-act play "Random Target" given by Raleigh Little Theatre Group - Mr. George Hall, Director

Cast: Eve - Ann Seltman The Wife - Diane Bedell The Husband - Ted Daniel Son - Dick Ellis

Floor discussion with question and answer period.

Summary: Mr. Wayne Corpening, Manager, Agriculture Division, Wachovia Bank and Trust Co., Winston-Salem, N. C.

Lengy Johnson, -R. J. Weston, M.C. -- Trees

Appreciations: J. P. Rousseau, M.D., President, Medical Society of the State of North Carolina, Winston-Salem, N. C.

Adjournment:

Letterd det her i NOTES

Fellonshity, Greensbore, H. C.

1955 RURAL HEALTH CONFERENCE COMMITTEES

8th ANNUAL RURAL HEALTH CONFERENCE PROGRAM CHAIRMAN

W. Wyan Washburn, M. D., Boiling Springs, North Carolina

PROGRAM COMMITTEE:

W. Wyan Washburn, M. D., Chairman B. M. Drake, M. D., MP. H., N. C. State Board of Health Will Rogers, N. C. Farm Bureau Federation Daniel C. Currie, Jr., M. D., Fayetteville, N. C. Hugh A. Mathews, M. D., Canton, N. C. Dr. L. M. Massey, Dental Society, *icbulon*, N. C.

PUBLICITY COMMITTEE:

William N. Hilliard, Medical Society, Chairman
R. Vernon Jeter, M. D., Plymouth, N. C.
William Poe, Progressive Farmer, Raleigh, N. C.
Bill Humphries, News and Observer, Raleigh, N. C.
Mrs. George Paschal, Jr., Medical Auxiliary, Raleigh, N. C.
William H. Richardson, N. C. State Board of Health, Raleigh, N. C.
Miss Ruth Current, State Home Agent, Extension Service
Morris L. McGough, Asheville Development Council, Asheville, N. C.

ATTENDANCE RECORD:

Mrs. E. T. Beddingfield, Medical Auxiliary, Stantonburg, N. C.

REGISTRATION:

Miss Nancy Wyre and Miss Phyllis Whitfield, State Medical Society

HOSTESSES:

Miss Mary Harris, Extension Service; Mrs. Irby Walker; Farm Bureau Women's Committee; Mrs. Harry B. Caldwell, N. C. State Grange.

MATERIALS, PROPERTIES, AND ARRANGEMENTS:

Mr. James T. Barnes, Executive Secretary Mr. William N. Hilliard, Executive Assistant for Public Relations Mrs. Annette S. Boutwell, Rural Health Consultant

EXHIBITORS

Medical Society of the State of North Carolina Accident Prevention Section, N. C. State Board of Health North Carolina Mental Health Association Carolina Power and Light Company North Carolina Department of Motor Vehicles Hospital Savings Association Hospital Care Association

- Tab. 30131

NORTH CAROLINA'S 6TH ANNUAL RURAL HEALTH CONFERENCE PROGRAM PROGRAM Wednesday, October 21, 1953 Textile Building, State College Raleigh, North Carolina 9:00 to 10:00 A.M. Registration - Textile Building Mrs. W. K. Cuyler, Chairman (Durham) Hospitality Committee 10:00 A.M. General Session - Honorable L. Y. Ballentine, Presiding Invocation in Music - "The Lord's Prayer" - Vladimir B. Benser, M. D. Raleigh, N. C. Devotional Selections - Shaw University Choral Society Harry Gil-Symthe, Director, Raleigh WELCOME: George F. Bond, M. D., Bat Cave Committee on Rural Health, Medical Society of North Carolina ADDRESS: "The Dividends of Health" - Mrs. Charles W. Sewell, Otterbein, Indiana Adivsory Committee, Council on Rural Health American Medical Association ACCORDIANIST AND SONG LEADER: Mrs. Mary Sue Jarretty, Shelby, N. C. PROGRESS PARADE: Reports on activities and accomplishments in health progress from selected community organizations throughout North Carolina. ACCENT ON YOUTH: Panel of youth participants giving accounts of special progress in personal, family, and community health. ADDRESS: "Health Dividends for Youth" - I. G. Greer North Carolina Business Foundation Chapel Hill, N. C. 12:30 P.M. DUTCH PICNIC - FAMILY STYLE - Pullen Park 2:00 P.M. MUSIC - Johnston County 4-H Rhythm Band Smithfield, North Carolina PANEL: "PEOPLE BEST BUILD THEMSELVES" (1) Self-Motivation and Development (2) Group Cooperation (3) Community Action Mrs. Jean Ogden, PhD - MCDERATOR Community Services, Extension Division, University of Virginia, Charlottesville Jess Ogden, PhD, Director, Community Service Extension Division, University of Virginia, Charlottesville, Virginia R. Flake Shaw. Executive Vice-President, N. C. Farm Bureau Federation, Greensboro Frank Jeter, Editor, Department of Information, State College of Agriculture and Engineering Mrs. Corrine Grimsley, Family Life Specialist, Agricultural Extension Service, State College, Raleigh J. Street Brewer, Past-President, Medical Society of N. C., Roseboro L. Y. Ballentine, Commissioner of Agriculture, Raleigh George F. Bond, M.D., Council on Rural Health, AMA, Bat Cave E. G. McGavran, M.D., Dean, School of Public Health, U.N.C., Chapel Hill DISCUSSION: SUMMARY: R. C. BOB Francis, Farmer and Philosopher, Rt. #3. Waynesville, N. C. ADJOURNMENT AT 4:30 P.M.

THE 7TH ANNUAL RURAL HEALTH CONFERENCE

The 7th Annual ^Rural Health Conference met at the ^Sir Walter Hotel, Raleigh, North Carolina, September 29 with approximately 500 in attendance. The theme of the Conference was "Community Action, the Key to ^Rural Health's Door" with one of the main objectives being to gain perspective as to what future problems we have to face and how to attack them.

A second major objective was to focus attention on four of the major health problems today-dental health; physical examinations, as a part of a preventive health program; sanitation; and recreation and social health which has/direct bearing on mental status as well as physical fitness.

On the morning program, Mr. Harry Caldwell, Master, North Carolina State Grange and Dr. D. W. Colvard, ^Director, School of Agriculture, North Carolina State College spoke on "How We Have Gained Better Health" and "Health in North Carolina Today". After looking at the situation as outlined in these two talks, Dr. E. G. McGavern, Dean of University of North Carolina School of Public Health discussed "Working Together for Better Health Tomorrow", mentioning specifically that Health ^Sciences cannot alone work together for better health tomorrow, but that communities must call on all the sciences for bettering their health. Better Agriculture, nutrition, economics, housing, communications, roads etc. are all involved.

The afternoon program presented a panel on preventive medicine which was followed by a discussion of "What some counties are now doing about these problems", and what community groups should do to solve health problems.

Dr. Guion Johnson in her very interesting way summarized the talks of the doctors and farm leaders. She stated that health is not a purchasable product, but it can be an individual and a community problem on which we need to work co-operatively. Dr. Johnson said that eve... individual could do something about health and as an individual she herself was going home and have that long-needed physical examination as a part of the health preventive program. The whole program was very stimulating and brought out good discussion from those in attendance. The persons in charge are to be commended for the speakers, and the interesting way in which they treated their subjects. Everyone received such good information which we hope will be carried back to all sections of the State.

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Verna Staton, Asst. State Home Dem. Agent THE COMMUNITY THE INDIVIDUAL THE AGENCIES COMMUNITY ACTION

the Key to Rural Health's Door

7th ANNUAL RURAL HEALTH CONFERENCE RALEIGH, N.C-SEPT. 29, 1954

ADVISORY COMMITTEE MEMBERS

Mr. David Weaver, Director, Agriculture Extension Service, North Carolina State College, Raleigh, North Carolina

Miss Ruth Current, State Home Demonstration Agent, Agriculture Extension Service, N. C. State College, Raleigh, North Carolina

Mr. R. Flake Shaw, Exec. Vice-President, North Carolina Farm Bureau, Greensboro, North Carolina

Mrs. Jesse Yates, State Health Chairman, Associated Women of the North Carolina Farm Bureau, Greensboro, North Carolina

Dr. L. M. Massey, Chairman, Rural Health Committee, North Carolina Farm Bureau, and the North Carolina Dental Society, Zebulon, N. C.

Mr. Harry Caldwell, Master, North Carolina Grange, Greensboro, North Carolina

Mr. Morris L. McGough, Exec. Vice-President, Agriculture Development Council, Asheville, North Carolina

Mr. Garland A. Hendricks, Wake Forest Seminary, Wake Forest, North Carolina

Mr. John E. Baker, Chief, Division of Health Education, North Carolina State Board of Health, Raleigh, North Carolina

Mr. A. L. Teachey, Director, Vocational Agriculture, North Carolina State Department of Public Instruction, Raleigh, North Carolina

Miss Catherine Dennis, Director, Vocational Home Economics, North Carolina State Dept. of Public Instruction, Raleigh, North Carolina

Mr. William Poe, Associate Editor, The Progressive Farmer, Raleigh, N. C.

Mrs. Fernie Laughinghouse, State Health Chairman, Health Committee, Home Demonstration Federation, Pantego, North Carolina

Dr. Verne S. Caviness, Health Chairman, State PTA, Raleigh, North Carolina

STATE MEDICAL SOCIETY COMMITTEE ON RURAL HEALTH

Dr. Fred C. Hubbard, Chairman, North Wilkesboro, North Carolina Dr. Charles I. Harris, Williamston, North Carolina Dr. W. Ghio Suiter, Weldon, North Carolina Dr. William H. Romm, Moyock, North Carolina Dr. William H. Romm, Moyock, North Carolina Dr. W. Wyman Washburn, Bolling Springs, North Carolina Dr. Rachel D. Davis, Kinston, North Carolina

7TH ANNUAL RURAL HEALTH CONFERENCE

State **XXXXXXXXXXX** 2--Rural Health Con-

Opening Session-Lr, Fred C, Hibbard, Chairman of the Bural Health Committee, Presiding, **3 H T** Invocation: L., Troy Ferguson, Raisigh

"Greeting M' and the A.H.A. "-by F. S. Creckett, Council on Rural

Community Action the KEY to Rural Health's Door

Sponsored by: The Medical Society of the

State of North Carolina

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Sir Walter Hotel---Raleigh, N. C. Virginia Dare Ball Room September 29, 1954 Registration 8:30 a.m.-9:00 a.m. Organ Prelude: Miss Evelyn Wilson

- 9:00-9:10 a.m. Opening Session--Dr. Fred C. Hubbard, Chairman of the Rural Health Committee, Presiding. Invocation: Mr. Troy Ferguson, Raleigh Group Singing: Dr. Arnold Hoffman, Director; Mrs. Hoffman, Accompanist
- 9:10-9:20 a.m. Statement of Purpose--Rural Health Conference--by Dr. Rachel D. Davis, Chairman of the Rural Health Conference "Greetings from the A.M.A."-by F. S. Crockett, Chairman, Council on Rural Health.
- 9:20-9:50 a.m. "How We Have Gained Better Health" by Mr. Harry B. Caldwell, Master, State Grange: Greensboro, North Carolina 9:50-10:10 a.m. Discussion
- 10:10-10:20 Brief intermission
- 10:20-10:50 a.m."Health in North Carolina Today"--Director, School of Agriculture, Dr. Deane W. Colvard, State College

10:50-11:10 a.m.Discussion

11:10-11:40 a.m. "Working Together for Better Health Tomorrow",--by Dr. E. G. McGavern, Dean, University of North Carolina School of Public Health, Chapel Hill, N. C.

11:40-12:00 a.m.Discussion

Introduction of guests Announcements

Sto Retter Hetel Andra Batel

12:00-1:30 p.m. Intermission for Lunch.

AFTERNOON SESSION

1:00-1:30	p.m.	Organ InterludeMiss Evelyn Wilson
1:30-1:45	p.m.	Group Singing; Dr. Arnold Hoffman, Dir- ector; Mrs. Hoffman, Accompanist
1:45-3:00	p.m.	Panel Presentation-Mr. Garland A. Hen- dricks, Wake Forest, N.C. presiding Dental Health-Dr. John C. Brauer, Dean, School of Dentistry, Chapel Hill, N.C.
		Physical Examination, a part of a Pre- ventive Health Program-Dr. J. Street Brewer, General Practitioner, Roseboro.
-		SanitationMr. John Andrews, Sanitary Engineer, N.C. State Board of Health, Raleigh, N. C.
		Recreation and Social Health-Mr. Ralph Andrews, Director of Recreation Commis- sion, Raleigh, N. C.
3:00-3:30	p.m.	Discussion led by, Mr. Morris L. McGough, Vice-Chairman, Agri- culture Development Council, Asheville,N.C. "What are we doing now about these problems"
3:30-4:10	p.m.	Discussion "What should community groups do together about these problems?" led by Dr. W.Wyan Washburn, General Practitioner, Boiling Springs, N.C.
4:10-4:20 4:20-4:25	p.m.	Summary-Dr. Guian Johnson, Chapel Hill. Recognition and Appreciation by Dr. Zack D. Owens, President of the North Carolina State Medical Society, Elizabeth City, N.C.
::30 p.m.		Adjournment

On top of old Smoley All covered with snew I lost my true lover, By courtin' too slow.

1. Oh! Susanna!

I came from Alabama wid my banjo on my knee,

I'm gwan to Lou'siana my true love for to see.

It rained all night the day I left, The weather it was dry, De sun so hot I froze to death, Susanna, don't you cry.

were a location, a part of a live

(chorus) - ----

I had a dream de odder night, when ebrything was still,
I thought I saw Susanna a comin' down de hill.
De buckwheat cake war in her mouth,
De tear was in her eye,
Says I, I'm comin' from de South,
Susanna. don't you cry!

(Chorus)

Oh, Susanna, oh don't you cry for me, For I'm going' to Lou'siana Wid my banjo on my knee.

adda toldi nooro .m. groet iddet

man the tables

. The DEA

2. Mistress Shady

Oh, Mistress Shady, She is a lady, She has a daughter whom I adore, Each night I court her I mean the daughter, Every Sunday, Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday Afternoon at half past four.

3. Old Smoky

On top of old Smoky All covered with snow I lost my true lover, By courtin' too slow. A-courtin' is pleasure But flirting is grief, A false hearted lover Is worse than a thief.

