

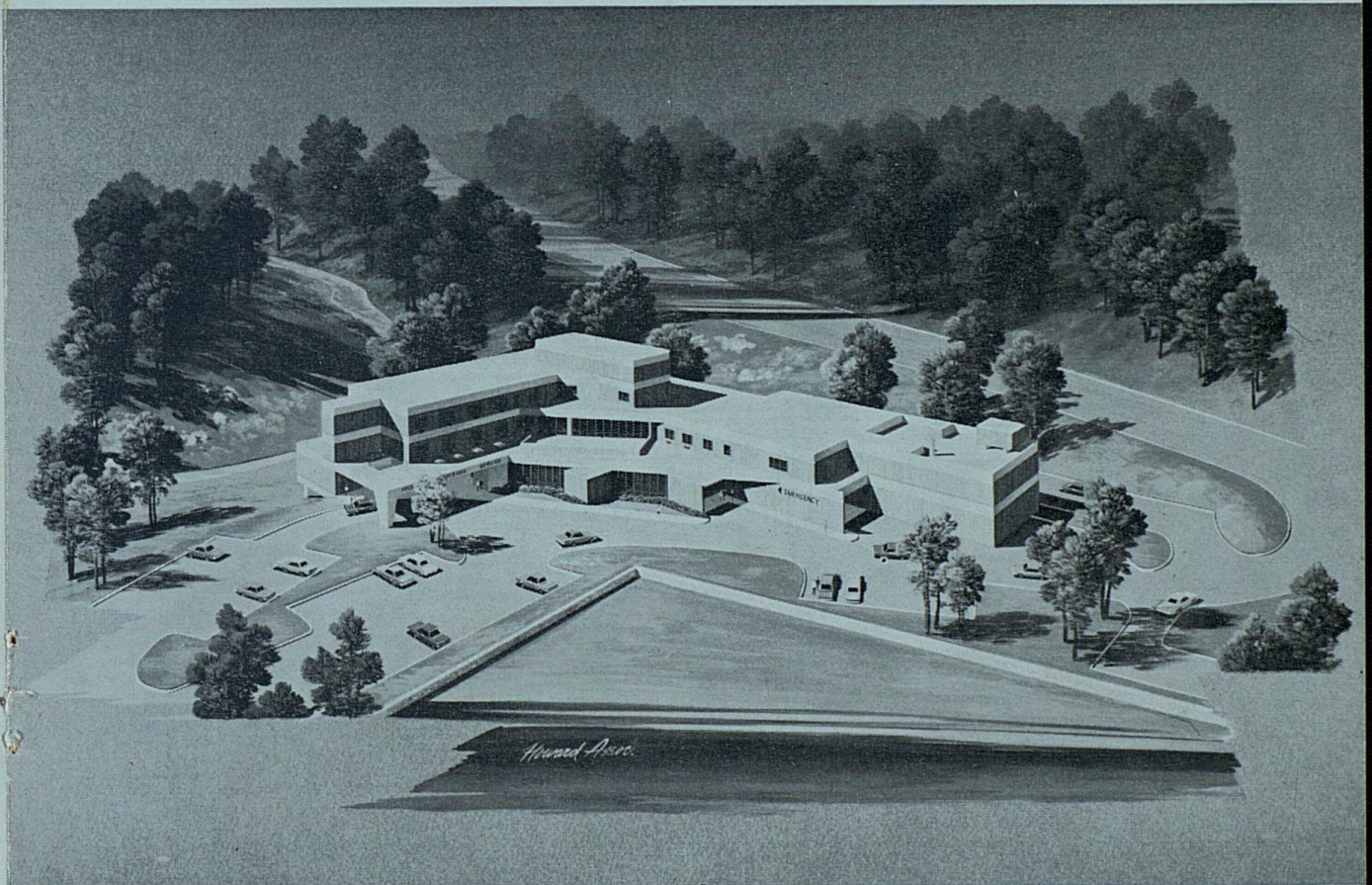
FRONTIER NURSING SERVICE QUARTERLY BULLETIN

VOLUME 47

SUMMER, 1971

NUMBER 1

FORTY-SIXTH ANNUAL REPORT



OUR NEW HOSPITAL

Architect's Rendering

FRONTIER NURSING SERVICE QUARTERLY BULLETIN
Published at the end of each Quarter by the Frontier Nursing Service, Inc.
Lexington, Ky.

Subscription Price \$1.00 a Year

Editor's Office: Wendover, Kentucky 41775

VOLUME 47

SUMMER, 1971

NUMBER 1

Second class postage paid at Lexington, Ky. 40507

Send Form 3579 to Frontier Nursing Service, Wendover, Ky. 41775

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FORTY-SIXTH ANNUAL REPORT
of the
FRONTIER NURSING SERVICE, Incorporated
for the Fiscal Year
May 1, 1970 to April 30, 1971

PREFACE

As has been our custom since we were one year old, we present our annual report of the fiscal affairs and of the field of operations of the Frontier Nursing Service, Incorporated.

We have, as in previous years, divided our report into two sections. One section is about money, and one section about work.

Under the heading of Conclusion, we tell something of what the year has meant to us.

I.

FISCAL REPORT

The figures that follow are taken from the Balance Sheet, the Exhibits and Schedules of the Audit for the fiscal year which ended April 30, 1971.

OWENS, POTTER & HISLE
Certified Public Accountants
2228 Young Drive
Lexington, Kentucky 40505

June 24, 1971

To The Officers and Trustees
Frontier Nursing Service, Incorporated
Lexington, Kentucky

Ladies and Gentlemen:

We have examined the balance sheet of the Frontier Nursing Service, Incorporated as of April 30, 1971, and the related statements of income and expense and changes in surplus for the fiscal year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion the accompanying financial statements present fairly the financial position of Frontier Nursing Service, Incorporated as of April 30, 1971, and the results of its operations for the year then ended, in conformity with generally accepted accounting principles.

Owens, Potter & Hisle

OWENS, POTTER & HISLE

BALANCE SHEET
April 30, 1971 and 1970

ASSETS

CURRENT ASSETS:	1971	1970
Cash on Hand and in Bank.....	\$ 63,172	\$ 92,671
Accounts Receivable:		
Trust Fund Income.....	8,296	2,429
Hospital and Pharmacy Accounts.....	253,323	172,127
Less: Allowance for Uncollectible Accounts.....	(97,701)	(65,180)
Accounts Receivable—Medicare.....	56,772	66,627
Accounts Receivable—Home Health.....	18,023	-0-
Note Receivable.....	-0-	1,000
Inventory—Supplies.....	42,821	40,507
Prepaid Expenses.....	6,544	3,328
Total Current Assets.....	\$ 351,250	\$ 313,509
TRUST FUND INVESTMENTS AT ORIGINAL COST: (Schedule A-1)		
First Security National Bank and Trust Company, Lexington, Ky.....	\$2,049,130	\$2,014,853
Liberty National Bank and Trust Co., Louisville, Ky.....	85,361	85,332
Morgan Guaranty Bank and Trust Co., New York, N. Y.....	229,233	229,233
Bankers Trust of New York, New York.....	204,311	203,287
Citizens Fidelity Bank and Trust Company, Louisville, Ky.....	175,000	175,000
Total Trust Investments.....	\$2,743,035	\$2,707,705
PROPERTY AND EQUIPMENT:		
Property and Equipment (Schedule A-2).....	\$1,098,134	\$ 838,273
Less: Accumulated Depreciation.....	(127,148)	(97,110)
Total Property and Equipment.....	\$ 970,986	\$ 741,163
OTHER ASSETS:		
Mary Breckinridge Hospital and Development Fund.....	\$2,728,936	\$2,516,898
Deferred Interest.....	1,081	-0-
Total Other Assets.....	\$2,730,017	\$2,516,898
TOTAL ASSETS.....	\$6,795,288	\$6,279,275

LIABILITIES AND SURPLUS

(EXHIBIT A)

CURRENT LIABILITIES:	1971	1970
Accounts Payable.....	\$ 77,143	\$ 27,771
Accrued Payroll.....	10,527	16,805
Payroll Taxes Payable.....	2,744	10,918
Notes Payable.....	3,183	-0-
	<hr/>	<hr/>
Total Current Liabilities.....	\$ 93,597	\$ 55,494
	<hr/>	<hr/>
 RESERVES:		
Liabilities for Contributions to Mary Breckinridge Hospital and Development Fund.....	\$3,272,688	\$2,798,997
Liability for Gain or Loss on Investment of Mary Breckinridge Hospital and Development Fund.....	31,398	31,398
Liability for Gifts, Endowments, Legacies in Trust Funds at Original Receipt Value (Schedule A-3).....	2,455,691	2,412,859
Reserve for Gain or Loss on Trust Funds.....	401,066	407,559
	<hr/>	<hr/>
Total Reserves.....	\$6,160,843	\$5,650,813
	<hr/>	<hr/>
 SURPLUS:	\$ 540,848	\$ 572,968
	<hr/>	<hr/>
 TOTAL LIABILITIES AND SURPLUS	<u>\$ 542,213</u>	<u>\$ 572,968</u>