They'll tell you they love you. To give your heart ease, They'll turn their back on you, And court who they please.

ane soch unmen theile and the

They'll hug you and kiss you, They'll tell you more lies, Than cross-ties on a railroad. Or stars in the skies.

Your grave will decay you and turn you to dust; Not a boy in ten thousand a poor girl can trust.

I'll go to Old Smoky. the mountain so high has redio done of second Where the wildbirds and turtle doves Can hear my sad cry.

- Pick A Bale O' Cotton 4. When I's with . Thomas I suff
- Gonna jump down turn around (1)Pick a bale o' cotton Gonna jump down turn around Vise la managerid Pick a bale a day.

Oh, Law-dy, Pick a bale o' cotton, Oh, Law-dy, Pick a bale a day.

- (2)Me and my wife can Pick a bale o' cotton Me and my wife can Pick a bale a day.
- Me and my buddy can, (etc.) (3)
- Looky, looky yonder, (etc.) (4)
- (5)Pick-a, pick-a, pick-a, pick-a, (etc.)

5. O Won't You Sit Down

Who's that youda dressed in red? Must be the chillen that Moses led. O won't you sit down? Lord, I can't sit down, O won't you sit down? Lord, I can't sit down, 'Cause I down and the site of the second sec

- (2) Who's that yonda dressed in white:
 Must be the chillen of the Israelite.
- (3) Black?----Hypocrites turin' back. Ist Il your
- (4) Pink?--Solomon tryin' to think.
- (5) Green?--- 'Zekiel in his flyin' machine.

6. Vive L'Amour

Let every good fellow now join in a song, Vive la compagnie: Success to each other and pass it along, Vive la compagnie:

Chorus:

Vive la, vive la, vive l'amour, Vive la, vive la, vive l'amour, Vive l'amour, Vive l'amour, Vive la compagnie:

A friend on your left and a friend on your right, Vive la compagnie! In love and good fellowship let us unite, Vive la compagnie! (chorus)

7. Walking at Night model of a side of a side

Walking at night along the meadow way, Home from the dance beside my maiden gay. Walkin at night along the meadow way,

Pickers, Bickes, pickes, pickes, (etc.)

Home from the dance beside my maiden gay, Hey! <u>Chorus:</u> Sto-do-la, sto-do-la, sto-do-la pum-pa, Sto-do-la, pum-pa, sto-do-la pum-pa, Sto-do-la, sto-do-la, sto-do-la pum-pa, Sto-do-la, pum-pa, pum,pum.

Nearing the wood we heard the nightingale, Sweetly it helped me tell my begging tale. Nearing the wood we heard the nightingale. Sweetly it helped me tell my begging tale. (chorus) Many the stars that brightly shone above.

But none so bright as her one word of love. Many the stars that brightly shone above, But none so bright as her one word of love. (chorus)

8. Short'nin' Bread

Put on de skillet, put on de lead, Manny's goin' to bake a little short'nin' bread, Dat ain't all she's goin' to do Manny's goin' to make a little coffee, too. (chorus) Three little darkies lyin' in bed. Two wuz sick an' de other mos' dead: Send fo' de doctor-de doctor said "Feed dose darkies on short'nin' bread." (chorus) Slip to de kitchen, slip up de lead. Slip my pockets full of short'nin' bread. Stole de skillet, stole de lead, Stole de gal to make short'nin' bread. (chorus) Dey caught me wid de skillet, caught me wid de lead Caught me wid de gal makin' short'nin' bread Paid six dollah's for de skillet Paid six dollah's fo' de lead, Spent six months in jail, eatin' short'nin' bread! Chorus:

None from the dance b 2 J J O.M iden gay, and

Oncer us-

Sto-do-ia, sto-do-is, sto-do-ia pum-pa, us i her Sto-do-ia, pum-pa, sto-do-ia pum-pa, Sto-do-ia, sto-do-ia, sto-do-ia pum-pa, us i her Sto-do-ia, pum-pa, pum, pum,

Nearing the wood we heard the nightingale, Sweetly it helped me rell my beguing tale. Wearing the wood we heard the nightingale. Sweetly it helped me cell my bagging tole. (charus)

Any the stars that brightly showe show, but none so bright as her one work of love. (any the stars that brightly shome above, But none to bright as her one word of love. (shorus)

6. Short Bin Bread

vot on as shill d., put on its lead, lianty's goin' to bake a little mint'nin' brend, Dat ain's all she's goin' to do (chorus) (chorus) Thes liktle darkies lyan' in bad, Two was afek an' de other mes' dead; Two was afek an' de other mes' dead; (chorus) Send fet' de doctor-de doctor said (chorus) (chorus) (chorus) Dite to de kitchen, alip un de lead, Sile to de kitchen, alip un de lead, Sile to de kitchen, alip un de lead, (chorus) Stole de skitlet, erois de lead, Stole de skitlet, erois de lead, (chorus) Doy caught me wid de skitlet, daught me mid de lead (chorus) Paid six dollan's for de skitlet, hourt'nin' bread Paid six dollan's for de lead, Spout six aonthe in jath, eatin' anort'min' bread! Spout six aonthe in jath, eatin' anort'min' bread!

1954 RURAL HEALTH CONFERENCE PROGRAM COMMITTEE

Dr. Rachel D. Davis, Chairman of the Rural Health Conference Rev. Garland A. Hendricks, Chairman of the Program Committee Dr. W. Ghio Suiter, Weldon, North Carolina Dr. W. Washburn, Boiling Springs, North Carolina Director David Weaver, State College Extension Service Miss Ruth Current, State Home Demonstration Agent Mr. William Poe, Progressive Farmer Dr. L. M. Massey, Zebulon, North Carolina Miss Mary Hall, School Supervisor, Oxford, North Carolina Mrs. Annette S. Boutwell, State Medical Society, Secretary

RURAL HEALTH CONFERENCE CHAIRMAN: Dr. Rachel D. Davis, Kinston, N. C. PROGRAM CHAIRMAN: Mr. Garland A. Hendricks, Wake Forest Seminary PUBLICITY AND ATTENDANCE CO-CHAIRMAN: Mr. William Poe and Miss Ruth Current ARRANGEMENTS AND PROPERTIES CHAIRMAN: Mr. James T. Barnes, Exec. Sec. State Medical Society

HOSPITALITY CHAIRMAN: Mrs. Harry Caldwell, Mrs. Irby Walker; and Mrs. Fernie Laughinghouse

EVALUATION CO-CHAIRMAN: Dr. L. M. Massey and Annette S. Boutwell REGISTRATION: Mrs. Judith S. Arnold and Miss Phyllis Whitfield THE NEWS AND OBSERVER, RALEIGH, N. C., MONDAY MORNING, SEPTEMBER 27, 1954.

At Rural Health Conference

Three Farm Leaders Will Speak Here

Three outstanding farm leaders will be among the principal speakers at the seventh annual Rural Health Conference for North Carolina, to be held at the Sir Walter Hotel, in Raleigh, Wednesday, September 29 beginning at 9 a.m. They are Harry B. Caldwell of Greensboro, master of the State Grange, Dr. D. W. Colvard of Raleigh, dean of the School of Agriculture at N. C. State College and Morris L. Mc-Gough, executive vice president of the Asheville Development Council, Inc.

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Caldwell will address the conference on "How We Have Gained Better Health" at the opening session. He is expected to highlight the importance of good health to good farming and rural living by relating past progress achieved through local, state and national leadership activities, agement, dairying, animal hus-strengthen ties between medical ventive health program; Named "Man of the Year" in bandry, research and experiment and community leaders, espe- John Brauer, dean, School of North Carolina Agriculture by the station supervision, prior to as cially farm leaders, for a better Dentistry at the University of Progressive Farmer, Caldwell is suming his present position in understanding of present health North Carolina, dental health; very active in health affairs in 1953. the State, serving as executive secretary of the N. C. Good McGough will describe some of ence is "Community Action, the sanitation; and Ralph Andrews, Health Association 1946-47. He has the Western North Carolina com- Key to Rural Health's Door," director of the State Recreation gained national and state recogni- munity action programs already with one of the main objectives Commission, recreation tion by his contributions to na- initiated, by way of focusing at being to gain perspective as to social health. tional farm, cooperatives, educa- tention on the rewards of or- what future problems we will Summarizing the day's proton, and various foundation or ganized efforts toward improved have to face, and how to attack gram will be Dr. Guin Johnson ganizations.

gram with an examination of signed to focus attention on the "Health in North Carolina To "job we are now doing" and focus attention on four of the Umstead, in a statement issued day," pointing up the need for "what type of community action major health problems today. las week designated "the week continued advancement in the is needed to meet these health They are: dental health; physical of September 26 as Rural Health health fields, despite past ac-problems."A native of Louisiana, examinations, as a part of a pre-Week in North Carolina. This complishments. Most of Colvard's McGough became associated with ventive health program; sanita-special week to be highlighted by professional work has been in the Asheville Agricultural De- tion; and recreation and social the 1954 Rural Health Confer-North Carolina where he is fully velopment Council in 1950, an or- health which have direct bearing ence on Wednesday, September aware of rural health conditions, ganization formed by business, on mental status as well as phy- 29," with additional training and ex- industrial and agricultural lead- sical fitness. perience at Purdue University, ers of that city for the purpose where he received his Ph.D. de-of helping to develop agriculture Dr. W. Wyan Washburn, a gen-State Medical Society, the North gree in agriculture economics. He and improve rural living in West-eral practitioner from Boiling Carolina Health Council, the has had a broad range of agri-ern North Carolina. cultural experience in farm man-



COLVARD.

Community Action.

family living. He will lead an them. Colvard will follow on the pro- afternoon discussion period de-

cal Society of the State of North Carolina. Carolina through its Rural Health



needs in the state.

Theme of this year's confer- with the State Board of Health,

Four Problems.

Springs, and Dr. E. G. McGavran, North Carolina State Board c. The Rural Health meetings are dean of the School of Public Health, the State Department of sponsored each year by the Medi- Health at the University of North Agriculture and all other agencies

Committee in cooperation with sion and the topics they will pre- standing of rural health probfarm, education civic, health, and sent are as follows: Dr. J. Street lems and which work for the imreligious organizations. The Brewer, Roseboro, physical ex- provement of rural health in our conferences are designed to amination, a part of the pre- state."



CALDWELL.

Dr. John Andrews, sanitary engineer and

of Chapel Hill.

In recognition of the importance A second major objective is to of rural health work, Governor

In his statement the Governor Other featured speakers will be said, "I wish to commend the and organizations which assist in Participants on a panel discus- bringing about a better under-

Rural Health Program Set

problems still to be solved will Council Inc. he discussed here today at the sev- "Working Together for Better enth annual North Carolina Rural Health Tomorrow." Dr. Brauer Health Conference.

take part in the all-day program, sion. On the same panel, Dr. Brewsponsored by the Rural Health er will discuss the value of physi-Committee of the Medical Society cal examinations as a part of a of North Carolina in cooperation preventive health program. with other health and farm organizations.

ed this week "Rural Health Week" needs. to draw attention to the conference's work to improve health con- rural health, while Dr. Colvard ditions among farm people.

versity of North Carolina and two community action programs in physicians with rural practice will Western North Carolina. take a prominent role in the conference. They are Dr. E. G. Mc-Gavern, dean of the School of Public Health: Dr. John C: Brauer, dean of the School of Dentistry; Dr. J. Street Brewer of Roseboro: and Dr. W. Wyan Washburn of Boiling Springs.

Farm leaders who will be heard include Harry B. Caldwell of Greensboro, State Grange Master; Dr. D. W. Colvard, dean of the North Carolina State College School of Agriculture: and Morris L. McGough, executive vice presi-

Progress in rural health and dent of the Asheville Development

Dr. McGavern will speak on will talk on dental health problems Doctors and farm leaders will as a member of a panel discus-

Dr. Washburn will lead an afternoon discussion on community ac-Governor Umstead has designat- tion programs to meet health

Caldwell will review advances in will point to need for continued Health educators from the Uni- progress. McGough will describe



Many Children Under Three Have Dental Problem, Conference Told

Half the children at the age of 3 have a dental problem, and many children are "dental cripples pri-or to the age of 6," the dean of the University of North Carolina's University of North Carolina's School of Dentistry said yesterday. Dean John C. Brauer presented the figures during a panel discus-

sion at the seventh annual Rural

Health Conference. He said that of the first three million registrants examined by local and induction boards, dental defects were the primary cause for rejection.

He recommended tackling the problem posed from community and family levels. From the community viewpoint, he called for teaching health fundamentals, in-cluding dental health, in every classroom. He also urged provision for dental examinations and care for those families with low or no income

On the family level, he called for practicing good oral hygiene procedures, routine dental examinations after the age of 2, and practicing prevention by good oral hy-giene, adequate nutrition, and re-duction in the use of refined carbohydrates

Theme of the conference, which reviewed past, current and future health needs, was "Community action, the key to rural health's door." Some 400 delegates attend Some 400 delegates attended the conference which was sponsored by the State Medical So-

A major morning address was made by Dr. E. G. McGavern, dean of the University of North Carolina's School of Public Health. "Better health tomorrow," declared Dean McGavern in a ref-erence to the subject of his talk, "is going to be dependent upon our focusing upon community health rather than the individual's health — greater concern over our community's, our neighbor's health than our own."

He pointed out that 50 years ago, when typhoid and syphillis were the great killers, a simple diagnos-tic test was developed for syphillis as was a drug for a relatively easy cure. But typhoid is still difficu and time consuming to diagnose yet a typhoid case today "is her-alded as wonderful teaching mate-rial for medical students."

CONFERENCE FIGURES-Pictured at the Seventh Annual Rural Health Conference held in Raleigh today at the Sir Walter Hotel are (left to right) Dr. J. P. Rousseau, Winston-Salem, president-elect of the Medical Society of of North Carolina; Dr. Zack D. Owens of Elizabeth City, president of the society; Dr. F. S. Crockett, of Lafayette, Ind., chairman of the Council on Rural Health of the American Medical Association; and Dr. Fred C. Hubbard of North Wilkesboro, chairman of the Rural Health Com-mittee of the State Medical Society.

stopping both diseases, said Dr. McGavern, is that typhoid was and is treated as a community prob-lem, but syphillis is "considered and treated as a private and indi-vidual disease."