STATEMENT OF INCOME AND EXPENSE

For the Years Ended April 30, 1971 and 1970

(EXHIBIT B)

	1971	1970
INCOME:		
Contributions.....	\$ 294,554	\$222,661
Benefits and Bargain Box.....	13,500	11,095
Gifts in Kind.....	12,371	5,085
Trust Fund Investment Income.....	142,181	147,617
Hospital Income.....	228,169	235,632
Clinic and Home Health Income.....	90,264	67,631
Other Income (Schedule B-1).....	212,184	115,580
	<u>\$ 993,223</u>	<u>\$805,301</u>
EXPENSES:		
General and Administrative (Schedule B-2).....	\$ 252,241	\$264,748
Graduate School of Midwifery.....	47,961	36,480
Home Health Centers.....	134,800	104,705
Hospital Expenses.....	590,341	409,920
Total Expenses.....	<u>\$1,025,343</u>	<u>\$815,853</u>
EXPENSES IN EXCESS OF INCOME.....	<u>\$ 32,120</u>	<u>\$ 10,552</u>

STATEMENT OF CHANGES IN SURPLUS

May 1, 1970 to April 30, 1971

(EXHIBIT C)

SURPLUS BALANCE—MAY 1, 1970.....	\$572,968
LESS: NET LOSS FOR YEAR.....	<u>32,120</u>
SURPLUS BALANCE—APRIL 30, 1971.....	<u><u>\$540,848</u></u>

STATEMENT OF SOURCE AND APPLICATION OF FUNDS

For the Year Ended April 30, 1971

(EXHIBIT D)

FUNDS WERE PROVIDED BY:

Net Loss Per Income Statement.....					
					\$ (32,120)
Add: Charge to Income Not Requiring Funds—					
Depreciation.....	39,630				\$ 7,510
Increase in Total Funds Reserved.....					510,029
Decrease in Working Capital.....					362
Total Funds Provided.....					<u>\$517,901</u>

FUNDS WERE APPLIED TO:

Purchase of Property and Equipment.....					\$269,452
Increase Mary Breckinridge Hospital and Development Fund.....					212,038
Increase in Trust Fund Investments.....					35,330
Increase in Deferred Interest.....					1,081
Total Funds Applied.....					<u>\$517,901</u>

SCHEDULE OF WORKING CAPITAL

	1971	1970	Working Capital	
			Increase	Decrease
CURRENT ASSETS:				
Cash.....	\$ 63,172	\$ 92,671	\$	\$29,499
Accounts Receivable.....	238,713	176,003	62,710	
Note Receivable.....	-0-	1,000		1,000
Inventory.....	42,821	40,507	2,314	
Prepaid Expenses.....	6,544	3,328	3,216	
	<u>\$351,250</u>	<u>\$313,509</u>		
CURRENT LIABILITIES:				
Accounts Payable.....	\$ 77,143	\$ 27,771		49,372
Accrued Salaries.....	10,527	16,805	6,278	
Payroll Taxes Payable.....	2,744	10,918	8,174	
Note Payable.....	3,183	-0-		3,183
	<u>\$ 93,597</u>	<u>\$ 55,494</u>		
Working Capital.....	<u>\$257,653</u>	<u>\$258,015</u>		
Decrease in Working Capital.....			362	
			<u>\$83,054</u>	<u>\$83,054</u>

STATEMENT OF VALUE OF TRUST FUNDS AND INVESTMENT FUND

April 30, 1970 and 1971

(SCHEDULE A-1)

Trust Account No.	Additions During Year		Capital Gain or (Loss)	Basis 4/30/71	Market Value 4/30/71
	Increase	Decrease			
First Security National Bank Trustee:					
Trust Fund.....	\$ 619,327	\$	\$ 2,789	\$ 647,981	\$
Capital Gains.....	112,621			115,410	
Sub-Total.....	\$ 731,948	\$ 28,654	\$ 2,789	\$ 763,391	\$ 1,052,024
Reserve Fund.....	98,613	114,168	(1,760)	151,021	152,879
Belle Barrett Hughitt.....	17,597			17,597	65,123
Isabella G. Jeffcott.....	2,717			2,717	7,028
Joan Glancy.....	6,154			6,154	6,228
Jessie P. Draper #1.....	15,143			15,143	17,514
Bettie Starks Rodes and John O. Starks.....	10,871		31	10,902	34,767
Eliza Davitt Hartley.....	150,117		(829)	149,288	167,439
Matilda E. Hume.....	4,222		254	4,476	6,061
Elizabeth B. Perkins.....	162,571		197	162,768	546,848
William Nelson Fant, Jr.....	118,443		(593)	117,850	328,913
Cordie M. Williams.....	568,280		7,980	576,260	704,381
Louie A. Hall.....	76,366		(16,625)	19,741	37,651
Margaret B. Hunt Trust for Caroline Thornton Memorial.....	1,000			1,000	772
Shoemaker, McLennan, Pettit & Neel.....	25,076	10		25,086	27,650
Atwood and Price.....	19,905			19,905	39,734
Mrs. Henry Shipman and Barbara Brown.....	5,830			5,830	34,007
Sub-Totals.....	\$ 2,014,853	\$ 142,832	\$ (8,556)	\$ 2,049,129	\$ 3,229,019
Liberty National Bank and Trust Co., Louisville, Ky., Trustee, Sunshine Ballard Trust for Mary B. Morton Memorial Wing.....	778		30	85,362	113,115
Morgan Guaranty Bank of N. Y., New York City, N. Y., Trustee, Jessie P. Draper Fund #2.....	.063420			229,233	374,699
Citizens Fidelity Bank & Trust Co., Louisville, Ky.—Belknap Legacy Bankers Trust of N. Y., New York City, N. Y., Anonymous.....	27292	1,024		175,000	172,501
33030	203,287			204,311	234,768
TOTALS.....	\$ 2,707,705	\$ 143,856	\$ (8,526)	\$ 2,743,035	\$ 4,124,102
Investment—Mary Breckinridge Hospital and Development Fund in Hands of Agent, First Security National Bank & Trust Company, Lexington, Kentucky					
Agent Account #1997.....	\$ 2,454,276	\$ 347,038	\$ -0-	\$ 2,666,314	\$ 2,732,088

PROPERTY AND EQUIPMENT

April 30, 1970 and 1971

(SCHEDULE A-2)

	April 30, 1970	Addition During Year	April 30, 1971	Deprecia- tion for Year
LAND AND BUILDINGS:				
Hyden Hospital Center.....	\$193,699	\$ 7,385	\$ 201,084	\$ -0-
Sophronia Brooks Apartments.....	10,786	60,318	71,104	711
Mary Breckinridge Hospital.....	167,969	148,604	316,573	-0-
Haggin Quarters for Nurses.....	59,320	-0-	59,320	-0-
Wendover District.....	92,227	-0-	92,227	-0-
Georgia Wright Clearing.....	4,836	-0-	4,836	-0-
Beech Fork District.....	11,461	-0-	11,461	-0-
Red Bird District.....	14,547	-0-	14,547	-0-
Flat Creek District.....	12,547	-0-	12,547	-0-
Brutus District.....	12,041	-0-	12,041	-0-
Wolf Creek District.....	39,201	-0-	39,201	-0-
Totals.....	\$618,634	\$216,307	\$ 834,941	\$ 711
EQUIPMENT:				
Home Health.....	\$ 350	\$ 746	\$ 1,096	\$ 145
Hyden Health Center.....	26,227	9,248	35,475	2,836
Wendover District.....	2,300	557	2,857	257
Beech Fork District.....	665	181	846	76
Red Bird District.....	2,256	182	2,438	235
Flat Creek District.....	583	181	764	67
Brutus District.....	1,432	182	1,614	152
Wolf Creek District.....	1,148	181	1,329	124
Georgia Wright Clearing.....	252	-0-	252	25
Household—All Centers.....	19,340	1,355	20,695	4,004
Dispensary—All Centers.....	8,715	194	8,909	1,762
Radio System.....	27,761	3,167	30,928	2,934
Pharmacy Equipment.....	1,581	-0-	1,581	316
Totals.....	\$ 92,610	\$ 16,174	\$ 108,784	\$12,933
OTHER:				
Motion Picture Equipment.....	\$ 659	\$ -0-	\$ 659	\$ 132
Motion Picture "The Road".....	35,961	-0-	35,961	7,192
Office Equipment.....	36,535	6,770	43,305	7,984
Equipment for Horses.....	165	-0-	165	25
Motor Vehicles.....	52,224	20,610	72,834	10,367
Horses.....	1,410	-0-	1,410	282
Cattle.....	75	-0-	75	4
Totals.....	\$127,029	\$ 27,380	\$ 154,409	\$25,986
GRAND TOTALS.....	\$838,273	\$259,861	\$1,098,134	\$39,630

**STATEMENT OF RESERVE FOR TRUST FUNDS
AT ORIGINAL COST**

April 30, 1970 and 1971

(SCHEDULE A-3 — Page 1)

	April 30, 1970	Additions During Year	April 30, 1971
DESIGNATED FUNDS—INCOME			
UNRESTRICTED:			
Marion E. Taylor Memorial.....	\$ 10,000	\$	\$ 10,000
Fanny Norris Fund.....	10,000		10,000
Marie L. Willard Legacy.....	3,127		3,127
Mrs. Charles H. Moorman Fund.....	1,100		1,100
Lillian F. Eisaman Legacy.....	5,000		5,000
Lt. John M. Atherton Memorial.....	1,000		1,000
Mrs. Morris B. Belknap Fund.....	26,375		26,375
Elizabeth Ireland Fund.....	22,458		22,458
Elizabeth Agnes Alexander Legacy.....	5,000		5,000
Richard D. McMahon Legacy.....	943		943
Mrs. W. Rodes Shackelford in Memory of Her Two Children.....	15,000		15,000
Hattie M. Strong Memorial.....	10,000		10,000
Beulah Bruce Brennan Memorial.....	2,000		2,000
Anna R. Gooch Memorial.....	16,625		16,625
Jeannie B. Trull Legacy.....	33,253		33,253
Frances Kendall Ross Legacy.....	17,100		17,100
Elizabeth Sherman Lindsay Memorial.....	5,000		5,000
Helen N. and Beatrice A. Wilson Fund.....	10,000		10,000
Sophia Cogswell Stiger Memorial.....	23,401		23,401
Dr. Charles N. Kavanaugh Memorial.....	1,000		1,000
Margaret C. Breckinridge Legacy.....	3,000		3,000
Mary Hallock Armstrong Legacy.....	2,000		2,000
Winifred Irene Leckie Memorial.....	1,000		1,000
Lena G. Anderson Legacy.....	7,223		7,223
Lisette Hast Legacy.....	10,944		10,944
Edward S. Jouett Legacy.....	1,000		1,000
Herman Bowmar Fund.....	1,000		1,000
Mrs. Henry James Legacy.....	5,000		5,000
Jean Hollins Memorial Fund.....	5,286		5,286
Anne Steele Wilson Memorial.....	2,888	50	2,938
Mary Churchill Humphrey Fund.....	1,001		1,001
Mrs. Bissell Carey Legacy.....	5,000		5,000
Dr. John M. Bergland Memorial.....	1,000		1,000
Edward C. Wilson Legacy.....	49,250		49,250
Ann Allen Danson Fund.....	3,432		3,432
Helen Rochester Rogers Legacy.....	5,000		5,000
Virginia Branham Memorial.....	12,804	1,145	13,949
Mrs. Herman F. Stone Fund.....	2,000		2,000
Annie Wallingford Anderson Memorial.....	5,100		5,100
Mrs. Edna C. Lapham Fund.....	15,250		15,250
Edith M. Douglas Legacy.....	10,000		10,000
Adeline Shaw Martindale Legacy.....	82,718		82,718
Flora G. Fletcher Legacy.....	39,753		39,753
Fannie B. McIlvain Memorial.....	3,015		3,015

**STATEMENT OF RESERVE FOR TRUST FUNDS
AT ORIGINAL COST**

April 30, 1970 and 1971

(SCHEDULE A-3 — Page 2)

	April 30, 1970	Additions During Year	April 30, 1971
DESIGNATED FUNDS—INCOME UNRESTRICTED:			
Catharine Mellick Gilpin and Roger D. Mellick Memorial.....	\$ 5,176	\$ 120	\$ 5,296
William Nelson Fant, Jr. Memorial.....	78,350		78,350
Lucie Wilshire Graham Memorial.....	10,628	1,889	12,517
Mrs. Abigail Hodges Trust.....	1,000		1,000
Anna Marshall Miller.....		25,450	25,450
Elizabeth B. Perkins Legacy.....	152,972		152,972
Eliza Davitt Hartley Legacy.....	150,000		150,000
Cordie M. Williams Legacy.....	458,254		458,254
Margaret H. T. Hunt for Caroline H. P. Thornton Memorial.....	1,000		1,000
Anonymous (Bankers Trust Co., N. Y. Trustee).....	137,496		137,496
Marion S. D. Belknap.....	175,000		175,000
Elizabeth M. Anderson Memorial.....	4,839		4,839
Elizabeth Canby Bradford duPont Memorial.....	40,000		40,000
Louie A. Hall Legacy in Memory of Sophronia Brooks.....	66,834	(40,000)	26,834
TOTALS—DESIGNATED FUNDS— INCOME UNRESTRICTED.....	\$1,774,595	\$(11,346)	\$1,763,249
DESIGNATED FUNDS—INCOME RESTRICTED:			
Norah Oliver Shoemaker Memorial Baby's Crib.....	\$ 5,000	\$	\$ 5,000
Children's Christmas Fund in Memory of Barbara Brown.....	1,000		1,000
Donald R. McLennan Memorial Bed.....	12,750		12,750
Margaret A. Pettit Legacy.....	1,954		1,954
Jane Short Atwood Legacy.....	7,500		7,500
Mrs. John W. Price, Jr. Fund.....	10,800		10,800
Winfield Baird Foundation.....	105,000		105,000
Mrs. Henry Shipman Legacy.....	24,398		24,398
Wilson Neel Memorial Baby's Crib.....	952	10	962
Jessie Preston Draper Memorial No. 1.....	15,000		15,000
Jessie Preston Draper Memorial No. 2.....	185,000		185,000
Joan Glancy Memorial Baby's Crib.....	5,000		5,000
Isabella George Jeffcott Memorial.....	2,500		2,500
Belle Barrett Hughitt Memorial.....	17,000		17,000
Eliza Thackara Memorial.....	4,222		4,222
Bettie Starks Rodes Memorial Baby's Crib, John Price Starks Memorial Baby's Crib.....	10,000		10,000
Mary Ballard Morton Memorial Wing.....	85,251		85,251
TOTAL—DESIGNATED FUNDS— INCOME RESTRICTED.....	\$ 493,327	\$ 10	\$ 493,337

**STATEMENT OF RESERVE FOR TRUST FUNDS
AT ORIGINAL COST**

April 30, 1970 and 1971

(SCHEDULE A-3 — Page 3)

	April 30, 1970	Additions During Year	April 30, 1971
RESERVE ACCOUNTS—INCOME UNRESTRICTED:			
Mrs. Louise D. Crane.....	\$ 4,000	\$	\$ 4,000
Mrs. Frederic Moseley Sackett.....	10,000		10,000
Mrs. Eliza A. Browne.....	16,000		16,000
Winfield Baird Fund.....	550		550
Lillie McGinness.....	4,797		4,797
Harriet H. Grier.....	5,000		5,000
Maurice S. Miller.....	5,000		5,000
Leila A. Morgan.....	5,000		5,000
Eliza Davids.....	6,000		6,000
Bertha G. Wood.....	13,029		13,029
Doris A. Farrington.....	4,920		4,920
Mrs. E. A. Codman.....	2,000		2,000
Mrs. Irving E. Raymond.....	4,000		4,000
Mrs. George M. ToeWater.....	12,418		12,418
Mrs. Oswald Villard.....	1,000		1,000
Leila M. Weeks.....	2,469		2,469
Frances Margaret Bradford.....	5,000		5,000
William E. Brigham.....	10,000		10,000
Mrs. Polk Laffoon.....	1,000		1,000
Mrs. W. Garland Fay.....	1,000		1,000
Mrs. Louise W. Breckinridge.....	2,000		2,000
Elizabeth R. Hooker.....	5,000		5,000
Transfer from Trust Income Account.....	2,254		2,254
Mable H. Dwiggin.....	5,000		5,000
Margaret McLennan Morse.....	5,000		5,000
George B. McLaughlin.....	2,500		2,500
May Kirtland.....	5,000		5,000
Rosamond B. Rheault.....	5,000		5,000
Mrs. Harriett D. Cummings.....	-0-	1,000	1,000
Annette VanBezey.....	-0-	1,000	1,000
Elsie Foerderer.....	-0-	2,000	2,000
Ernestine M. McPherson.....	-0-	9,270	9,270
Frances K. M. Bowdoin.....	-0-	5,000	5,000
Edna Patten Jennings.....	-0-	27,500	27,500
Franklin Bruce McKillip.....	-0-	7,398	7,398
Katherine B. Tower.....	-0-	1,000	1,000
TOTALS—RESERVE ACCOUNTS— INCOME UNRESTRICTED.....	\$ 144,937	\$ 54,168	\$ 199,105
Sub Total.....	\$2,412,859	\$ 42,832	\$2,455,691
Capital Gain or Loss on Trust Funds.....	407,559	(6,493)	401,066
TOTAL RESERVE FOR TRUST FUNDS.....	\$2,820,418	\$ 36,339	\$2,856,757

SCHEDULE OF OTHER INCOME
For the Years Ended April 30, 1971 and 1970
 (SCHEDULE B-1)

	1971	1970
Louie A. Hall Legacy.....	\$ 40,000	\$ 30,000
U. S. Grant Proceeds.....	89,527	48,689
Telephone Refunds.....	3,673	2,980
Vending Machine Commissions.....	-0-	505
Graduate School of Midwifery.....	10,386	11,236
Employee and Guest Meals.....	22,639	22,301
Rent Income.....	988	1,188
Royalties and Miscellaneous Sales.....	1,163	824
Interest Received.....	269	125
Pharmacy Income.....	39,887	(4,631)
Other Miscellaneous Income.....	3,652	2,363
	<hr/>	<hr/>
Total Other Income.....	\$212,184	\$115,580
	<hr/>	<hr/>