He stated the health sciences 'cannont alone 'work together' for better health tomorrow." Communities must call on all the sciences for bettering their health. He said better agriculture, nutrition, eco-nomics, housing, communications, roads, and so forth are all involved.

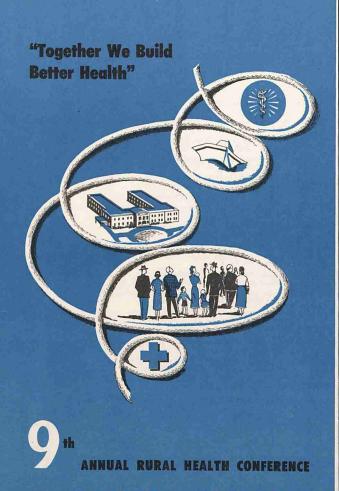
Dean D. W. Colvard of the School of Agriculture at North Carolina State College said that progress has been made in many phases of rural health in the past generation. But there is still a born work to co long way to go.

For instance,

The reason for the difference in dropped from 53.9 per thousand in opping both diseases, said Dr. 1936 for rural whiles to 26 per leGavern, is that typhoid was and thousand in 1952. For Negroes, the comparable drop was from 76 per thousand to 54.

Life expectancy figures also show significant change. In 1925, North Carolina's white women could figure on living to an average age of 59.3. In 1950 life expectancy for this group was 73.1. For white men the figure rose from 57.5 years to 66.7. For non-white women the figures are 46.9 and 63.2, and for non-white men 47.6 to 58.7

But in 1950, Colvard added, 13.2 per cent of the rural farm families in North Carolina had no toilet facilities, 50 per cent no mechanical refrigeration, 65 per cent no sink, 68 per cent no piped water, and 85 per cent no bath or shower. He called for better sanitation, housing, diet and nutrition, and infant deaths quantity and quality of medicine. and



SIR WALTER HOTEL, RALEIGH, N. C. OCTOBER 11, 1956

MEMBERS OF THE ADVISORY COMMITTEE TO THE MEDICAL SOCIETY'S COMMITTEE ON RURAL HEALTH AND EDUCATION

- Mrs. Robert N. Creadick, Rural Health Chairman, N. C. Medical Auxiliary, 1200 Anderson Street, Durham, N. C.
- Mr. David Weaver, Director, Agriculture Extension Service, North Carolina State College, Raleigh, N. C.

Miss Ruth Current, State Home Demonstration Agent, Agriculture Extension Service, N. C. State College, Raleigh, N. C.

- Mr. R. Flake Shaw, Exec. Vice-President, North Carolina Farm Bureau, P. O. Box W-4, Greensboro, N. C.
- Mrs. Jesse Yates, State Health Chairman, Associated Women of the North Carolina Farm Bureau, Wilson, N. C.

Dr. L. M. Massey, North Carolina Dental Society, Zebulon, N. C.

- Mr. Harry Caldwell, Master, North Carolina Grange, P. O. Box H-1, Greensboro, N. C.
- Mr. Morris L. McGough, Exeč. Vice-President, Agricultural Development Council, 420 City Hall Bldg., Asheville, N. C.
- Mr. Garland A. Hendricks, Wake Forest Seminary, Wake Forest, N. C.
- Dr. B. M. Drake, Division of Local Health Services, N. C. State Board of Health, Raleigh, N. C.
- Miss Catherine Dennis, Director, Vocational Home Economics, North Carolina State Department of Public Instruction, Raleigh, N. C.
- Mrs. Fernie Laughinghouse, State Health Chairman, Health Committee, Home Demonstration Federation, Pantego, N. C.
- Mr. William Poe, Editor, The Progressive Farmer, Durham Life Building, Raleigh, N. C.
- Dr. Verne S. Caviness, Health Chairman, State PTA, Raleigh, N. C.
- Mr. J. W. Crawford, Director, Agriculture Extension Challenge Program, N. C. State College, Raleigh, N. C.
- Mr. Jim Rutherford, Carolina Power and Light Company, "Finer Carolina Contest Program," Durham Life Bldg., Raleigh, N. C.
- Dr. E. G. McGavran, Dean, School of Public Health, Chapel Hill, N. C. Representing the N. C. State Health Council
- Dr. John M. Mewborn, Academy of General Practice, Farmville, N. C.
- Mr. Will Rogers, Director of Organization, N. C. State Farm Bureau, Rt. 2, Fuquay-Varina, N. C.

1

- Miss Vivian Culver, N. C. State Board of Nursing Examiners, Warren Building, Raleigh, N. C.
- Mr. S. K. Hunt, Rt. 1, Swannanoa, N. C., representing the N. C. Hospital Association
- Mr. Henry M. Milgram, Nash County Commissioner, Battleboro, N. C., representing the State County Commissioners Association
- Mr. A. G. Bullard, Director, Vocational Agriculture, Dept. of Public Instruction, Raleigh, N. C.
- Mr. Charlie Spencer, Director, School Health Service, Dept. of Public Instruction, Raleigh, N. C.

NINTH ANNUAL

Chairman, Hookerton, N. C.

9:00 - 9:30 s.m. Registration.

STATE RURAL HEALTH CONFERENCE

Dimension and Directory and Directory and Directory, President,

"TOGETHER WE BUILD BETTER HEALTH"

Sir Walter Hotel Raleigh, North Carolina October 11, 1956

Sponsored By: Committee on Rural Health and Education Medical Society of the State of North Carolina

and Hospital Care Association Assisted by Wake County 4-H Club Mambers. 9:00 - 9:30 a.m.

9:30 - 9:50

Registration.

Opening Session: Presiding--Mr. Alonzo C. Edwards, Conference Chairman, Hookerton, N. C.

Group Singing: Mr. G. L. Carter, N. C. State College

Invocation: Rev. Garland A. Hendricks, Wake Forest

Welcome: Dr. Earl Brian, President, Wake County Medical Society; and Dr. L. M. Massey, President, Wake County Dental Society, Zebulon

Greetings: Dr. Donald B, Koonce, President, Medical Society of North Carolina

Response: Dr. W. Wyan Washburn, Chairman, State Committee on Rural Health

"The Role of the Physician in the Community"

Mr. W. R. Gary, Layman, Fallston Dr. George F. Bond, Physician, Bat Cave, N. C.

10:20 - 10:30

9:50 - 10:20

MORNING BREAK -- DAIRY BAR Compliments--Hospital Saving and Hospital Care Associations. Assisted by Wake County 4-H Club Members.

10:30 - 12:00 "Community Efforts in Health Programs"

Moderator: Selz C. Mayo, PhD. N. C. State College

Reports Given by Community Leaders:

Community Home for the Aged, Potecasi, N. C. --Rev. J. B. Dailey, Jackson

Haywood County Farm and Home Safety Fair--Mrs. Kenneth Fry

Community Participation in Hospital Insurance Enrollment-Bladen County: Mr. James H. Clark, Sr. Elizabethtown Old Richmond Grange, Forsyth County: Miss Lena V. Hunter

Rural Sanitation: " Upward Community, Henderson County--Mr. George Justice Mr. Herbert L. Davis

Cedar Mountain Community, Transylvania County--Mr. Ralph Lee, President

FLOOR DISCUSSION.

12:00 - 1:30 p.m. RECESS FOR LUNCH

A Council on Rowal

AFTERNOON SESSION

1:30

Film Premier: "Better Health - The 4-H Way"

Analloo effect Presentation: Mr. L. R. Harrill, State 4-H Leader

2:00 - 3:00

"Training Opportunities and Employment Needs for Health and Medical Personnel"

Moderator: Dr. L. M. Massey

Resource Members:

- Dr. W. C. Davison, Dean, Duke Medical School
- Dr. Henry C. Clark, Division of Health Affairs, Chapel Hill
 - Dr. M. B. Bethel, Health Officer, Charlotte, N. C.
 - Miss Vivian Culver, Executive Examiners, Raleigh

Dr. Horace K. Thompson, President. Dental Society, Wilmington

FLOOR DISCUSSION

3:00 - 3:30 "Where Do We Go From Here?"

Mr. Aubrey D. Gates, Executive Director, AMA Council on Rural Health, Little Rock, Arkansas

3:30

Announcement as to District Conferences for 1957:

Dr. W. Wyan Washburn

ADJOURNMENT.

EVALUATION SHEET

 Have you ever attended a Rural Health Conference before today? Yes_____ No

If yes, Where

When

(year)

- Which topics presented today would you consider important for your club or community? List:
- Would you like any part or parts of today's program repeated at your own District Rural Health Conference scheduled for 1957 or 1958? Yes_____No

If yes, please state:

4. Do you wish to have a copy of the Conference Proceedings Report? Yes____ No

If Yes, please give correct address:

Name

Address

(Rt. or Box and Town)

1956 RURAL HEALTH CONFERENCE COMMITTEES

9th ANNUAL RURAL HEALTH CONFERENCE CHAIRMAN

Alonzo C. Edwards, Hookerton, North Carolina

PROGRAM COMMITTEE:

Dr. W. Wyan Washburn, Chairman, Medical Society's Committee on Rural Health Dr. L. M. Massey, Dental Society Mr. Will Rogers, Farm Bureau Mr. William Poe, Grange and Progressive Farmer Miss Ruth Current, Home Agent, Extension Service Dr. B. M. Drake, N. C. State Board of Health Mrs. George Paschal, Auxiliary to the State Medical Society Miss Vithan Culver, N. C. Board of Nursing Examiners

PUBLICITY COMMITTEE:

Mr. William N. Hilliard, Chairman

***DAIRY BAR CHAIRMAN:**

Miss York Kiker, N. C. Dept. of Agriculture

ATTENDANCE RECORD:

Mrs. W. K. Cuyler and Mrs. R. N. Creadick

REGISTRATION:

Miss Nancy Wrye and Mrs. Phyllis English, State Medical Society

HOSTESSES:

Miss Verna Stanton, Extension Service; Mrs. Irby Walker, N. C. Farm Bureau Women Committee; Mrs. Harry B. Caldwell, N. C. State Grange.

MATERIALS, PROPERTIES, AND ARRANGEMENTS:

Mr. James T. Barnes, Executive Secretary Mr. William N. Hilliard, Executive Assistant for Public Relations Mrs. Annette S. Boutwell, Rural Health Consultant

COMMITTEE ON RURAL HEALTH AND EDUCATION

W. Wyan Washburn, M.D., Chm., Bolling Springs, N. C. Wm. A. Hoggard, M.D. (Jr.), 1502 Carolina Avenue, Elizabeth City R. Vernon Jeter, M.D., Plymouth Clinic, Plymouth John W. Nance, M.D., 201 Jackson St., Roanoke Rapids Daniel S. Currie, Jr., M.D., 302 Old St., Fayetteville James Donald Bradsher, M.D., Box 168, Roxboro Henry B. Perry, Jr., M.D., 302 NI 68, Roxboro Charles E. Cloninger, M.D., P. O. Box 245, Conover Hugh A. Matthews, M.D., 44 A. cademy St., Canton Rachel D. Davis, M.D., 111 E. Gordon St., Kinston (Consultant)

*Blue Cross Cookies compliments of The Hospital Care Association. Milk: Compliments The Hospital Saving Association.

June 22, 1956

MEMO: To Members of the Program Planning Committee

From: Annette S. Boutwell, Rural Health Consultant

SUBJECT: Program Outline For The Ninth Annual State Rural Health Conference As Discussed Wednesday Night, June 20, 1956.

Members of the program planning committee present Wednesday night, June 20, at the Sir Walter Hotel were as follows: Dr. W. W. Washburn, Dr. L. M. Massey, Dr. B. M. Drake, Mr. Will Rogers, Miss Verna Stanton, Mr. James T. Barnes, and Annette S. Boutwell. (Dr. R. Vernon Jeter, Dr. Rachel Davis, Mr. William Poe, and Mrs. George Paschal were unable to attend.) Miss Verna Stanton substituted for Miss Ruth Current at her request.

The purpose of this committee meeting was to develop a program outline for the State Rural Health Conference scheduled to be held in Raleigh on October 11. The attached program outline has been prepared from the returned suggestions of the Rural Health Committee and its Advisory Groups, and the discussion at this committee meeting followed these suggestions and the writer was asked to submit this outline for your approval or revision.

Other program details included:

1. The question of having a strong lay leader to serve as CONFERENCE CHAIRMAN whose interest and leadership would have influence in pointing up the importance of wide attendance and participation in this program, and also someone whose continued interest would be valuable to all. Several persons were named including: Mr. Edward Aycock, Wachovia Bank, Raleigh; Mr. Edwin Pate, of Laurinburg; Mr. T. C. Council, of Durham; Mr. Alonzo Edwards, of Hockerton; Mrs. W. K. Cuyler, of Durham; Mrs. Fernie Laughinghouse, of Pantego; and Mr. Arthur D. Williams, of Wilson. (I would appreciate having other names and also your preference as to whom to contact first, second, etc.)

This person needs to be contacted in the immediate future so as to be involved in the planning for the Conference.

 It was decided to begin registration at 9:00 a.m. and the program at 9:30 a.m. having the lunch recess at 12:00 - 1:30 p.m. and adjourning by 4:00 p.m.

3. It was suggested to have the "premier" showing of the 4-H Health film immediately after the lunch hour as it will help get people to return from lunch on time.

4. For the opening session, it was suggested to invite Dr. Earl Brian, President of the Wake County Medical Society and Dr. L. M. Massey, President of the Wake County Dental Society to greet the people and also to have Dr. Donald B. Koonce, President of the State Medical Society to give "greetings" at the beginning instead of holding this for the closing. Page 2.

5. Mr. Aubrey D. Gates, Field Representative for the A. M. A. Council on Rural Health was suggested for giving the closing challenge for the day's program and to project our thinking into "Where Do We Go From Here?" This will be the main keynote address.

6. In order to get in as many different community programs as possible, it was decided to have one session given to community reporting by the leaders, as examples of what type of rural community health projects and programs are being carried out and pointing up the ways and means for other communities to attack their own health problems.

7. The subject of the supply and demand for health and medical personnel here in the state was also discussed and it was recommended that we give some time for this topic...by having a leader and a panel of resource persons to briefly discuss each of the following disciplines...physicians, dentists, public health, and nursing. Dr. L. M. Massey was recommended as the leader for this panel.

8. Health agencies will again be asked to exhibit at this one day conference and provide materials for distribution.

9. A publicity committee will be appointed and asked to assist in encouraging attendance. Every effort will be made to get representation from as many groups and organizations interested in health improvement as possible.

The committee meeting adjourned at 9:00 p.m.

Respectfully submitted: *Annette S. Toectwell* Annette S. Boutwell, (Mrs.) Rural Health Consultant Medical Society of the State of North Carolina

ASB:nw

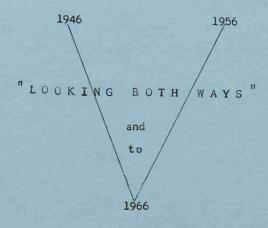
TENTATIVE CONFERENCE PROGRAM

9:00 - 9:30 a.m.	Registration
9:30 - 9:50 a,m.	Opening Session Conference Chairman presiding Group Singing Invocation Welcome: Dr. Earl Brian, President, Wake County Medical Society; Dr. L. M. Massey, President, Wake County Dental Society Greetings: Dr. Donald B. Koonce, Presi- dent, Medical Society of the State of North Carolina Response: Dr. W. W. Washburn, Chairman, Rural Health Committee
9:50 - 10:20 a.m.	"The Role of the Physician in the Community" Layman Physician Example of cooperation
10:20 - 10:30 a.m.	BreakVisit to the Dairy Bar
10:30 - 12:00 noon	"Community Efforts in Health Programs" Reports given by various community leaders on local programs such as: Sanitation (rural garbage collection) Community home for the aged (Lasker community Farm and home safety fair (Haywood County) Hospital insurance enrollment Youth health activities Group Discussion to learn of other community health activities
12:00 - 1:30 p.m.	Recess for Lunch
1:30 p.m.	Film showing "4-H Health Film" Presentation: Mr. L. R. Harrill, State 4-H leader
2:00 - 3:00 p.m.	"Training Opportunities and Employment Needs for Health and Medical Personnel": Leader: Dr, L. M. Massey Resource Panel: Dr. W.C. Davison, Dean, Duke Medical School Dr. Henry C. Clark, Div. of Health Affairs, Chapel Hill Dr. Dave Smith, Duke School of Medicine Miss Vivian Culver, Ex. Sec., Board of Nursing Examiners Dr. M. B. Bethal, Health Officer, Charlotte Dr. Horace K. Thompson, Pres., Dental Society
3:00 - 3:30 p.m.	"Where Do We Go From Here?" Mr. Aubrey D. Gates, Field Representative, A. M. A. Council on Rural Health
3:30 p.m.	Announcement as to District Conferences
Adjournment:	in 1957: Dr. W. W. Washburn

10th annual

State Rural Health

Conference



Sir Walter Hotel Raleigh, N. C.

October 2, 1957

ADVISORY COMMITTEE MEMBERS

Dr. L. M. Massey, Chairman, N. C. Dental Society Dr. R. D. Higgins, N. C. State Board of Health Dr. E. G. McGavran, State Health Council Dr. John M. Mewborn, Academy of General Practice Miss Vivian Culver, N. C. State Bd. of Nursing Examiners Dr. E. A. Brecht, School of Pharmacy Mr. S. K. Hunt, N. C. Hospital Association Mrs. Robert N. Creadick, N. C. Medical Auxiliary Dr. Verne S. Caviness, N. C. Parents and Teachers Association Mr. David Weaver, Agriculture Extension Service Miss Ruth Current, State Home Dem. Agent Mrs. Rachel Ferguson, Nutrition Specialists, Agri. Extension Service Mrs. Irby Walker, N. C. Farm Bureau Mrs. Jesse Yates, N. C. Farm Bureau Women Mr. Will Rogers, N. C. Farm Bureau Mr. Harry Caldwell, N. C. State Grange Mr. Morris L. McGough, Agriculture Development Council Rev. Garland A. Hendricks, Wake Forest Seminary Mr. J. W. Crawford, Agriculture Extension Service Miss Frances Alexander, Progressive Farmer Mr. Ned Champion, "Finer Carolina Contest" Mr. Henry M. Milgram, State County Commissioners Associations LMrs. G. T. Spivey, Home Demonstration Federation Mr. A. G. Bullard, Vocational Agriculture Mr. Charlie Spencer, School Health Service, Department of Public Instruction

TENTH ANNUAL

STATE RURAL HEALTH CONFERENCE

"Maruing Fick-Up" 4-Courtesy of North Cerolins Dairy Freducts Association and Jance Inc. To deltay Maida, North Caroline Depart-

OpenirgMHT ston: "The Look Backward" Numb A. Matthews: McDue Presiding

"LOOKING BOTH WAYS"

Invocation: Rev. W. W. Finistor, Easter M. M. Memorial Septier Church

Sir Walter Hotel Raleigh, North Carolina October 2, 1957

3130 - 11:30 A.M. "Progress Made in Defter Pealth and Medical Care Services, Edilities at Programs", Fred C. Hubbard, M.C. North Willesburg, N.C. (First Chris.

inclusion of Realth and Education

Washburn, M.D., Boiling Springs, M. (nember of the A.M.A. Commonl on Atural Health)

Sponsored by: Committee on Rural Health and Education Medical Society of the State of North Carolina

Lunchean Intermission

12:15 = 2:00 P.M.

48.A 06:01 - 00:01

PROGRAM

9:30 - 10:00 A.M. Reg	istration: Miss Mary Ann Currin Mrs. Phyllis English
"Mørning Pick-Up" - Høstesses:	Courtesý of North Carolina Dairy Products Association and Lance Inc. Dairy Maids, North Carolina Depart- ment of Agriculture
10:00 - 10:30 A.M.	Opening Session: "The Look Backward" Hugh A. Matthews, M.D., Presiding
Invocation:	Rev. W. W. Finlator, Pastor Pullen Memorial Baptist Church Raleigh, N. C.
Welcome:	Edward W. Schoenheit, M.D., President Medical Society of State of North Carolina, Asheville, N. C.
Response :	Mr. Edwin Gill, Treasurer, State of North Carolina
10:30 - 11:30 A.M.	"Progress Made in Better Health and Medical Care Services, Facilities and Programs" - Fred C., Hubbard, M.D., North Wilkesboro, N.C. (First Chair- man of the Medical Society's Com- mittee on Rural Health and Education)
11:30 - 12:15 P.M.	"The Doctor's Black Bag" - W. Wyan Washburn, M.D., Boiling Springs, N.C., (member of the A.M.A. Council on Rural Health)
Assisted by:	Mrs. Rosanne Green, Rex Hospital Miss Frances Alexander, Assistant Editor, Progressive Farmer
12:15 - 2:00 P.M.	Luncheon Intermission
- Expert is a man w look on his face wh	learing a tie in the a surple

Rear VISION MIRROR means the most to us - in a car.

AFTERNOON SESSION

2:00 - 3:30 P.M. "THE FORWARD LOOK"

Introduction of guest speaker --- Dr. L. M. Massey, Zebulon, N.C.

Guest Speaker: "The Forward Look" - Mrs. Charles W. Sewell, American Farm Bureau, Otterbein, Indiana

Reactor Panel: "The Goals and Objectives for a Total Community Health Program"

> Members: Mr. Røbert J. Putnam, Asheville, N.C. Industry

> > Mr. E. Y. Floyd, Raleigh, N. C. Farm Organizations

Mr. Charles Phillips, Greensboro, N. C. Schools

Rev. Donald G. Myers, Reidsville, N. C. Churches

Moderator: Hugh A. Matthews, M.D., Canton, N. C. Medicine

3:30 p.m. Summary: Dr. Hugh A. Matthews, Chairman, Committee on Rural Health and Education

Announcements:

Adjournment:

- NOTES -Next 10 years while any in a constant of the second second to the second 1. Mare maining statutes 2. The family doctors. 3. Pilotianship bituren all groups of feorle-monstening. 4. Better Pocel schools- between mines training 5- More stress on treventive measures 6. Problems of the aged. Have need attitude Towards aller pieche. 7. More playible hatirement for 65 yr. ale -Hedriest look is when you here nothing to carvy 8- more appearation for deutal care-9. Dapety programs too many accilentation 10- Mussters programs - seculous healing 11- Food industries coming to the ghost demand 12. Interestical phases with nural health-13. Continue program stroopstaf insurance-14. Revamp some Trusurance Programs. 15. Jose and heal the are national defense. More can buy a back of matchay with a party and start an augul by fire.

1957 RURAL HEALTH CONFERENCE COMMITTEES

10th ANNUAL RURAL HEALTH CONFERENCE CHAIRMAN Hugh A. Matthews, M.D., Canton, North Carolina

SPECIAL PROGRAM COMMITTEE: Dr. Paul F. Whitaker, Chairman Dr. Fred C. Hubbard Dr. Rachel D. Davis

PUBLICITY COMMITTEE: William N. Hilliard, Chairman

DAIRY BAR CHAIRMEN:

Mr. Llovd Largdon, N. C. Dairy Products Assoc. -Miss York Kiker, N. C. Dept. of Agriculture Dairy Maids: Mrs. Doris Chalifour; Miss Yvonne Creech: Miss Betty Woodruff Mr. B. B. Dean, Lance Incorporated COMMITTEE ON RURAL HEALTH AND EDUCATION: Hugh A. Matthews, M.D., Chairman, Canton, N. C. William A. Hoggard, M.D., Elizabeth City LR. Vernon Jeter, M.D., Plymouth John W. Nance, M.D., Clinton B. E. Stephenson, M.D., Rich Square Marion B. Pate, Jr., M.D., St. Paul James Donald Bradsher, M.D., Roxboro William F. Eckbert, M.D., Cramerton Henry B. Perry, Jr., M.D., Greensboro Charles M. Kendrick, M.D., Lenoir Phillip E. Dewees, M.D., Sylva Rachel D. Davis, M.D., Kinston (Consultant)

MEMO TO: Committee on Rural Health and Education; County Chairmen; and Advisory Committee members.

FROM: Annette S. Boutwell

SUBJECT: Summary of the 10th Annual State Rural Health Conference

The theme of the 1957 State Rural Health Conference: "Looking Both Ways" stated the purpose and the summary of this anniversary conference. Dr. Fred C. Hubbard gave a review of the progress made in health and medical care services, facilities, and programs over the past ten years which highlighted the study reports prior to the 1945 General Assembly legislative actions; the creation and work of the Medical Care Commission; expanded training programs for needed personnel; increased prepaid hospital insurance; and new public health programs since 1946-47. A copy of Dr. Hubbard's report is attached to this report.

In the afternoon, Mrs. Charles W. Sewell of Otterbein, Indiana, national Farm Bureau leader and outstanding for her leadership in rural health programs, gave the featured address: "The Forward Look". Mrs. Sewell emphasized the following major points for us to consider now and the years ahead: 1. increased training of general practitioners for rural America 2. better understanding and improved relationships between all groups all working towards a better and safer standard of living; improved schools for all students so that the selection of professional talents will be broaden 3. improved schools in both urban and rural areas so that more students will have improved basic learnings for professional training programs. 4. more emphasis given to preventive health measures for individual, family, and community protection 5. we must develop a new attitude towards older people-they too must continue to carry their share of the load. A direct quote being: "the heaviest load to carry is to carry nothing at all." We all must learn to grow older and accept its responsibilities and limitations. Mrs. Sewell pointed out the need to reduce the involun-tary retirement of older people. At the age of 76, she said people are as old as they want to be, regardless of age 6. more appreciation for dental health--not so much dental care--preventive dentistry is the challenge of the future. 7. safety on the farm is becoming an increasing problem. The new techniques of farming today create additional hazards and caution must be stressed along with operation and production. 8. closer cooperation between the ministry and medicine. Physical health cannot be separated from the spiritual or emotional well-being 9. industry is placing new demands upon agricultural trained personnel. The demand for farming is decreasing but not the demand for agricultural training and professsons. 10. the increasing population places an ever increasing demand for food. There is no substitute for the production of food. The farms must produce more and more on less and less land. The farmer is still the key person in this production line. 11. we can no longer take care of just our own----international health needs are reaching at our door steps for help. We must provide for our foreign neighbors--food, medical serve ices, and our wealth of knowledge, skills, and techniques for mass production.

Page 2

In closing, Mrs. Sewell pointed out that the Farm Bureau initiated the prepaid health insurance program but as we look ahead, this too, needs some revamping to meet the present day and future needs in meeting the costs of medical care. Her closing remark was "Food and Health are our National Defense".

We began in 1945 with a three point health and medical care program: more physicians, more hospital beds, and more prepaid hospital insurance. In 1957 we look to a 12 point program as outlined by Mrs. Sewell.

Following this main address a reactor panel representing industry, farm organizations, schools and mass educational media, and the ministry, gave its views on how these basic community groups could help health and medical leaders in developing a "total community health program". Challenged by Mrs. Sewell's "look ahead" these panel members gave their pledges to work together in meeting these new objectives in North Carolina.

Before the intermission for lunch, Dr. W. Wyan Washburn gave his illustrated talk on "The Doctor's Black Bag" which bridged the gap between medical practice some few years ago with that of today. This talk has received national acclaim and is justly due our state acclaim for its practical and human interests. A copy of Dr. Washburn's talk is also attached to this report.

In closing Dr. Hugh A. Matthews summarized the day's program reemphasizing the following needs ahead:

- 1. a coordinated program to meet the challenges of the aging and of the chronically ill.
- active investigation of causes and means of preventing home and farm accidents
- adequate program at county levels in prevention and treatment of mental illnesses
- 4. presistant program of finding ways and means of coping with the costs of medical care. This might include: (immunization against preventive illness; better utilization of the physician's time; more and improved prepaid health insurance; better understanding and appreciation of medical care; and the awareness of the high cost of self-diagnosis and self-medication)

It was a full day's program crammed full of valuable information and stimulated the audience with new ideas and challenges to last the next ten years. We looked both ways--backward and forward--and as Dr. Matthews closed the program on October 2nd, I will close this review: "We have just cause to take our hats off to the past and our coats off to the future."

At 4:00 p.m. a joint meeting of the Advisory Committee and the Medical Society's Committee was held in the Manteo Room of the Sir Walter Hotel. A prepared agenda was followed and this report will highlight the proceedings of this two-hour session. Trend for future conferences: The group expressed themselves in favor of annual district rural health conferences and county conferences with less emphasis on State Conferences for general attendance. They did stress the need for some type of state-wide planning group to study the problems and make recommendations for programming district and county conferences.