SCHEDULE OF ADMINISTRATIVE EXPENSE
For the Years Ended April 30, 1971 and 1970
 (SCHEDULE B-2)

	1971	1970
Salary—Director.....	\$ 11,999	\$ 6,000
Salary—Secretary to Director.....	5,310	4,620
Salary—Accounting Department.....	8,795	10,657
Salary—Clerical and Stenographic.....	39,492	37,210
Salary—Dietary.....	7,461	6,815
Other Salaries and Wages.....	36,097	30,777
Travel Expense.....	458	760
Office Supplies.....	8,107	5,673
Telephone and Telegraph.....	3,211	2,895
Auto Expense.....	2,720	2,223
Legal and Accounting.....	5,950	5,416
Advertising for Staff.....	429	951
Feed and Care of Livestock.....	3,548	2,984
Employee Benefits.....	5,920	8,287
Hauling and Freight.....	1,074	1,090
Maintenance and Repairs.....	3,914	5,574
Bulletins.....	6,876	6,238
Social Service.....	16,796	13,829
Linen and Laundry.....	349	379
Utilities.....	3,650	3,153
Household Supplies.....	1,807	1,411
Motion Picture Supplies and Expense.....	1,271	96
Books and Subscriptions.....	585	471
Insurance.....	16,926	18,268
Promotion.....	1,897	558
Food.....	8,189	7,352
Dietary Supplies.....	90	390
Retirement Plan (Note 1).....	-0-	10,359
Equipment Lease.....	-0-	260
Depreciation.....	39,630	35,661
Graduate Student Nurses Stipend.....	6,044	2,560
Miscellaneous.....	3,434	1,110
Campaign Expense.....	212	30,721
	<hr/>	<hr/>
Total Administrative Expense.....	\$252,241	\$264,748
	<hr/>	<hr/>

STATEMENT OF DONATIONS AND SUBSCRIPTIONS PAID

May 1, 1970 to April 30, 1971

(SCHEDULE B-3)

SUMMARY

	Contributions	Benefits and Bargain Box	Total
Baltimore Committee.....	\$ 543	\$	\$ 543
Boston Committee.....	11,856	6,000	17,856
Chicago Committee.....	5,703		5,703
Cincinnati Committee.....	6,874		6,874
Cleveland Committee.....	39,527		39,527
*Daughters of Colonial Wars.....	2,180		2,180
Detroit Committee.....	13,161		13,161
Hartford Committee.....	5,349		5,349
**Kentucky:			
Blue Grass Committee.....	6,547		6,547
Louisville Committee.....	7,010		7,010
Miscellaneous State.....	8,867		8,867
Minneapolis Committee.....	16,356		16,356
New York Committee.....	47,000	3,762	50,762
Philadelphia Committee.....	17,738	3,738	21,476
Pittsburgh Committee.....	18,832		18,832
Princeton Committee.....	728		728
Providence Committee.....	3,793		3,793
Rochester Committee.....	1,471		1,471
Washington, D. C. Committee.....	14,611		14,611
Miscellaneous.....	52,169		52,169
Sub-Totals.....	<u>\$280,315</u>	<u>\$13,500</u>	<u>\$293,815</u>
Less Transfer to Endowments.....	1,365		1,365
TOTALS.....	<u>\$278,950</u>	<u>\$13,500</u>	<u>\$292,450</u>
*Donations from various state chapters			
**Total for Kentucky.....	<u>\$ 22,423</u>		<u>\$ 22,423</u>

I. REPORT OF OPERATIONS

The data in this section are supplied by the record department of the Frontier Nursing Service, and by records kept on guests and volunteer workers.

1. INTRODUCTION

The broadening of our educational program to include preparation of the Family Nurse has called for additions to our medical staff.

Dr. W. B. Rogers Beasley, Medical Director, continues as chief lecturer and medical supervisor of the nurse-midwives and director of the family planning program. He has also been of immeasurable help in the development of the Family Nurse program. Dr. R. Edward Dodge gave lectures to the Family Nurse students and supervised their clinical practice. He also served as part-time health officer for Leslie County. He shared the responsibility of clinical services to patients with Dr. Ramon Neufeld, who was with us until February of this year when he resigned to accept a position in Harlan County. He was replaced by Dr. Thomas Howald whom we welcomed to the staff in March.

Dr. Anne Wasson of New Hampshire was with us again during the summer for vacation relief and returned to join the staff in December as Chief of Clinical Services. Dr. Richard Goldstein came to us from Philadelphia for three months during the summer of 1970, and was a great help. We continue to be grateful for the help given us by our medical friends in Harlan and to the pediatricians from Cincinnati who have come to the mountains to hold clinics and for the tonsil clinic held at our hospital in the spring. Dr. David Stevens continues to give us monthly orthopedic clinics. Our Family Nurse students have enjoyed the weekly lectures from Dr. Thomas Nuzum of the University of Kentucky who has brought other guest lecturers with him to Hyden. The University of Kentucky College of Medicine and Allied Health faculty have given freely of their time in coming to Hyden to give lectures to the students and have given us much encouragement in our efforts to expand the role of the nurse.

2.

HYDEN HOSPITAL

Hyden Hospital—licensed to operate 16 beds—with 12 bassinets and two incubators, was occupied 5,984 days last year by 1,902 patients of which 266 were newborn. There was a daily average of 18.8 patients, including newborns, and the average stay per patient was 3.1 days. There were 18 deaths in the Hospital, of which 4 were newborn. There was no maternal death. The outpatient department, with the physicians' clinics, received a total of 22,930 visits. There were 176 operations performed.

3.

DISTRICT NURSING

In the 12 districts operated by the Service from the Hospital, Wendover, and five outpost centers, we attended 9,994 persons in 2,447 families. Of these, 3,641 were children and babies. The district nurses paid 14,489 and received 15,568 visits at their nursing centers and special clinics. At the request of the State Department of Health, the Frontier Nursing Service gave 2,488 inoculations and vaccines against diphtheria, smallpox, whooping cough, polio, measles, et cetera, and sent 7,559 specimens for analysis.

4.

MIDWIFERY

Registered Cases

The nurse-midwives and the midwifery students of the Frontier Graduate School of Midwifery (under the supervision of their instructors) attended 294 women in childbirth and gave them full prenatal and postpartum care. Of these 294 women, 36 were delivered by the physicians. There were 287 live births and 3 stillbirths; 2 deliveries of twins; 217 new cases were admitted; 275 closed after postpartum care; 6 miscarriages; 3 stillbirths. There was no maternal death.

Emergency Cases—Unregistered

In addition to those regular registered maternity cases, the physician and the nurse-midwives were called in for 27 emergency deliveries, where the mother had not been registered or given prenatal care, which resulted in 6 live births and 21 emer-

gency miscarriages (17 early, 4 late). There was no maternal death.

Outside-Area Cases

There were 123 women from outside our area who were carried for prenatal care. Of these 19 were closed before delivery. Most of our outside-area patients move into one of our districts or to our Hospital for delivery. In that case they are transferred to our regular midwifery service.

5.

FRONTIER GRADUATE SCHOOL OF MIDWIFERY

The 46th fiscal year was marked by experimentation and change as we worked toward the development of a broader educational program. During the year, seventeen registered nurses were graduated from the Frontier Graduate School of Midwifery and were licensed by the State Department of Health to practice midwifery in the Commonwealth of Kentucky. Of these seventeen nurse-midwives, five had also completed a trimester in the assessment and management of common family health problems and six more registered nurses were working hard in Family Nursing I. When the 60th class in the School completed its work on March 15, 1971, the Frontier Graduate School of Midwifery had prepared 376 nurse-midwives since its inception in 1939.

We appreciate more than we can express the hours of time given by professional guests who have shared their knowledge and experiences with the students in lectures, seminars and clinics.

6.

SOCIAL SERVICE DEPARTMENT

For many years, Frontier Nursing Service was the only agency to offer Social Service to the families in this area and much of the work concentrated on providing direct help to families in need. With the coming of state and federal agencies to the area, the focus of FNS Social Service has changed considerably. Our social worker has become a resource person for our patients. Her aim is to help families to help themselves, always keeping in mind that the program of the FNS is designed to give young children a better start in life.

Patients and families with problems are referred to the

Social Worker by the medical and nursing staff of the FNS for investigation and advice as to the best approach for solution of the problem. The Social Worker places selected children in boarding schools and is responsible for seeing they have adequate clothing and school supplies. She arranges transportation for patients who are referred to medical specialists; she helps the elderly budget their limited income and strives to insure that no family is hungry or ill clad. She counsels high school students and participates in many community activities which are under way to develop the area.

In a rural area, where there is little public transportation, the problem of getting patients to their own physicians or to the specialist to whom they may be referred, is acute and for years the FNS Social Worker and our volunteer couriers have made thousands of trips with patients each year. Transportation is still an essential function of Social Service but the burden was eased considerably this year by the medical transportation provided by the Leslie County Health Project.

7.

VOLUNTEER WORKERS

Dozens of volunteers, including couriers, physicians, nurses, an x-ray technician and secretaries, gave thousands of hours of work during the year.

8.

GUESTS FOR OBSERVATION AND STUDY

As in other years, the Service entertained guests, for observation and study of its work, from all over the world. They came not only from North and South America but also from Europe, Asia and Africa. During the past sixteen years, the Service has entertained guests from some 60 countries. The wide-spread interest being shown in the developing Family Nurse program has brought us many more professional guests from other parts of the United States.

9.

CHRISTMAS

The Frontier Nursing Service held Christmas parties at many different places for the more than 5,000 children under

its care, with Santa Claus, Christmas trees and Christmas carols. Our local district committees provided trucks to carry supplies from Hyden to the outpost centers, and were helpful in many other ways. All of this was made possible by the generous response of hundreds of people to our annual request card for the Children's Christmas.

III

FORTY-SIX YEAR TOTAL

It will be of interest to our readers to see a few totals covering the whole forty-six year period of work.

Patients registered from the beginning.....	61,079
Children (including babies under 1 year).....	36,997
Adults.....	24,082
Maternity cases (reg.) delivered.....	16,349
Maternal Deaths, 11 (9 puerperal, 2 cardiac)	
Inoculations.....	265,760
Patients admitted into the Hyden Hospital*.....	38,468
Number of days of occupation in Hyden Hospital.....	250,779

*For 42 years and 6 months. The FNS Hospital at Hyden was opened in the fiscal year 1928-1929 and operated only six months in that year.

CONCLUSION

Our 46th Annual Report is submitted with a small measure of pride in that we owe no man a cent. This happy situation is due to the many friends who have responded generously to our plea for help to keep the work going. Service to our fellow man continues to be our foremost thought. Much credit goes to our medical, nursing and office staff who have willingly gone beyond the call of duty when the occasion demanded it.

With the help of a development grant from the Appalachian Regional Commission, our medical and nursing directors in charge of education have designed an educational program which we expect will help to fill the gap in the health care system of the future. For many years Frontier Nursing Service has demonstrated the value of the Nurse-Midwife. We are confident that the Family Nurse will prove an equally valuable member of the health team.

Each step we have taken during the past year leads to the day when we will move to our new hospital. As we go to press

our architect is inviting bids for construction. Immeasurable thanks go to the many friends who helped us with our fund drive for construction of the much-needed new hospital and teaching center. We ended our fiscal year with the good news that we had surpassed our goal. We rejoice in the thought that we have not had to refuse care to any individual who has come to us for help. When the situation might occur which is too complicated for us to handle alone, then we call on our good friends at the University of Kentucky Medical Center or at the Appalachian Regional Hospitals. We do not feel as alone as in years gone by and new roads coming into the area have made it easier for us to get the patient to the specialist. Our many patients who attend the outpatient clinic at Hyden Hospital will be pleased to learn that with Family Nurses working in the clinic, we will hope to cut down the waiting time. We are grateful for the infinite patience that is shown by both staff and patients in the much overcrowded hospital and we look forward eagerly to the time when we can move into the new building.

MARVIN BRECKINRIDGE PATTERSON
(Mrs. Jefferson Patterson), Chairman

EDWARD S. DABNEY, Treasurer

HELEN E. BROWNE, Director

MARY BRECKINRIDGE HOSPITAL

Progress Report

The required preliminary reviews of the plans for the Frontier Nursing Clinical Training Center, of which the Mary Breckinridge Hospital is an integral part, were completed and the final plans—all fifteen pounds of detailed working drawings—were submitted to the United States Public Health Service in late July and we settled down to await final approval of the plans and their release for bidding.

We are still waiting. We have held this Bulletin until the last possible minute, hoping to be able to announce the release of the plans. Now, all the proof-reading on the Bulletin has been done, it is time to meet the press deadline, and all we can say is that we expect authorization from Public Health Service to release the plans and specifications within a few days.

Our architects, Watkins, Burrows & Associates of Lexington, tell us that a number of firms have expressed a desire to bid on the construction contract so we hope the firm to whom the contract is awarded will be able to begin construction immediately.

The delays are frustrating to all—to our patients and staff who cope daily with the inadequacies of the little old hospital on the hill at Hyden, to our friends whose generous donations have insured that the new hospital and training center *will* be built, and to those who have had to answer the question: “When *are* you going to start the hospital”! It is hard to be patient when something is as badly needed as is the new hospital, and when a project has occupied as much time and energy and thought as this one has for four years.

We have not been entirely idle during the four years since we began to plan for the new hospital. We knew it was needed, and our patients knew it too, but we had to sell the idea of a new and larger hospital to a few other people. We had to obtain government approval and meet certain conditions before government funding could be available. We had to raise a considerable amount of money from private sources—no small undertaking. We had to acquire a suitable site on level ground and provide more living quarters for additional staff. We had to expand our educational program and begin training Family Nurses. Many changes have been made in the internal structure of the FNS—such as the installation of more sophisticated accounting and record systems—to help prepare for the move into the new hospital. We will continue to work toward an orderly transition into the new hospital during the months of construction. Perhaps, after all, four years has not been an excessive length of time in which to accomplish all that had to be done. Perhaps, also, these irritating delays will help teach us patience!

THE CHRISTMAS PREVIEW



Three Members of the Boston Committee, Mrs. Arthur Perry, Jr. (old courier Mardi Bemis), Mrs. Bruce Putnam (old courier Amy Stevens), and Mrs. Robert A. Lawrence (old courier Patsy Perrin) at the 1970 Christmas Preview.

The Boston Committee of Frontier Nursing Service has announced that its annual Christmas Preview will be held on October 20 and 21, 1971. Invitations will be sent by the Committee to friends in the Boston area a bit later this month.

In 1970, the autumn meeting of the FNS Board of Governors was held in Boston and coincided with the Christmas Preview. Board members attended the Preview and enjoyed the hospitality of the Boston Committee at a dinner given in their honor.



The National Treasurer of FNS, Mr. Edward S. Dabney, with two members of the Boston Committee, Mrs. Ralph B. Williams and Mrs. Burgess Standley.

FOUNDATION

The bricklayer laid a brick on the bed of cement. Then, with a precise stroke of his trowel spread another layer, and without a by-your-leave, laid another brick. The foundations grew visibly . . . the building rose, tall and strong, to shelter men.

I thought, Lord, of that brick, buried in the darkness at the base of the big building. No one sees it, but it accomplishes its task, and the other bricks need it. Lord, what does it matter whether I am on the rooftop or in the foundations of your building, so long as I stand faithfully at the place where you want me to be?

—Contributed

FRANKLIN AND THE GULF STREAM

The Gulf Stream is the strange blue channel you can see in the green waters of the Atlantic. It is visible to airborne passengers going between the U.S. and Europe or traveling north and south between New York and the Caribbean Sea.

One of Ben Franklin's many accomplishments was to publish the first chart of the Gulf Stream in 1770 after becoming intrigued by the stream when he was Postmaster General. He compiled his information from sailing captains. His main point was that use of the Gulf Stream current would speed Atlantic travel and the mail.

Jack Stark noted all this and more in a detailed article on "Gulf Stream: River in the Sea," published in the December, 1969 issue of *Travel*. The Gulf Stream is a phenomenon still under intense study by fisheries, navigators and others. It has been explored by a submarine aptly christened the "Ben Franklin" and by fishermen without end.

As Mr. Stark says, "It is a river within an ocean, churning past a given point with a volume that runs to billions of tons of water." Its speed ranges from four to seven miles an hour.

Franklin thought that it originated in the Gulf of Mexico from cracks in the sea bottom. Subsequent research has not verified this theory; there are several reasons advanced now for the presence and actions of the strange and powerful current. Nor was Franklin the first to notice it. Christopher Columbus had been aware of it.

But Franklin was the first to take word-of-mouth information and put it all together in valuable form.

—*The Colonial Crier*, Sept.-Oct., 1970
Colonial Hospital Supply Company
Chicago, Illinois

SUFFERING DAD

"So," said the neighbor sympathetically, "your baby suffers from sleeplessness, does he?"

"No," responded the haggard and hollow eyed man, "he doesn't. He seems to enjoy it. I'm the one who suffers."

—*Modern Maturity*, Dec.-Jan., 1968-1969

HOW NOT TO SPEND A SUMMER

by
ELLEN HOWARD

June 29 was a beautiful day and I was so happy. We were going to the London stockyards to buy a horse. Dad didn't quite understand why I wanted another horse when I had Sugarfoot but I did because then my brother David could ride with me. Dad did an errand for Wendover in London; then we went on to the stockyards. We looked at horses and I even rode one but he didn't seem suited to my brother. I saw a large buckskin mare that I liked but she was too big for riding.

Just before we ate lunch we saw a truck, driven by a woman, come in and in it was an Appaloosa mare. She was really beautiful. We ate lunch and looked at the pens where the cattle were kept, and Dad went back to look at the horses again, leaving us to watch the auctioning off of odds and ends of horse equipment. Then the animals were brought in—cute little ponies, big, long-eared mules and horses of various descriptions. One horse had a broken foot. He looked so sad that I wished I could have bought him and had him put to sleep. Then the Appaloosa was brought in, and many people were interested in her. I wanted her so badly that Daddy bought her.