No definate action was taken at this time but will be decided at a later date.

- Announcement of 1958 District Conferences: Following the action taken last year, district conferences will be held in January and February in Districts 1, 3, 5, 7, and 9. Further details on these programs will be announced after planning meetings are held in November. The Advisory Committee will be called into specific action for these meetings.
- Reports were given by Dr. Eckbert, Matthews, and Dewees on the September county chairmen group meetings in their districts. Other districts will hold similar group meetings in October and November, so stated by the Committee members.
- 4. A special project report was given by Dr. Jones, enthomologist from N. C. State College and Dr. Jeter of Plymouth, chairman of a sub-committee, on poison control and education. This is to be a two-pronged project, one for physicians and the other for lay people. An attempt will be made by this group to secure copies of the "Clinical Memoranda on Economic Poisons" for all general practitioners, pediatrians, and internal medicine men as a quick reference to many of our newer poisons being used today on our farms and in our homes. The second project is to prepare for lay distribution a chart of the most common household and farm poisons giving the "first aid" or emergency home antidote as an intermediary until medical care is available. This group approved these two projects and asked the sub-committee to continue its work as a cooperative program between the Medical Society, the State Board of Health and the Agriculture Extension Service.
- 5. Reports on local activities and programs were given by members present. The Gardner-Webb College and Haywood County Health and Safety Fairs; Jackson County's third annual county rural health conference; and Washington's County survey being made by the home demonstration women. The Farm Bureau told of their three specific health projects being conducted by the Women's Committee, namely: 1. distribution of the personal identification card 2. the safety stickers for their cars 3. a special heart fund to be given to our three medical schools for research. The Farm Bureau is planning a "Better Breakfast" campaign beginning in January 1958. This is to be a national health project for all Farm Bureau groups. A sample of the personal I. D. card is enclosed for your information.

- 6. Dr. Washburn and Mrs. Sewell reported on the recent A.M.A. Council on Rural Health meeting held in Chicago. The poison project is one which was stressed at this meeting and they were pleased to know that N. C. was giving special emphasis to this phase of safety education. More attention was encouraged for local level action and programming. Again, they agreed with the interest of this group in sponsoring more district and county conferences and activities.
- 7. An announcement was made as to the October 23-25 Rural Development Conference in Asheville. This Committee was asked to have representation at this meeting. The A.M.A. Council is encouraging state and county medical society participation in this community and low income group improvement program.
- 8. The date and location of the spring committee meeting will be given at a later date.

Community Development Contests:

This is the time of year that many of our counties are being judged as to

their accomplishments for 1957. If you wish to know what has been done health-wise in your county, contact your farm and home agents as they will have all of the community reports. For evaluation of progress this is an excellent source for information which you should have about your county. The area judging will be done in November so you will know the top winners in each contest area. These reports will give you key leaders in your county for contact purposes.

Sincerely yours,

annette S. Boutwell

Annette S. Boutwell Rural Health Consultant

ASB:mac

Enclosures

MEMO TO: Advisory Committee Members

- FROM: Hugh A. Matthews, M. D. Chairman, Committee on Rural Health and Education, Medical Society of the State of N. C.
- SUBJECT: Joint Meeting on October 2nd, Sir Walter Hotel, Manteo Room at 4:00 p.m.
- DATE: September 9, 1957

You have been given the date of October 2nd for the 10th Annual State Rural Health Conference to be held at the Sir Walter Hotel in Raleigh. We are especially anxious to have all of you present for this one-day meeting as it is a mile-stone evaluation of the progress made the past ten years in health and medical care improvement and most important a look ahead to the next years and what problems still face us - new and old. We hope you will give this conference wide publicity to your groups and component organizations.

Many of you know Mrs. Charles Sewell, American Farm Bureau Women's leader, and we are honored to have her as our featured speaker for the afternoon program with the "The Forward Look" as her topic. We know of no one who could give us the thinking of so many leaders throughout the nation or one who can state this challenge more effectively and realistic than Mrs. Sewell - known to us as the "mama" of rural health improvement for farm families. Mrs. Sewell will join us for our joint session following the day's program.

We have some new members of our Medical Society's Committee on Rural Health and Education and we have a few new members of our Advisory group, so we do want to meet together at 4:00 p.m. in the Manteo Room of the Sir Walter Hotel for a summary session following the Conference. We will also discuss plans for the 1958 District Rural Health Conferences which will be held in January and Februray in Districts 1, 3, 5, 7, and 9. This is an area in which we need your help to determine locations; program topics; speakers, and attendance. You helped so much this past year with our district meetings and we are requesting your help again.

This meeting should adjourn by 6:00 p.m. so that you can get away before too late. We are most appreciative of your interest, support, and cooperation in this important program for the people of our state. Through your leadership and organizations, the progress that will be reported at the morning session on October 2nd would not have been made possible, still we have much more to do the next ten years and this will be determined by the support and cooperation of the groups you represent. <u>Remember the time</u>: 4:00 p.m. in the Manteo Room, just at the back of the lobby, for our joint committee meeting on October 2.

Respectfully submitted,

allews

Hugh A. Matthews, M. D., Chm. Committee on Rural Health & Education

	h ANNUAL STATE RURAL HEALTH CONFERENCE tentative program DCTOBER 11, 1956 SIR WALTER HOTEL RALEIGH, NORTH CAROLINA
9:009:30 a.m. 9:309:50	Registration Opening Session Alonzo C. Edwards, Conference Chairman presiding Group Singing Invocation: Welcome: Dr. Earl Brian, President, Wake County Medical Society Dr. L. M. Massey, President, Wake County Dental Society Greetings: Dr. Donald B. Koonce, President, Medical Society of the State of North Carolina Response: Dr. W. Washburn, Chairman, Rural Health Committee
9:5010:20	"The Role of the Physician in the Community" Layman Physician
10:2010:30	"Community Efforts in Health Programs" Reports given by community leaders Rural SanitationCedar Mountain Community, Transylvania County, Mr. Ralph Lee, President Community Home for the AgedPotecasi, N. C. Rev. J.B. Dailey, Jackson, N. C. Farm and Home Safety FairHaywood County Safety Committee. Hospital Insurance Enrollment Group Discussionled by Dr. Selz Mayo, N.C. State
10.00 1.00	College
12:001:30 p.m.	Recess for Lunch
1:30	Film showing "The 4th H is the Health H" Presentation: Mr. L. R. Harrill, State 4-H leader Mrs. Murl Swicegood; Dr. Bennett
2:003:00	"Training Opportunities and Employment Needs for Health and Medical Personnel" Leader: Dr. L. M. Massey Resource Panel: Dr. W. C. Davison, Dean, Duke Medical School Dr. Henry C. Clark, Div. of Health Affairs, Chapel Hill Dr. M. B. Bethal, Health Officer, Charlotte, N. C. Miss Vivian Culver, Ex. Sec., Board of Nursing Exam. Dr. Horace K. Thompson, President, Dental Society Wilmington, N. C.
3:003:30	"Where Do We Go From Here?" Mr. Aubrey D. Gates, Field Representative, A.M.A. Council on Rural Health, Little Rock, Arkansas
3:30	Announcement as to District Conference for 1957 Dr. W. W. Washburn
	Adjournment:

North Caroline State College of Agriculture and Engineering, North Carolina Counties and United States Department of Agriculture Cooperating COOPERATIVE EXTENSION WORK In Agriculture and Home Economics State of North Carolina

Extension Service Office of Director.

Post Office Box 5157 State College Station, Raleigh, N. C.

November 4, 1958

Mrs. Annette S. Boutwell Rural Health Consultant 203 Capitel Club Building Raleigh, North Carolina

Dear Mrs. Boutwell:

You have my permission to invite our District Agents to attend and participate in the "Community Heelth Workshop" Conference being sponsored by the Medical Society of North Carolina. This conference is scheduled for November 21 and 22, at the Sir Walter Hotel. The Workshop sessions are being held on Friday, November 21 from 10:00 a.m. to 1:00 p.m.

Miss Current informs me that she told you that November 21 is the date of a seminar at the Woman's College in Greensboro, which may affect the attendance of some of the District Agents.

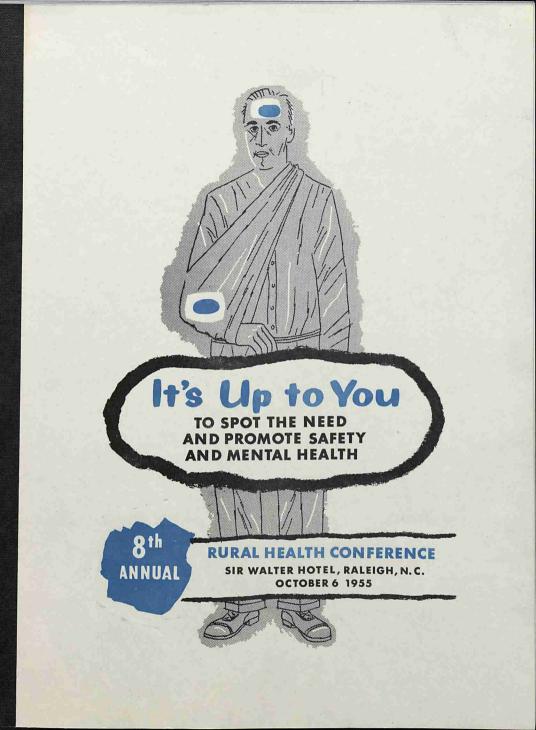
Sincerely yours,

David S. Heaner

David S. Weaver Director

DSW: gh

cc: Ruth Current Nell Kennett R. W. Shoffner C. B. Ratchford District Agents (White and Negro) R. E. Jones Mrs. Minnie Brown



MEPTHAL > O CIER Y

EIGHTH ANNUAL RURAL HEALTH CONFERENCE

Proceedings

Theme - "It's Up To You"

Hotel Sir Walter, Raleigh, North Carolina October 6, 1955

> Sponsored by Committee on Rural Health Medical Society of the State of North Carolina

MEDICAL SOCIETY OF THE STATE OF NORTH CAROLINA

January 3, 1956

MEMORANDUM:

To: Attendants of 8th Annual State Rural Health Conference.

From: W. Wyan Washburn, M. D., Chairman, Rural Health Committee, Medical Society of the State of North Carolina.

This is a "digest" report of the Eighth Annual State Rural Health Conference which was held in Raleigh at the Sir Walter Hotel on October 6, 1955.

The two topics for discussion were Farm and Home Accidents and Mental Health. We are most appreciative of the cooperation and support given this Conference program by Medical, Health, Agriculture Extension, Farm Organizations, Schools, and many other voluntary community groups who were represented at this Conference and through these leaders information received will be transmitted all over the state of North Carolina.

We are indebted to all of the program participants, resource persons, the Raleigh Little Theatre group, the Advisory Committee, the State Rural Health Committee, and members of the Medical Society of the State of North Carolina.for their cooperation.

The Conference theme, "It's Up To You", had a personal impact as to our individual and collective responsibility in studying our own local accident and mental health problems and working together for better solutions and effective results.

Our registration shows the following:

A total of 310 persons registered. (More were present but didn't register).

Fifty (50) counties were represented, according to the registration slips and map spotting.

(Continuation of Memorandum)

Forty-three (43) different agencies, organizations, and professional were represented with Home Demonstration Club members again leading the count in number.

A total of sixty-four (64) evaluation sheets were submitted, showing nineteen (19) having attended other Conferences, either State or Regional; forty-five (45) indicated they had not attended previous Conferences.

Respectfully submitted:

W. Wyan Washbury,

W. Wyan Washburn, M. D. Chairman, Committee on Rural Health

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Following the Manuar's bolison, or Mania are calls stretched to each individual present to Late the message back to bis dependent and community, because Is to Up to You; then initialists in the State M. Cateron, Jr., Director of the Americant Prevention declared of the State Sound of Health, who messions over the because a state Dr. Charles h. Cameron, Jr. Report on the three-county main fatel scates the three-county main fatel scates the three-county main fatel scates and the survey summation fatel scates and survey summation

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Eighth Annual State Rural Health Conference Sir Walter Hotel Raleigh, North Carolina October 6, 1955

The Eighth Annual State Rural Health Conference, which was held at the Sir Walter Hotel on October 6, 1955, opened at 10:00 a.m. with Dr. W. Wyan Washburn, Chairman of the State Rural Health Committee presiding.

WELCOME: Honorable Fred B. Wheeler Mayor of Raleigh "This is a great pleasure and an honor to welcome such a fine group of people to the capital city. Your

theme for this conference, "It's Up To You", impresses me very much. That sounds so much better than to say "I'll Do It For You" like so many folks say, and it shows that you stand for something and will speak right out and state what you will do about your own health problems. I believe in letting every fellow help himself. Health is one of the greatest assets a human being can have. When any person tries to help you preserve this precious thing, then we are bound to admire that person or that organization."

The KEY to the CITY is given Dr. Washburn by Mayor Wheeler as a symbol of hospitality.

Following the Mayor's Welcome, Dr. Washburn calls attention to each individual present to take the message back to his organization and community, because It Is Up To You; then introduces Dr. Charles M. Cameron, Jr., Director of the Accident Prevention Section of the State Board of Health, who presides over the morning session. Dr. Charles M. Cameron, Jr. Report on the three-county nonfatal accident survey conducted during July and August. "During recent years, accidents of all types have received increasing recognition as a serious health prob-

lem in the United States, annually taking the lives of thousands of

persons, temporarily or permanently crippling millions, and costing billions of dollars in medical and hospital expenses, lost income, property damage, and insurance costs.

Several factors have been associated with the growing concern for community accidents by medical and health officials, representatives of industry and commerce, professional and voluntary agencies, many branches of government, and the lay public in general. These are:

(1) As interest in accidents as a community problem has grown, greater time has been devoted to observing and recording accidents throughout the United States. As more people have become interested in accidents there has come to light more information not only about the numbers of accidents, but also some of the basic information as to who experiences the accidents, where they happen, and perhaps some of the how's and why's of accidents.

(2) As certain of the contagious diseases have been reduced in frequency through improved medical and public health methods, the relative importance of accidents as a health problem has increased. At the beginning of the century accidents ranked very low in importance as a cause of death because tuberculosis, diphtheria, pneumonia and other conditions were taking so many lives, but, fortunately, many of these conditions have been brought under control and now in most States and counties, accidents rank as the fourth leading cause of Geath, secondary in importance only to the major degenerative diseases, health and blood vessel diseases and cancer.

(3) The tremendous technological developments of the twentieth Century have been mixed blessings and many of the modern developments Of our age have served to introduce new hazards into our everyday living. This statement applies not only to motor vehicles and farm Machinery but also to the vast array of electrical and mechanical

-2-

time-saving devices upon which we rely so heavily. It applied equally to the host of chemical agents--medicines, cosmetics, household cleaning agents, pesticides, and others---which are found in most every home and farm in our state. The potential for accidents has been increased tremendously.

All of us here today are aware that generally, with certain very notable exceptions, the accident problem in the United States has not been effectually controlled. Part of this failure has been due to the fact that accidents have not been considered in the entirety, and only certain parts of the total community safety problem have been explored. This has been brought about through special funds or interests which have fostered special emphasis on certain types of accidents. Part has resulted from the dramatic appeal inherent in certain classes of accidents of those accidents experienced by special groups in the community.

Seldom has it been observed that a community has looked at its entire accident experience--highway, home and farm, industrial, recreational---and tried to apply program activities to the areas of greatest need. This has not been the fault of the states and communities because information about the community's safety problem has been hard to obtain. Information showing the number of fatal accidents of all types has been the most comprehensive available. There has been a growing suspicion that the accidents which cause the most deaths may not be causing the most total sickness in the community or representing the greatest drain on the economic resources of the people.

It is my privilege to report on a study conducted here in North Carolina which amply bears out this conviction. Death statistics clearly indicate that motor vehicle accidents causes the greatest

-3-

number of accidental deaths in the state, with home and farm accidents killing the second largest number and recreational accidents taking the third largest number of lives.

Exact information as to the number of injuries with temporary and permanent disabilities resulting from these different types of accidents has not been available. To better define the total community experience with all types of accidents. the N. C. Medical Society. working through its Rural Health Committee, was assisted by three North Carolina counties in a study of non-fatal accidents occurring during July and August of this year. The three counties were Sampson. Jackson, and Cleveland. The program was established by soliciting the comperation of the local medical society in asking the individual members to report a few facts about all non-fatal accidents treated in their offices and clinics during the two-month period. These reports were made on specially designed cards and were forwarded to the Medical Society office here in Raleigh. The Accident Prevention Section of the State Board of Health participated in the survey by the tabulation and analysis of the data collected.

The response and cooperation of those concerned with this study has been most gratifying. Over 60 percent of the total members of the medical profession in the three counties took part in the study and accident data was also compiled by dentists, public health nurses and members of the Farm Bureau, Grange, Home Demonstration Club teachers and members in a position to know of persons injured in accidents.

Very briefly, here are some of the findings of the survey as illustrated in some slides:

Non-fatal Accident Survey 3 N. C. Counties 40% Physician Reporting July and August, 1955 Total Population 137,000 No. Accidents Reported 535 Rate: 1 Accident/43 persons/yr.

-4-

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MAJOR TYPES OF ACCIDENTS		HOME AND	FARM ACCI By Age	DENTS		
<u>Type No. %</u> Home 228 42.5		Age	by nge	No.		
Occupational 119 22,5		0-1 1-4		3 69		
Recreational 77 14.3	5-14 108 15-24 23					
Farm 63 11.7		25-44 45-64		45 25		
Highway 48 9.0		65 Plus		14		
Totals 535 100.0						
HOME AND FARM ACCIDENTS By Sex and Race	HOME AND FARM ACCIDENTS By Type					
Male <u>W C</u> I	lotals 168	Cuts Falls		No. 100	% 34.3	
Female 109 10	119 287	Falling Obj Burns Poisons Gunshot Other	ject	79 25 10 6 1 70	27.2 8.5 3.3 2.5 0.2 24.0	
		*Includes 4	, sex not	291 * known.	100.0	
HOME AND FARM ACCIDENTS By Location	Non-Fatal Accident Survey Cleveland County, N,C. July and August, 1955					
Yard 127 45.		Physicians Reporting			30%	
Kitchen 38 13. Field 32 11.	5	Population	ant director at		60,034	
Barn 24 8. Porch 20 7.	2	No, of Acci	dents		180	
Living Room 15 5. Bed Room 13 4. Bath Room 6 2. Basement <u>3 1.</u> 278 100.	7 2 0_	Rate: 1 Accident/62 persons/year.				
Non-Fatal Accident Survey Sampson County, N. C. July and August,1955	Non-Fatal Accident Survey Jackson County, N. C. July and August, 1955					
Physicians reporting 54%	1 600	Physicians	reporting		50%	
Population 50,	774	Population			19,223	
No. of Accidents 217	No. of Accidents			139		
Rate: 1 accident/39 persons/year. Rate: 1 accident/23 persons/year.						

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Some persons may be hesitant to attempt to draw extensive conclusions from a survey of this type which admittedly is limited in scope and content. But there is justification for some conclusions:

(1) That in addition to the deaths from accidents in these three counties, non-fatal accidents are occurring frequently, at least as frequently as indicated in these figures and probably at an even higher rate.

(2) That accidents in the home and on the farm constitute the mos frequent type of major accidents occurring in these counties which results in temporary or permanent disability. From this information, one may include that highway accidents occur less frequently than do other accidents, but that the injury may be more severe resulting in either immediate death or in hospitalization. Fatal accidents in the home and on the farm occur only slightly less frequently (there were 7 deaths in the home and farm for each 10 deaths on the highway throughout the state last year) than on the highway, but that nonfatal occur more frequently in the home.

(3) That cuts and falls represent the most frequently observed type of accident in the home and on the farm.

(4) That the yard and kitchen are the most dangerous areas of the home in reference to home accidents, but that the barn and the fields also represent major hazard areas.

(5) That these accidents appear to follow other accident studies in that they are most frequently observed in men. The racial distribution of these counties is too widely distributed to make any sort of comparisons.

(6) That 65 percent of the non-fatal accidents were observed among children under 15 years of age. From other studies, it is known that a high percentage of fatal home accidents involve children.

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From these conclusions, one may suggest that in these counties which are in many ways typical of other counties in the state, home and farm accidents are the major safety problem in terms of injury. Safety activities should be pointed toward the home and particularly toward those with responsibility for the safety of children since over two-thirds of the accidents involved the age groups of childhood. Focus must include the parents due to the high incidence in pre-school children.

It is the fervent hope that other North Carolina counties will kindle a small blaze from the bonfires which have been set in these three counties and that in the light of factual knowledge as to the areas wherein the greatest safety problems lie, we may all move forward in making this state not only a healthier, but also a safer place in which to live."

Mr. Maynard Coe Director, Farm Safety Division National Safety Council Chicago, Illinois "I have been favorably impressed with the excellent effort that is being made by the Medical Society of

North Carolina and this study that Dr. Cameron has presented. It's significance is tremendous, more than most of you may realize.

Agriculture is a basic and sizable industry. The prevention of accidents in agriculture therefore becomes one of the basic problems of this country. Some of us can remember back when there was a popular song that went something like this: "I wish and wish again that I was back in Michigan, safe on the farm, free from all harm." While this song expressed a beautiful sentiment, the writer was either uninformed or deliberately ignoring the facts, and the facts are that 14,000 members of farm families are killed annually as a result of accidents and more than a million are injured. There are 3800 farm workers killed on the job by accidents in agriculture. This occupation leads all the industrial groups in the number of workers killed and stands third from the top in the rate of accidents, and becoming the most hazardous industry. When we see agriculture with five times the fatality rate of our manufacturing firms, we began to realize the great need that exists in this field. Some of the factors have been determined as: (1) multiple exposure ---farmers are engaged in a wide variety of operations so that no farmer becomes highly proficient in the execution of them all. He operates many different machines during the year. He fails to acquire that degree of proficiency in the operation of equipment that comes by the industrial or factory worker who operates the same machine day after day. The second factor (2) is uncontrolled power ---- too few farmers realize the importance of controlling power on the farm. Today agriculture production is dependent upon the use of vast amounts of power and units ranging from a fractional horsepower motor on his drill press to units with hundreds of horsepower found on his heavy equipment. The control of this wide range of power and under a wide range of situations is dependent upon the knowledge, training, and skill of the farm operator, which is the third factor: (3) lack of training ----agricultural workers learn from others; they learn their bad habits as well as their good. They learn by experience and experience is a good teacher, but this statement applies to this: "You better learn from mistakes of other people; you won't live long enough to make them all yourself." The fourth factor, (4) is lack of supervision ---- I think here is where we get the widest deviation of safety problems of all other agencies. We often hear complaints from agencies about the small operator who is not doing a good safety job, and as a result is keeping the accident rate in their industry higher than it would be if they could get rid of that small operator or get

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him to do a good safety job. The smaller the unit, within industry, the greater the problem, Agriculture is made up of many small units so that the job of motivation in training and supervision is a different one than that found in most other industries. At this point is a lack of safety promotion, number five factor (5). The National Safety Council is holding its 43rd National Congress week after next. with an expected attendance of 12,000 with over 300 different sessions, so you see safety is a big business, and I mention its being the 43rd Congress to indicate that some form of safety in this country has been going on for many years. While history shows that industry has been interested and active in safety, it was not until 1944 that agriculture began to receive any organized attention. A few states had made a start by organizing state farm safety committees - Kansas. Ohio, Minnesota, to name the first, but it was 1944 before the National Safety Council decided to give some organized effort and assistance in farm safety. How can this picture be changed from bad to good? The three E's - enforcement, engineering and education were set forth as possible aids. There probably is some place for minor legislation in agricultural safety, development of certain codes which have been proved of value, but this is probably the limit of enforcement that you can expect in agriculture. Engineering-wise, a great deal of improvement has been made by the manufacturing companies of farm equipment and machinary, but to get the farmer to use these safety guards and avail himself to better safety engineering, is largely an educational problem. It all adds up to a definite conclusion that the solution to the farm safety problem is largely educational. What opportunities are available? Vocational agriculture and 4-H clubs under the leadership and guidance of well-trained teachers and leaders; another important channel - the Agriculture

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Extension Service of state universities, which is a natural channel for reaching our farm population; I also want to mention our major farm organizations such as the Farm Bureau and the Grange. Health departments, Medical Societies, Women's groups, are interested, too, in a more organized effort to do something about agriculture safety. I would particularly like to bring to you one effective pattern that has been developed; namely, a state farm safety committee. A typical committee might be made up of representatives of all major farm organizations; Agriculture Extension , usually taking the lead, State Department of Agriculture, Vocational Agriculture, Farm Equipment organizations, electric companies, insurance companies, soil conservation, women's organizations, health and medical groups, and all others having a definite interest in farm safety and welfare. A group like this can give and receive action - 1. stimulate each group represented to do the best safety educational job within its own members and through its own channels. 2, ability to plan and correlate the overall farm safety program - give prestige to it, and make people realize its importance. 3. represents a political course for new legislation or change if need be.

Under the leadership of the National Safety Council, there are now 35 states that have state farm safety committees. The usual experience is that sooner or later after a state committee becomes activated, they find the need for a fulltime person to carry on the program outlined by the committee. Fifteen states have such a full time person, usually called the state farm safety specialist. A wide variety of patterns for financing the services of such a person exists - 14 being employed by Agriculture Extension, one by the Industrial Commission, five by farm organizations, one by the State Department of Public Instruction. This number adds up to more than

-10-

fifteen, but some states have more than one. Following the pattern of organizing a state farm safety committee, the next step would be county committees with the same or similar representation, but a county committee will not be active without a strong state committee to give it backing and support.

While agriculture is still a hazardous occupation, we are on our way to solving the problem, as has been done in other industries. Progress to date is somewhat encouraging. Wisconsin, which was the first state to have a state farm safety specialist with the extension. has shown a steady decrease in farm-work deaths -- 165 in 1945 to 99 in 1954. Ohio has shown a 21% decrease in fatalities since their organized program got under way. Kansas is another state showing a downward curve in farm deaths up to 51% reduction. We know some of the answers as to how to attack this problem, but the harvest is great and the labor is still too few, so we must continue to work at getting the j ob done and we have got to stimulate others to additional effort."

Dr. L. M. Massey North Carolina Dental Society

"I bring you greetings from the Zebulon, North Carolina North Carolina Dental Society and from the Farm Bureau. Dentists.

like physicians, are interested in safety precautions and the prevention of accidents. We in our offices have various kinds of accident victims, and I don't know of anything more tragic than to have a beautiful girl, a teenager, come in with a broken tooth, or several broken teeth, as a result of an automobile accident. This is getting to be a weekly occurrence or more. It's little different with a bay or a man. While we think in the dental prefession that we have made great strides in restoring the natural look to teeth, we still have a lot of camouflage to do on serious accidents, involving restoration

-11-

of teeth. Accidents occur at any age, infants fall from chairs or other heights sometimes hitting their mouths and driving teeth up into the gums and jaw bones. In my office, we see about 20 or 30 such accidents a year. Any kind of a fall is endangering to the teeth at any age...infant, teenager, or adult. I have seen case after case of a child jabbing a pencil point up into the roof of his mouth. from having the pencil in his mouth and falling down. One case I saw recently was a child who had pulled an electric iron off the ironing board, fracturing the upper jaw and destroying two baby teeth. These and other accidents, are more prevalent than we like to admit, and we. of the dental profession, are happy to join with the medical profession in making surveys of non-fatal accidents, and we hope to see other surveys made to help give us a more exact count on the number of errors that are made and the accidents that are caused by them. Just a word about mouth guards for atheletes in high school and college. We are deliberately careless if we do not provide proper protection because with all of our know-how, we can't restore all of the accidents to the natural. We all have a responsibility to promote better safety practices and prevent accidents which will mar or handicap the individual in the future."

Mr. J. C. Ferguson Agricultural Engineering Specialist North Carolina State College "Ladies and Gentlemen. It is a pleasure to meet with you today and participate in your program.

I will confine my remarks to the farm tractor and try to demonstrate to you some of the hazards it may create when improperly handled. It will, I think, be of interest to you to consider the amount of horsepower now being used on North Carolina farms. Back in 1940 there were only 12,000 farm tractors. Today there are more than 121,000 or ten times as many as we had 15 years ago. What does this amount to

-12-

in horsepower? Assuming the average tractor to be 27 horsepower, we have about four and a quarter million tractor horsepower now at the command of North Carolina farmers.