We brought her home and unloaded her at Wendover. Daddy offered to lead her home while I drove but I wanted to lead her myself. I stopped to borrow a bridle and saddle from one of our neighbors so that I could ride the rest of the way home. The mare was a little bit lively but I thought she was going to be all right. I wasn't out of sight of Sherman's house when she reared and I fell off. I got a small cut on the head and a fractured humerus and several bad bruises from the fall.

Mom and Dad must have been surprised when they got a phone call telling them I had fallen off the horse and was on my way to the hospital by ambulance. They came on in to the hospital and Mommy said I was insisting to the nurse that I wanted to go home. I don't remember anything about that! At first everybody thought I had injured my elbow, because it looked pretty bad, but when they took x-rays they found the arm was broken.

I was in hospital for six days, during which time I ate liquids and jello, saw Dr. Stevens, the orthopedic consultant, and had a cast put on. The doctors were very nice and so were all the nurses. Some of the aides were my cousins and they were especially kind. When the nurse is friendly and cheerful, you don't mind half so much being given a shot or having your finger stuck! A two-year-old cousin was in the hospital at the same time and, since some of her family stayed with her at all times, they came in to visit with me and other friends came, too, so I didn't feel forgotten. One of my roommates was a fourteen-year-old girl and the other was an older lady with an infected leg. We had a good time talking about horses!

When I went back to the hospital for an x-ray later, it was found that the broken bone was not behaving as it should. A closed reduction was unsuccessful so Dr. Stevens advised that I come to Lexington so that he could operate on my arm. On July 23, I was admitted to Good Samaritan Hospital and installed in a room. I think I must have looked sicker than I really was because I was hurried off to bed as fast as possible! I was taken to surgery that evening and everybody was nice and gentle. I had hoped to go home the next day, in time to see the movie "King of the Wild Stallions" but I was not discharged until Sunday. I tried to work on Tuesday but I felt rather miserable still so I did not go back again until after Dr. Howald had taken out the stitches on the following Monday.

Now I'm beginning to type again and I have a feeling that I had better stop being lazy because Agnes, who replaced me this summer, will be going to school soon and Peggy might want me to do some letters again. I want to go riding too, so I have to do everything I can to get my arm healed so that the doctors will say go ahead. We traded the mare and now have a nice pony which my brother does ride so I'll have company.

Next summer I'll settle for a new dog or cat—anything but an unbroken horse!

OLD COURIER NEWS

Edited by
JUANETTA M. MORGAN

From Nancy Dammann, The Philippines—June 27, 1971

My job here is fascinating. We are producing two or three films and have started some research on educational materials to help motivate women to accept family planning. Most of the people with whom I work are Filipino women and they are a wonderful group. I've been travelling quite a lot with two women doctors. It's rough and I don't know how they do it month after month. I remember one exhausting day which reminded me of Kentucky. Six of us started out at 4 a.m. in an aged jeep to cover a large portion of an island. We got back at about 8 p.m. We were stopped by a truck accident which blocked the road, necessitating a detour, plus several breakdowns of our jeep.

I shall be going to Laos sometime soon for a short, temporary assignment which should prove interesting. I'm supposed to set up an information program for family planning.

.

From Patricia Lihatsh, Etna, New Hampshire—July 25, 1971

Since I visited Wendover last September, I've been to Iceland, Luxembourg, Switzerland, Austria, Germany, Sweden, Finland, Holland, Belgium, Italy, France and England. I visited Nicola Wood Parker, Betty Lester's niece, while in England. For three months of my visit in England I worked at a riding stable quite near London. I loved England—both the country and the people. I've been working on a Social Welfare Research Project in New Hampshire this summer and I might teach at a day-care center this fall.

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From Lorrie Hoyt Hall, Reading, Massachusetts

—August 16, 1971

We returned this winter from Zambia in Central Africa, having spent two years there. Since then, what with job hunting, house hunting, moving twice and the birth of our fourth child just last week, our lives have been a bit hectic! Incidentally, I

had this child by natural childbirth and my husband was with me all the time. It was a thrilling experience for both of us.

. . . .

From Jeanne Black, Cedar Rapids, Iowa—July 29, 1971

I will be through school in September. I am applying for jobs here and in Massachusetts. Right now I am on my internship at St. Luke's Hospital in the Rehabilitation Center, and my patients are mainly stroke victims. My first internship was spent in Waterloo, Iowa, working on the psychiatric ward.

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BITS OF COURIER NEWS

From **Chris Boyle's** mother we hear that Chris has just completed secretarial school and will go into airline stewardess training in the fall.

Edith Wislocki is working for the Department of Correction in Illinois.

Kate Fulton worked on a ranch in Cody, Wyoming, this summer.

Vicky Coleman Fuller is now living in Great Falls, Virginia, and her husband is working with the Environmental Protection Agency in Washington, D. C.

. . . .

WEDDINGS

Mrs. Linda Branch Schriver and Mr. Harvey J. Eggeman on June 26, 1971, in Providence, Rhode Island.

Miss Patricia Allen Sweney of Concord, Massachusetts, and Mr. F. George duPont, Jr., of Fairfield, Connecticut, on July 17, 1971, in Concord. This young couple will live in New York City.

Our very best wishes go to these couples for a long and happy married life.

ON THE DOUBLE

by

ANNE DeT. BOYER, R.N., C.M.

Editor's Note: Our old staff member, Anne DeTournay, paid us a surprise visit with her husband this summer. She fulfilled a promise she made to us, long ago, and wrote about one of her busy times when she was at our Red Bird Nursing Center in the early Sixties.

The morning dawned, bright, brisk with promise. The aromatic fragrance of the breakfast coffee perking in the kitchen seemed to reiterate the promise. This will be a beautiful day! My co-worker, Toni L., and I reviewed our plans for the day. She had numerous calls all the way up Elk Hill. So many were ill with the flu and measles that an early start was essential. I had a similar situation existing in and around Big Creek and Bear Branch. Then, there was the multipara expecting her tenth "young-un"—I promised I would be "close by" when she needed me.

Our breakfast was summarily interrupted by the buzzing of the clinic bell—"so early?" The thought passed through my mind that it was not a clinic day, so someone has probably come up for a refill of medicine—not so! A young midwifery patient I had just registered the previous day—near term—was in labor! Oh, no, not today! Her husband informed me that she had been "punishin'" since midnight and it was now 6:30 A.M. Visions of my "well-planned" day vanished as I followed him to the furthest corner of my district—a few more miles and she would have belonged to the Brutus nurses.

My patient was in bed, having fairly strong contractions. It was her second baby. I felt more encouraged as to carrying out my "pre-planned" day, until I had performed my examination and found she was just starting in true labor, and the progress was slow, very slow. I was too far away to make my calls and return—she had priority. Fourteen hours later, and six trips to the wood-pile to keep the fire going, she was almost ready to have her baby. (Somehow, it did not even occur to me to wonder as to the whereabouts of the husband—he just disappeared. I learned later that the men-folk liked to make themselves scarce while the baby is being delivered, appearing just as mysteriously after that first cry.)

My rising doubts which had come with the rather long labor were suddenly allayed by a classical delivery of baby and after-birth, and thankfully, an intact perineum, since I necessarily had to use a flash light to supplement a fading kerosene lamp.

A new day was dawning as I was heading back to Red Bird Center, happy, somewhere inside, that all went well, but just as I drove into the drive Toni L. came out carrying another set of midwifery bags, which stand in readiness at all times. "My grand multipara sent word that she 'needs' me." Together we went to the home. Everything was in readiness, and the laboring patient advised us to "hurry." We set up, scrubbed and were ready. She was so right! In just a few minutes we had a beautiful, crying, baby girl. With such joy and chatter, our chores were soon completed. Toni and I looked at each other. Without a word, we knew it was so worth-while. All the worry, the weariness seems to be literally wiped away by God and replaced by a feeling, (so grand), that no money could buy—it has to be bestowed.

HEDGEHOG HANGOVER

Tins or jars half filled with beer will catch a lot of slugs and snails; I leave them in strategic places until they are full. One night I noticed that tins which had been half full on my previous inspection were now empty. This happened several times and I was puzzled, until I saw a hedgehog leaning over a tin, disposing of slugs, snails and beer. Oblivious of my torch he kept at it and emptied the tin, then wiped his mouth with his front paws and moved off. His progress was unsteady, and after going some way he lay on his side and curled up. An hour later he was still sleeping it off.—Gabriel Barlow

—*The Countryman*, Summer 1971, Edited by
Crispin Gill, Burford, Oxfordshire, England.

Annual Subscription for American readers
\$5.00 checks on their own banks.

Published quarterly by *The Countryman*,
23-27 Tudor Street, London, E. C. 4.