Back in 1926 the horse and mule population reached the highest peak in North Carolina with slightly over a half a million head of work stock. Horsepower, which may be defined as 550 foot-pounds per second or 33,000 foot-pounds per minute, is based on the normal work which one horse will perform. In other words, we now have approximately eight times as much power as was available from a half million head of horses and mules.

Another figure of extreme interest and concern is the accident rate on farms today. Fourteen thousand farmers are killed annually in the United States. Nearly four thousand of these are the direct result of working accidents involving tractors, machinery, and animals. Breaking these figures down into working days, we find that approximately 38 farm people are killed daily, and statistics also show that a disabling injury occurs on the average of one every 26 seconds. North Carolina statistics indicate that 20 farm people were killed last year with tractors and machinery.

Normally we think of agriculture as being a very safe and serene way of life; however, statistics indicate that more accidental deaths occur in agriculture per capita than in any other industry.

I have before you some model tractors and a demonstration board on which I will attempt to demonstrate the ease of turning over a tractor and other hazards pertaining to the use and operation of power farm machinery.

The 4-wheel tractor or wide axel type is more stable in operation than the tricycle type or 3-wheel tractor. The center of gravity is normally lower, and the points of contact represented by the four

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wheels are more widely separated on the 4-wheel type and consequently contribute to stability. Each type, of course, has its advantages. The tricycle tractor has a distinct advantage over the 4-wheel in maneuverability but is less stable under adverse conditions, and more caution should be exercised in operating on hillsides or other extreme conditions.

All tractors have what is known as a split-braking system so that each rear wheel may be braked independently to assist in making short turns with the tractor. Such a braking system while advantageous can also be dangerous if improperly used. Due to the action of the differential in a tractor, should one wheel be stopped with the brake, the opposite wheel will double in speed. This situation ofttimes is a contributing factor in tractor roll-overs. Safe speed, proper adjustment, and use of foot brakes, along with topography over which equipment is being operated, are all very important factors in the safe operation of tractors and associated machinery.

Another hazard associated with tractors is the improper hitching of implements or other loads to the rear of the tractor. The drawbar has been standardized to a height of 12 to 14 inches above the ground, and the hitch point on the drawbar about even or slightly to the rear of the outside circumference of the rear wheel. When a load is hitched at this point, there is very little danger of the tractor overturning from its own power; however, if this hitch point is too high or close in to the axle, the tractor may easily overturn backward from the torque of the engine being applied to the rear wheels. Too many fatal mistakes are made from this one factor of improperly hitching a load to the tractor.

Even though the tractor may be safely hitched for level operation, the same hitch on a steep forward incline may be fatal.

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With the demonstration equipment I will now attempt to demonstrate the several conditions under which tractors overturn which frequently cause disabling injuries or fatalities:

A. Tipping on Incline, Tricycle vs. 4-Wheel Tractors.

1. Comparison of stability on slope.

2. Improper use of brakes.

3. Obstructions.

4. High speed.

B. Tractor Overturning to the Rear.

1. Proper vs. improper hitching.

2. Correct drawbar position.

3. Dangers under heavy load.

C. Tractor Stuck in Ditch.

1. Use of chains, logs, or other traction devices.

2. Effect of torque, forward vs. reverse gear.

3. Safer to be towed out.

D. Tractor on a Ramp.

1. Dangers when driving tractor forward.

2. Safer to go up in reverse.

E. Summary.

Tractors are a most essential tool to agriculture, but pack a tremendous amount of power for their size and weight, and consequently must be handled with caution and awareness of their potential dangers F. Major Contributing Factors to Injury and Fatalities.

1. Speed.

2. Improper use of brakes.

3. Obstructions.

4. Topography.

5. Mental attitude of operator.

Farm people farm to live, but certainly we must live to be able to farm, so let's not only talk safety on the farm, but let's conscientiously practice safety and reduce the needless loss of life and happiness as a result of carelessness."

Edgar T. Beddingfield, M.D. "My point of view on this accident Private Practitioner Stantensburg, North Carolina problem is truly "grass-roots".

I see these people get hurt. I would like to briefly comment on some types of farm accidents that we see new, some of them new. One very interesting new injury in eastern North Carolina that I have seen and in checking with other near-by physicians, found they had seen the same injury and that is dislocation of shoulders from using tobacco harvesters. We have had some tobacco harvesters prior to this year, but not the number we have now, nor were they used so extensively. I had three patients in about a twoweek period with a dislocated shoulder and the story was the same in all three cases. These people were priming tobacco, riding on a tobacco harvester and perhaps the harvester was being driven just a little too fast and they looked back to see one leaf that should have been picked but the harvester had moved on by before they reached it. The person then would reach back and give a pull, and some of this tobacco being a little tougher to pick, this extra jerk would throw the shoulder out of joint causing a big knot to appear where no knot was suppresed to be. He comes into the doctor's office and the x-ray confirms the fact that he's dislocated his shoulder. This means the man has got to have an anesthetic and have his shoulder reset. It means. too, that he will probably be out of work for a good two or three weeks and his arm will be up in bandage before he can do anything Either leave the stalk behind, or operate your harvester at a else. slower rate of speed. This year there was a shortage of tobacco

sticks and the price got up to \$40.00 a theusand in some places. Some energetic sculs started making their own sticks and we took off fingers from two of these people. I think this would fit into Mr. Coe's remarks that here was a farmer using a piece of equipment to which he is increasingly exposed and he had a very limited degree of proficiency in using it. I believe those two people that I removed fingers for would rather pay the lumber man \$40.00 for a thousand tobacco sticks than lose another finger. Every doctor in North Carolina sees results of accidents caused by corn pickers and mowing machines. I mention these only to remind you that most of these people are permanently disabled. Two brothers I remember so well...One brother lost a finger one day and the other one lost a thumb the next day...Same piece of machinery--a corn picker. The three-county study reported by Dr. Cameron showed that more disabilities, from the standpoint of suffering, loss of time, loss of income, is due to the minor accidents than is due to our catastrophic major accidents and certainly my practice will bear that out. A great deal of this loss can be prevented. I think we are going to have to change some of our concepts of farm life. For example, I think it is a terrible thing for a child to go barefooted and yet, that's a part of farm life that we look back on, but every physician day after day sees children come in with punctured wounds in the foot. I see about four or five severe cuts on feet every month. The bottom of the foot doesn't heal quickly. All of this could be prevented by just wearing shoes. I feel that we have reached the stage of wearing shoes on or off the farm.

Another new accident we are seeing is from the use of a new soil fume. I have seen six to eight friends of mine who had the misfortune of dropping some of this chemical on a heavy brogan (and they were

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wearing shoes) and it went through shoes, socks, and skin..taking a long time to heal from such burns. The only recommendation I have about the use of these chemicals is more careful handling.

I have been requested to take just a minute to talk about tetanus shots and immunizations. In North Carolina about 95% of children are given the three-in-one series (tetanus, whooping cough. and diphtheria) around the ages of four to six months, then a "booster shot either before entering school or when they start to school. If a child sustains an accident who has had this immunization, then only a booster of tetanus toxoid is given at the time of the accident. There are two kinds of tetanus shots ... tetanus toxoid and tetanus anti-toxin and there is a considerable difference between them. If on the other hand, a child sustains an accident who has not had a previous tetanus toxoid immunization. then the tetanus anti-toxin is given. The same is true for adults. If a man has been in service since World War II he had been given the tetanus toxoid shot; therefore, only a booster shot is needed following an accident. You should visit your doctor or your health department and inquire as to how you might receive a series of immunization of tetanus toxoid for your own protection."

Mr. J. Fred Colvard N.C. Equipment Dealers Association Durham, North Carolina Mr. Colvard stated that the farm manufacturers and

dealers have been working

together for a number of years to try to reduce farm accidents, and the company he represents asks all dealers to report any and all accidents involving any of their machines. These reports are used in redesigning old machines and designing new machines. He reemphasized some of the changes made in tractors..already mentioned by Mr. Ferguson, such as the lowering of the drawbars..brake ad-

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justments, lowering the height of the seat, changes in the rear axle, adding distributars instead of the magneto for safer operation. He also added that the corn picker had about replaced the old corn husker, which took more fingers, hands, and arms than the present day corn pickers. In summary, Mr. Colvard stated that equipment manufacturers were anxious to do everything they could to build into all machinery the safety devices which are possible. Dr. Robert Young. Health Officer "I join Dr. Beddingfield in taking

Halifax County "Local County Accident Problem" "I join Dr. Beddingfield in taking a grass roots viewpoint of this problem, except that as a public

health physician, I'm considering the community as the patient. Statistics prove that we have here in North Carolina twice as many accidents as "common cold" infections. Out of 24,000,000 accidents of varying degrees, approximately 125,000 of them are serious enough to produce a 24 hour disability with approximately 3300 resulting in permanent injury, such as loss of an eye or a limb. I would like to lend special emphasis to children in accident control programs. Accidents lead the causes of death between the ages of four to thirty-five years of age. I agree with Mr. Coe's suggestion of having a local safety committee, but one further recommendation ... that the local committee study the statistics and the problem in their own area because you will find the problems varying with the community and county. In my own county, Halifax. we found out that accidents ranked second in the leading cause of death, whereas for North Carolina, they ranked fourth. Study this problem in relation to other health and medical problems and break it down into age groups. We found that drownings produced a significant percentage of our fatalities from accidents, and after further analysis, they were all men in the prime of life and half of these drownings occured in ponds.

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I'm sure this strikes a familiar note to most of us with the number of new ponds being added to our farms. Let me urge you to study the statistics and study your problem locally, so as to attain the maximum yield from your efforts."

4-H team demonstration on farm and home chemicals,

Leonard Weatherspoon, Apex Senior 4-H Club, Holly Springs, N. C. Faye Lewis, Knightdale 4-H Club, Rt. 1, Neuse.

AFTERNOON SESSION:

Dr. Roger W. Howell, School of Public Health, Chapel Hill, North Carolina..., Moderator for Session on Mental Health.

Panel Members:

Rebert Fink, School-Health Service, Department of Public Instruction, Raleigh, North Carolina.
Bruce Blackmon, M. D., Practicing physician, Buies Creek, N. C.
Joseph Carpenteri, M. D., Practicing psychiatrist, Raleigh, N. C.
Rev. Richard Young, Baptist Hospital, Winston-Salem, North Carolina.
Mrs. Corine J. Grimsley, Extension Specialist, Family Relations, Raleigh, North Carolina.
Mrs. Hazel Parker, Negro Home Demsontration Agent, Tarboro, N. C.
Other resource persons:
Nancy Johnson, Rt. 1, Newton, North Carolina...Fresident of the 4-H Club organization.

Jimmy Hunt, Lucama, N. C.... President of the F. F. A. Clubs. Manly Wilder, Middlesex, N. C....State 4-H King of Health. Rachel Jurney, Statesville, N. C. State 4-H Queen of Health. Judith Hamlett, F. H. A. Representative, Durham, North Carolina Ernest Macon, Jr., Methodist Youth Fellowship, Greensboro, N. C. Dr. Roger Howell, <u>Moderator</u> Director, <u>Mental Health Division</u> School of Public Health, U.N.C. Chapel Hill, North Carolina

"The topic for this panel is mental health. This is a difficult topic to define. and we are not

going to try to give a fancy definition, but I would like to begin by saying "mental health is a way of life". A way of life in which the person feels comfortable. If we try to limit this further, we will run into parts that do not belong in a meeting such as this State Rural Health Conference. I would like to begin with this question: "Why are we talking about Mental Health at this Rural Health Conference?" Dr. Bruce Blackmon: "I think this is one of our biggest problems. Good mental health means comfort. We are talking about YOU, and our NEIGHBORS....not the institutionalized patient. This problem is a real everyday concern, and it is outgrowing us when we lose sleep at night worrying, or become inefficient on the job because of some inner, emotional upset. That's the mental health problem we're concerned with today."

Dr. Howell: "Anyone wish to comment?"

Mrs. Hazel Parker: "I would like to add that we're all interested in the individual. We know now that it is just as important to mature emotionally as physically."

Dr. Howell: "We are concerned today with people living together in a growing society. Do you agree with that, Dr. Carpenteri?" Dr. Carpenteri: "If we follow the idea started that mental health is a way of life, we are all interested in a comfortable life, not only for ourselves, but for others and I think this is something that has to do with our every day living and the progess made in our ability to adjust our living habits and practices."

Mrs. Grimsley: "When we think in terms of family living, we often feel that all mothers know the right answers and do not question further and father says, "I'm your father, remember that" period. Mental health is a family affair and each person should be made to feel worthwhile and important. The atmosphere about the home is the important factor to contribute to good mental health."

Reverend Young: "Working in the middle of a medical center and visiting hospital patients makes me conscious of the fact that a person's way of life has a great deal to do with whether he gets sick-welland the time required for recovery."

Dr. Robert Fink: "I don't want us to be too idealistic and technical if I am going to learn how to eliminate the discomfort and pain from my life but if I can learn to be reasonably mental healthy and live vigorously, perhaps I can learn to accept unavoidably discomfort and pain, without getting unduly disturbed by it."

Dr. Howell: "Does anyone have a suggestion to make on how people can improve the way in which they live together, in their own families and communities?"

Dr. Bruce Blackmon: "One thing we are doing in Harnett County is trying to approach this as an overall problem instead of one individual tackling it alone... more of a team approach. For example, I see a number of patients medically, who have a deep underlying problem which is probably more important than the physical ailment they come in to see me about. I'm sure each physician here sees the same thing...a patient wanting to have his blood pressure checked and the physician knows when the patient walks in that he really doesn't want to know what his blood pressure is. They have something that's bothering them and they come in wanting somebody to ask them what the trouble is. Here the team approach begins. I start by asking questions, giving the individual a chance to ventilate his problems. This is nothing new to most of you because you have listened to people "unload" their problems

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on your shoulders, and it doesn't mean that you've got to meddle in his personal affairs, but he'll let you know when he wants to talk. and you sit and listen. For that individual, if he comes and presents a problem that seems to me to be of medical concern. I'm delighted to sit and work with him. If he comes and presents a problem that is of a legal nature. I refer him to an attorney...not just a lawyer, but someone whom I have confidence in and know that we can work together with this individual. I have been to a minister and have asked him to help with special patients. I can go with the patient to either this attorney or minister and in a couple of minutes explain the symptoms and leave, knowing this person will be given good counsel and advice about legal or religious conflicts. It is important that this teamwork be outlined before hand, and after I refer a patient to either the attorney or minister, then what is said between them is confidential. My only connection is with medical aspects of the problem. Other members may be added to this team, such as Sunday School teachers, school teachers, and others, but it is very important that each member of the team understands before hand what rules are to be followed and that the strict confidence of the patient must never be disturbed. In some instances, one, two, or three members of this team have sat down and talked together with a patient, each taking hold of his own area of counsel and together help the patient recognize his problem, then outlining procedures for follow-up treatments."