FAMILY NURSE PRACTITIONER PROGRAM

Progress Report

The Family Nurse Practitioner Program has completed its development year and THE FRONTIER SCHOOL OF MIDWIFERY AND FAMILY NURSING now offers a one-year certificate program designed for nurses who have completed basic training in a diploma, associate degree or baccalaureate program. It is designed for nurses who are committed to health services in rural and developing areas, and who are interested in service-learning experiences in preparation for providing primary health care with medical direction. The program is offered in an ambulatory care setting which provides comprehensive, primary, family health services. Physical, mental and social health components, including promotional, preventive and interventive measures and activities, are integral parts of the total services offered and the training provided.

The training program is based upon a model for delivery of health services developed by the Frontier Nursing Service over a forty-seven year period in rural Appalachia. This model offers a unique approach to the provision of health service which is particularly suited to areas where there is limited access to medical services. It offers nurses a broader latitude for utilizing their skills and knowledge; it demands a high degree of commitment and responsibility; and it provides new opportunities for working in a meaningful alliance with the physician in joint endeavors to meet the health needs of the people. As such, it provides a new challenge to nursing in the health field, and a promise of improved health services to the people. The physician also finds new opportunities and challenges in such a program. The benefits accrued by all involved are the factors which create the appeal and the workability of the program.

The first trimester of the program focuses on the diagnosis, assessment and management of common family health problems; the second trimester on parental, postpartum and child care, and family planning; and during the third trimester, students have the option of Outpost Nursing or Advanced Nurse-Midwifery. Students may elect to take:

1. The first trimester only, if planning to work in a general

- clinic with medical direction immediately available;
2. The first two trimesters, if planning to work in a family health clinic with medical direction immediately available;
 3. The first three trimesters, if planning to work in an obstetrical clinic providing comprehensive services, or if a certificate in nurse-midwifery is desired;
 4. The first two and the fourth trimesters, if planning to work in a nursing (satellite clinic) outpost; or
 5. All four trimesters, if planning to work in an area where they will be expected to provide comprehensive primary health services, including deliveries.

A certificate is given following completion of one year's training which includes the first two trimesters and the third or fourth trimester. The program is based on the belief that health consists of three parts: physical, mental, and social, or the health of body, mind and personality, which are inseparable. If one part suffers, or flourishes, the other is affected; and to attend only one part is to neglect another. The family, likewise, consists of many parts, which makes family health care an intricate and varied procedure. The more knowledgeable one is of the various parts and their relationship to another, the more effective the judgment one makes in the care of the family, and the individual.

The better equipped the family is, the better it can cope with life's problems; but help is needed by all during times of stress or crises.

Families that live in stressful environment, wherever that may be, need additional assistance to help them cope. This type of care is broader in concept than that of the traditional system. It focuses on ecology; inter- and intra-familial relationships; the cultural aspects of living, including economic, legal and political patterns; and the inter-relationships of the various helping organizations such as health, education, political, welfare, and religious institutions and agencies. This requires that health be closely coordinated with community development programs and that the practitioner concentrate on the social and mental aspects of health more than has been the custom.

It is our belief that nurses who have the necessary basic training and who form the largest single segment of health manpower, given adequate back-up, are the most reasonable resource

from which to draw for the staffing of family health services. The training required for family nurses must be developed mutually by nursing, medicine and other personnel involved in health care.

Frontier Nursing Service has used the service-learning approach to training in its nurse-midwifery program with a high level of success for over thirty years. It therefore proposes to continue to subscribe to this concept in the new family nurse training program, for optional educational growth of the students. It offers direct exposure to the problems that are relevant to rural health, and firsthand experience in resolving such problems.

More recently, the University of Kentucky has expressed its interest in offering baccalaureate credit for the family nursing program. The program as it has been developed has been submitted to the University for review and a committee representing the various health fields has been appointed to study the program. The FNS feels that this is a major move forward in the development of health manpower designed to make quality health care more accessible to the people at a more feasible cost—a stated objective of Frontier Nursing Service since its incorporation.

It has not been an easy year for the faculty of the School who have combined curriculum development with teaching the students and service to the patients. The faculty have spent endless hours (usually at night) in the revision of the Medical Directives under which nurses and nurse-midwives work to correlate their content with the expanded knowledge of the family nurses. But what matters hard work when one receives a favorable response and a great deal of encouragement from other health professionals, and enthusiasm from the students themselves whose input into the program has been of inestimable value!

An exciting program has evolved. We have dedicated faculty, we have help from several nurses who have completed one or more trimesters of the new program, we have more applicants than we yet have the facilities to accept. It now remains for the FNS to find adequate funding to continue the program. The Federal government has recently made limited funding available for this type of training.

In Memoriam

MR. AND MRS. THOMAS F. BRIGHT

St. Davids, Pennsylvania

July 26, 1971

The sudden death of "Tookie" Bright and her husband in a plane accident has saddened us. Our Philadelphia Committee had just recently elected Tookie as their Chairman. For many years she had carried on her family's interest in our work as an active member of the Committee. Her husband contributed his skill as volunteer auctioneer at the annual Chinese Auction arranged by the Philadelphia Committee. We will miss them both. To their family and a host of friends we send our deepest sympathy.

The lyf so short,
The craft so long to lerne,
Th' assay so hard,
So sharp the conquering.

—Chaucer

SUMMER SEMINARS

The Frontier Nursing Service was pleased to invite the physicians and nurses of the Southeastern Kentucky counties to two Summer Seminars, designed to be of help to practicing physician-nurse teams. Both Seminars were held in the Leslie County Public Library in Hyden and the FNS is deeply grateful for a generous donation which made them possible.

The first Seminar—on "Family Planning"—was held on July 23, and was attended by some seventy-five health professionals. The distinguished participants in the Family Planning Seminar were Dr. Louis Hellman, Deputy Assistant Secretary for Population Affairs, Department of Health, Education and Welfare, and, from the Carolina Population Center of the University of North Carolina, Dr. J. F. Hulka, Associate Professor of Obstetrics and Gynecology, Dr. Barbara Hulka, Assistant Professor of Epidemiology, and Miss Linda Staurovsky, a nurse-midwife and Instructor in Maternal and Child Health.

Dr. Dorothy Hollingsworth, an Assistant Professor of Pediatrics at the University of Kentucky, was Chairman of the second Seminar—on "Diabetes—Its Team Management", held on August 27. Other participants included three doctor-nurse teams: Dr. John W. Runyan, Jr., Professor of Medicine and Chief of Endocrinology at the University of Tennessee, and Miss Odie Herring, Supervisory Nurse for Chronic Diseases in Shelby County, Tennessee; Dr. Guy C. Cunningham and Miss Betty Hemlepp of the Ashland Children's Clinic, Ashland, Kentucky; and Dr. George R. Huggins, Associate Professor of Obstetrics at the University of Mississippi, and Miss Rene Reeb, of the Nurse-Midwifery Faculty of the University of Mississippi and a graduate of the Frontier Graduate School of Midwifery. We were also fortunate in having with us that day Dr. Irving Kanner of the University of Kentucky who is Secretary of the State Diabetes Association.

We were pleased to have nearly one hundred people attend the second seminar, including representatives from the Oneida Mountain Hospital, the Appalachian Regional Hospitals at Harlan and Hazard and the Home Health Agencies at Harlan and Middlesboro, from Clover Fork Clinic, the Mental Health Clinic,

the University of Kentucky Medical Center, the LKLP Dental Program, the Daniel Boone Clinic in Harlan, the Southeastern Kentucky Regional Health Demonstration Corporation, State and Local Health Departments, headed by Miss Ruth Spurrier, Director of Public Health Nursing in Kentucky, and Frontier Nursing Service staff.

—P.G.E.

THE ART OF ADVERTISING IN 1800

For those who think that modern advertising was invented only with the coming of television, let them read this ad taken verbatim from the *Ulster County Gazette* of Kingston, N. Y., in the issue of January 4, 1800.

Luther Andres & Company have this day
been opening GOODS both fresh and gay.
He has received near every kind,
That you in any Store can find.
And as I purchase by the Bale,
I am determined to retail,
For READY PAY a little lower,
Than ever have been had before.
I with my brethren mean to live,
But as for CREDIT shall not give.
I would not live to rouse your
 passions,
For credit here is out of fashion.
My friends and buyers one and all,
It will pay you well to give a call.
You may always find me by my sign,
A few rods from the house divine.
The following articles will be received in pay-
 ment: Wheat, Rye, Buckwheat, Oats, Corn,
 Butter, Flax.
CASH will not be refused.

—*The Colonial Crier*, July-Aug., 1971
Colonial Hospital Supply Company
Chicago, Illinois

OLD STAFF NEWS

Edited by
EILEEN H. MORGAN

From Elda Barry in Jamestown, New York—June, 1971

I graduated from the Frontier Graduate School of Midwifery about twenty years ago and it was inspiring to note great strides in progress in that time. Best wishes for continued growth and progress in preparing workers for service in many places and in serving the fine people in the mountains.

.

From Peggy Brown Elrington in Sussex, England—July, 1971

We spent a few lovely days in South Wales, Bill playing golf and I swimming and sightseeing. Cherry [old staff Rose Evans] came over with us and is staying with her sister in Wales for six weeks. We visited my sister, Jo, [old courier Jo Grimaldi] and her family, now living near Bedford. The boys are growing up fast at eleven and nine years. We plan to return on August 12.