Mrs. Grimsley: "Some of us will always need specialized help, but I want to say again that so many of these deep-seated disturbances start within the family unit...parents not understanding each child, preference given to one over another, and I think we have to start with ourselves, take a good long look, and many of these problems will identify themselves."

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Dr. Blackmon: "I agree, Mrs. Grimsley, and I know this would reduce my patient load."

Dr. Howell: "We recognize the important role parental influence has upon the individual's mental health development, especially during the early years, but what about our schools? What part should the school play in this, Bob Fink?"

Dr. Fink: "During the school year we have made an attempt to work with teachers, giving them some insight as to how they might help break the chain on contagion of emotionally disturbed children, by first, recognizing certain signs and symptoms and then trying to give some individual attention to these boys and girls, referring them for additional guidance, etc. In two counties, we asked teachers to make a very rough estimate of the number and types of children who needed help because they had emotional problems. We must note that some mistakes were made, but we gave them a guide and suggested that they look for children who were too withdrawn to be comfortable in the classroom or with other children. We gave them a description to use as a quide in making their decision. They were asked to look for children who were so angry, hostile, and destructive, and the third category was those who were over-submissive, having no backbone and giving in too much to others to the point where they were not able to express their own wishes and desires freely, as normal children should. We had a fourth category which we called tension, the use of physical complaints in connection with emotional disorder, but we felt we were not equipped to make decisions on this problem. Teachers are beginning to change their judgments as to behavior problems. Instead of listing the children who were angry and destructive as being the biggest problem, they are now listing those in the over-submissive group. We know, too, that these over-submissive children like those who are

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withdrawn, are the ones who have difficulty in finding solutions to their own emotional problems ... much more so than the ones who are active and can "kick over the apple cart". We begin working with the teachers to help them gain a better understanding of this problem and a greater acceptance. "How do you know them when you see them? What causes these feelings to develop in people? How do we act as a result of it? What can we do ourselves as teachers to relieve some of our excessive feelings of inferiority and to help children be relieved of this?" Questions of this type are discussed with groups of teachers in workshop and other types of in-service training sessions. In another session we will take up this business of hostility and we will follow the same pattern with lectures, films, and discussions. Another session will deal with fear and anxiety, all of these being tied together, showing how one will provoke the other. We hope, and we have evidence to believe that these training meetings with teachers are resulting in a more stable emotional environment within the school, at least for the children they teach. Coming back to the home, I would like to say that perhaps we can help adults, parents in particular, to realize the need for helping children to grow to become independent of them, rather than satisfying some of our own adult feelings, by making them stay under our thumbs until 16, 18, 20 and even older. I would like to recommend that the teacher be added to this team which Dr. Blackmon mentioned in any community studying emotional and mental health problems." Dr. Young: "We have a scheduled training program for ministers who come into the medical center in Winston-Salem for 8 weeks in the summer and 6 weeks in the winter, to study personality development and mind-body relationships, and how to visit sick people using religion as a specialty, just the same as medicine, applied to the specific needs of innerpersonalities. This is also being included in seminar training pro-

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grams for ministers. I would like to outline a program, which we have tried a couple of times in Winston-Salem, and that is a week's training program using all resources in the community. Groups are broken down into age level interests....parents of small growing children, parents of teenagers, and a group of people adjusting to older age. This would depend, of course, on the size of your church as to the number of groups you would have. For example, Dr. Wingate Johnson spoke to the older age group, and other key authorities were invited to meet with each of these groups for selected topics and problem areas... relationship between parents and small children; courtship and marriage with parents of teenagers; etc. and then all came together in the auditorium for a brief worship period focused on the family. Any of you community leaders can try this training program in your community and in your own home church."

Dr. Howell: "What is the church trying to do...get into the medical business?"

Reverend Young: "No. In my nine years of working as chaplain in the medical center, I have not found any problem about this working relationship. I work very closely with psychiatrists, social workers, general practitioners, and the many specialists, and we all get along fine. We all work in the same general area, using the same material.. when you get into the emotions. I am not talking about psychosis.. mental illnesses. I'm talking about working with people who are in centact with reality but who may need a little better way of life and I think we work with the same mental mechanism in the same general territory, but each in his own separate role. I would like to emphasize the value of the team approach, but still each member must play and stay in his own role as each relates to the other. As a minister, when I walk into a room to visit a patient, they immediately react to me in my role on the basis of all the experiences they've had in a

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lifetime with ministers. They either resent me or they may accept me 100%. We found out that the patient often times reported events or symptoms to the minister which were never told the physician or placed on a medical record and vice-versa with the physician getting a more complete story than the minister so by combining our resources we could bring in the total environments...the things that made them sick in the first place. For total recovery, all phases of their environment must be known and properly interpreted back to them to adjust to normal living patterns."

Dr. Howell: "Dr. Carpenteri, would you help us by explaining some of the services offered to children and parents through the mental hygiene clinics?"

Dr. Carpenteri: "When problems are caught early, treated properly chances are the individual, be it child, teenager, or adult, will live happier and be more useful in return. I'm speaking of the patient, but as for the parents or the relative involved, we have seen evidence that in learning how to deal with their child who has a particular problem, they in turn learn about themselves, husbands and other family members so that they have been able to help the total family relationship. Mothers have been made to feel more confident and capable and less anxious in dealing with other problems that come up within the family. Many times in working with a specific child, focusing attention to his personal problem, we become engaged in all types of interrelationships between husband and wife, other children, neighbors. and even employers. The way we work in the clinic is pretty much on an individual basis, with a specific focus a general family life program. We see a multiplicity of causes for bad or poor mental health. To name a few: A child born with limited intelligence and the parents difficulty in accepting the child. One little boy I saw not too long

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ago was having difficulty in school and was referred to our clinic. The story goes that this little boy had lost five or six very important people within a period of one or two years. It takes time for any of us to adjust to a sudden loss or deep hurt, but this little boy didn't have time to recover from one bad experience before another happened, and he was having trouble within himself trying to seek a balance between good and bad events. Some children have trouble because parents are too strict. Others develop behavior problems due to lack of discipline from parents and run head-on into conflict with others. very common problem we see is that of the six-year old child beginning school who is not socially or emotionally developed for his six years of age and he immediately faces competition with other six year olds and some who are nearer seven than six so his problems start here. Another example is that of the child who failed to learn how to read in the first, second, or third grades but who was promoted just the same. When he reaches the fourth grade he has tremendous difficulty in reading and spelling, because he didn't get fundamentals in the earlier grades. We must remember that good mental health starts in the home. The school, the church, recreational activities in the community, and character building agencies, etc. are all important factors, but these only help build on what beginning was given by the family in the home environment. Children are much tougher than we realize; they are recilient, and develop into normal healthy adults in spite of many errors or difficulties experienced. I think one of the most important factors in helping a child to mature is a consistancy of management on the part of the parent, I don't mean that parents have to be consistant every time, or assume that they are always correct, because parents can make mistakes. It is this constant changing from one opinion to another that disturbs the child as well as the parent as

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to discipline matters. This idea of hurrying to a book to look up the answer is a lot of foolishness. Parents should use their own ingenuity and common sense instead of running for help, either from a book or from an expert, because there is no one, two, three clear-cut answers about rearing a child. This is a personal opinion, and others of you might disagree but each child presents a different problem and must be quided accordingly. They differ in their mental capacity, their emotional potential, just as they differ in color of hair, etes, or size and weight. I think parents should develop more self-confidence as to their own ability to handle a problem, as we still do not know the real causes behind personal adjustment which we all have to work out for ourselves. A study was made which didn't prove too much about this area. with one exception, and I would like to add this one comment. In families where each member seemed to be well, happy, and able to combat problems with very little difficulty, we found this kind of enthusiasm .. a sort of excitement in living. It didn't make any difference whether these children came from large homes, small homes, rich or poor, or which side of the track they lived on, but with all of these there was a sense of enthusiasm and a zest for living, even a spiritual alow if you would like to call it that. This feeling seemed to lift the family out of a humdrum or routine living and gave that special "something" which penetrated the entire group."

Dr. Fink: "I think we still have to state some basic principals and one I would like to add is love. Love and acceptance of the child, by the parents and by other children in the family. To be able to love others, we have to be in love ourselves. I would hate for some people to love me like they love themselves."

Mrs. Grimsley: "I think it is fine that so much work is being done with our teachers in helping them understand emotional situations, but

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I would like to ask Dr. Fink what is being done to help the parents." Dr. Fink: "We are encouraging teachers, nurses, and parents to get together to discuss the child's problem, be it physical, emotional, or mental. By so doing, each can share and exchange observations and experiences, which will focus attention on the total development of the child. In some areas, group meetings or workshop sessions are being planned where parents and teachers will learn together about "mutual responsibility."

Mrs. Hazel Parker: "In Edgecombe County, we have organized a familylife council. In this organization we have ministers, local physicians, dentists, teachers, farm men and women, and our local public health officer. We know we need the close cooperation of all groups and professions and as a beginning project, we have attempted to make a survey to find out what is causing some of our family problems, and other personal difficulties. We are in the fact finding stage at the present, but we hope to have this survey analysed to see just what is behind some of the problem situations in our county."

One-act play "Random Target" given by Raleigh Little Theatre Group. Mr. George Hall, Director

Cast: Eve - Ann Seltman The Wife - Diane Bedell The Husband - Ted Daniel Son - Dick Ellis

SUMMARY: Mr. Wayne Corpening, Manager Agriculture Division, Wachovia Bank and Trust Company, Winston-Salem, North Carolina Me to do is get out and oil

the lawn mower, get me a good rocking chair, and let my wife cut the grass. There are too many accidents happening right at home or in the backyards. Whether this will reduce accidents or increase injuries, I don't know. That's why I'm a little confused at this point.

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Reminds me of my neighbor who has rather a large family of ten boys. He said the first one was a doctor and the second stayed out all night, too; the third one was a lawyer and the fourth one didn't tell the truth either; the fifth one was a minister and the sixth one just worked on Sunday, too; the seventh one was a school teacher and the eighth one stayed broke all the time, too; the ninth one worked at a bank and the tenth one was just as equally confused, so we're all in the same shape. Now, I learned a lot today and I know you did, too. We have got to do more in the control of accidents. It's going to require more safety education, more safety consciousness on the part of each one of us, and more concentrated work for the prevention of accidents. This afternoon, I liked the way the panel discussed this problem of mental health as being a "way of life". All of this wonderful information is good, but it isn't worth anything unless it gets to the people back home ... the ones who need it most. There was an old bear hunter up in the mountains and one day he saw this bear, but he knew it was going to be an awful hard shot and he thought awhile before taking a shot. He saw a big rock and his plan came to light. He would aim at the rock, let the bullet bounce off and hit the bear, then he pulled the trigger. Someone yelled, "Did you get him?" "No, I missed the stone wall" ... so I'm wondering if we are taking the right aim on this subject and really planning how to get it to the right people? We come back to this thing of cooperation, starting with the family in the home ... to the community, all the way through because after all, we are all working towards the same goal whether it be from the college, the ministry, the private physician, public schools, and the rest. Now how are we going to get this done? We've got to have organizations to get the job done, haven't we? I heard a person say this about organizing a little community. She said, "When we organized

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this community, the first thing we found was ourselves." That's the most important thing they found out and started working from there, together. She went on to state that they discovered an unsuspected power for creating just the kind of community and program they wanted. You know, there aren't but two ways to do something....do it vourself or get somebody else to do it for you. Most of us want to try ourselves first, then we try to get somebody else to help us. I would like to close with this poem: "It's Up to You". "You're the fellow who has to decide, whether you'll do it or toss it aside. You are the fellow who makes up his mind, whether you'll lead or linger behind. You'll try for the goal that's afar or be content to stay where you are. Take it or leave it, there's something to do. Just think it over...

How are we going to do that? I think you'll do it by having a plar by cooperation, by organization, determination to succeed, by having faith in ourselves, faith in the program, in our communities, and above all, faith in God.....and we'll make progress."

APPRECIATIONS: Dr. J. P. Rousseau, President, Medical Society of the State of North Carolina Winston-Salem, North Carolina

"To each participant on today's program, we hold a debt of

eternal gratitude, and to those who played in the background in planning this program and the contributions made by our lay leaders, civic and community organizations, health agencies, and the strong support given by our farm organizations. Good health belongs to the people, belongs to all the people. Physicians are simply the surveyors of this peculiar benefit and blessing to the people, by reason of our special training and skill. It is generally recognized that good health means far more than just good medical care. This is a reminder rather than a revelation to you. We must include sanitation, light, heat, religion,

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education, recreation, rest and sound sleep in this total health picture. Each of us is responsible and capable of providing these requisites and not dependent upon the state or federal government to provide them for us. Conferences like the one held today helps to open up new frontiers, but first man's mind must be opened. Man's imagination once stretched with new ideas like an elastic band never quite returns to its original dimension. I'm sure our imagination today has been stretched with new ideas and we will carry them home with us and put them into effect for better health for our communities. It is the little things in life that count. They not only cause much worry and physical disease, but emotional and mental disease as well. We need to watch out for those little "sharp words". I'm reminded of a short poem which said: "Little boys flying kites often call them their white winged birds. Words unsaid fall back dead but God himself cannot unsay them after they were said."

In the names of the officers of the Medical Society, the Executive Council, and the members of the Medical Society of the State of North Carolina, I bring you their cordial greetings and pledge to the best of our ability to share in this common problem and bring a high standard of personalized medical service to all our people. Please accept the sincere appreciation of the medical profession for your kindly cooperation with us as we work together in these informative, stimulating, and inspiring rural health conferences. Thank you."

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