We hear regularly from Agnes Lewis and nothing but good of FNS!

.

From Janet Priebe Mirtschin in Toledo, Ohio—July, 1971

All of the hospitals seem to be desperate for help during the summer so I started working two days a week in the delivery room at a hospital here.

Lawrence was a plant electrician at the "Jeep" plant during the winter so he got a good look at where your vehicles come from. Now he has a job in air conditioning which he wanted experience in before going back to Australia.

Peter and Andrew certainly enjoy this summer weather so they can play outside all the time. They didn't really mind the cold weather but it was always a job to get them bundled up.

My fondest greetings to you all and may God bless your building program.

.

From Rene M. Reeb in Jackson, Mississippi—July, 1971

FNS has been much in my thoughts since I left. You appreciate a place and persons more once you have left them!

We have a little of FNS here. Kate Challman is working in Holmes County, the rural aspect of our program. Joyce Wiechmann has a new position as Director of the Refresher Program. I am in Graduate School full time and assist Joyce part time. Sister Bernadette Farrell works full time doing service and supervision of students. We do have a *good* program here.

Tell all the "old timers" hello for me.

.

From Gwen Jolleyman Rosoman in Kidderminster,

Worcs., England—July, 1971

It must be funny without the barn at Hyden. I had always thought that I would like to re-visit the FNS sometime, but it is not always a good thing going back. We like change less as we get older, I find!

I feel very middle-aged now (not yet grey haired however!) with a daughter about to leave school and two boys away at boarding school. Jane, incidentally, is keen on riding and is lucky enough to have her own horse, a grey gelding called Barbara who is quite a handful. She is going on to the local College of Further Education to take 3 "A" levels.

The whole of our family are keen on tennis and Jane has just come back this evening from a local junior tournament where she and her partner have had their first win—great thrill!

It is pouring rain after about three hot days. June was the coldest and wettest for about twenty years.

I haven't forgotten the night Scotty shot the 'possum in our chicken run at Beech Fork. Nifty days!

.

From Maggie Willson in Cornwall, England—July, 1971

I have just had two weeks' holiday and spent some of the time with Liz Palethorp. We had splendid weather, so we spent a good bit of the day on the beach.

Tonight sees the end of Looe Carnival week. I went down to watch the Carnival Procession. Watching it made me homesick for Leslie County and the Mary Breckinridge Day parade.

The Spring edition of the Bulletin arrived today. I was

delighted to receive it and hated having to go out on my rounds without even opening the envelope!

Greet everyone I know at Wendovr.

.

From Clara-Louise "Pete" Schiefer Johnson in

Buenos Aires, Argentina—August, 1971

I was delighted to learn of the marvelous amount of money which the Philadelphia Committee made on the Silent Auction. I really enjoyed working with the Committee during the brief time I was in the area.

In addition to writing our postal address which is Eric's business address, our home is: Vicente Lopez, 846, Martinez, Buenos Aires. Perhaps you know someone coming this way! I happily remember an occasion in Parma, Italy when a dear young ex-courier visited us, thanks to you. In Norfolk, England, we had the pleasure of meeting Marlene Swindells and her parents from Norwich shortly before she joined the FNS staff. We do like company!!

It is winter here, cold, bleak and damp unless the sun is out. We have had four weeks of "Indian Summer" which brought out magnolia buds, flowering cherry, etc. I love the city and look forward eagerly to seeing the country. It is a fascinating part of the world.

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Wedding

Marcella Den Blyker and Mr. Jasper Vink on July 3, 1971 in Rehoboth, New Mexico.

We extend our best wishes to this young couple for a long and happy married life.

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We send our heartfelt sympathy to the family of **Virginia Lamb Chrestman**, who died on May 14, 1971, and to **Sister Marie Stoeckler** whose father died in August, 1971.

THE IMPACT OF THE "FAMILY PLANNING SERVICES AND POPULATION RESEARCH ACT OF 1970" ON THE POPULATION OF THE UNITED STATES

by

LOUIS M. HELLMAN, M.D.
Deputy Assistant Secretary for Population Affairs

[**Editor's Note:** You will read elsewhere in this Bulletin of the two educational seminars held in Hyden this summer. We are grateful to Dr. Louis Hellman for permission to reprint the speech he gave at the Family Planning Seminar.]

In the late Fall of 1970 the Senate of the United States passed, without dissent, a bill to authorize nine major long-term programs of family planning assistance and research. A short time later, a somewhat similar bill was passed by the House by an almost unheard of majority of 198 - 32. From a joint conference held early in December emerged the Family Planning Services and Population Research Act of 1970, PL 91 - 572 (often called the Tydings Bill). It was signed into law by President Nixon on the 24th of December, 1970, thus completing his request to Congress carried in his special message of July 1969.

Although these actions marked the first time in the history of our Government that family planning and population had become the subject of a specific law, the signing of the bill occasioned only passing comment in the news media. The almost unusual acceptance of these acts of the Congress and the President vividly symbolized the enormous revolution in thinking and practice that has taken place in our country in the last decade.

It also raised some interesting questions. Why is the Government supporting family planning programs? Why has the Administration assigned to it the highest priority? What is expected from this investment of public funds? What is the relation between family planning and population?

These questions, which should be simple to answer, are not. There is a wide divergence of public and scientific opinion on the purposes of the family planning effort and on the expected results to be derived for this large outlay of resources. There are some

who believe that the governmental efforts are genocidal or at least directed at containment of the black minority. Others hope that an expected reduction in birth rates will result in a deceleration in the growth rate of population. Others expect very little demographic effect, although they probably would admit that there are public health benefits from family planning. If disagreement about expected results is so widespread, it is not surprising that public policy is not clear and that people who know little about the issues have formed firm conclusions that are based to a large extent on wishful thinking.

The population lobby (whoever they may be) must share some of the responsibility for the existing confusion in expectations since the legislation it has so strongly supported was implied to hold promise of solution to many of our social problems. The lobby alone is not responsible for the existing confusion. Simplistic answers to complex issues have widespread public appeal.

Although we do not now have a population policy in the United States, it is evident to those who are aware of the potential seriousness of unrestricted growth that a policy must soon be evolved. Any plan will take years to have effect. Sometime in the 21st century, the United States will have three hundred million people. Our present actions cannot prevent this growth, but they can influence when this number of people will occur; in addition, they can determine whether, if ever, the four hundred million will arrive. Most of us hope, moreover, that governmental policy will be based on voluntarism. Long delay in the formulation of a governmental population policy can dissipate the last hope of a voluntary solution. The planners of involuntarism are already at their drawing boards.

By linking family planning with population, the Congress has set the stage for enunciation of a public population policy. It seems clear that the expectation of the Congress and the Executive Branch of the Government is that PL 91-572 will slow the growth rate, reduce the birth rate, and provide other social benefits. Such may or may not be the case.

It seems fitting that we should examine the steps that have led to our present position. In so doing, we may also ascertain the validity of our expectations. A reassessment of our position may point out the steps to the evolution of a population policy

that can facilitate the achievement of the social goals that are beginning to loom so prominent in the expectations of our people.

The shift in policy and the mobilization of public opinion in favor of tax supported contraception for all people without regard to social or economic status can be said to have begun in New York City in 1957-58. At that time there was initiated a successful campaign to revise the long-standing ban on contraception in the city's municipal hospitals.

Just a short 13 years ago, birth control was offered in the tax supported public health programs of only seven states, all in the South. In some of those states the programs were almost 20 years old. Although they were partially supported by Federal funds the purpose toward which these funds was directed did not appear in the grant applications.

The New York campaign was important for three reasons:

- A. It indicated that in spite of vigorous minority opposition public funds could properly be used for birth control services.
- B. It spread upon the record a more comprehensive picture of the current political and religious status of contraception than had ever been seen.
- C. Finally the New York controversy proved that established tenets of neither laity nor clergy necessarily pose serious obstacles to the control of fertility in a population well informed and fully cognizant of the problems of unimpeded fertility.

The issue was clear cut from the beginning. The patient who occasioned a confrontation was a severely ill diabetic whose future childbearing could have endangered her life. The contraceptive services in her case were a health measure. The general issue focused on the right of the poor to a health service readily available to the more affluent.

Although the action of the New York Board of Hospitals was repeated to one degree or another in many municipalities, Federal policy was slow to follow. In 1959 Draper published a Presidential report that urged incorporation into foreign aid, assistance in population control to nations requesting it. Commenting on the ensuing debate Dwight Eisenhower said, "I can-

not imagine anything more emphatically a subject that is not a proper political or Governmental activity . . .”

Although the Draper recommendation did not receive official sanction, it was important because it would have placed the Government on the side of population control.

The Kennedy Administration held different views. Beginning in 1961, a series of public statements by high Government officials, among them the late Adlai Stevenson, Under Secretary of State Gardner, and Secretary of Labor Wirtz all indicated increasing concern with the explosive growth of population.

The National Academy of Science issued its first population report calling for active Governmental participation to curb population growth in 1963, and President Kennedy formally endorsed reproductive research so that knowledge can, “Be made available to all the world so everyone can make his own decision.”

The National Academy of Sciences in its second population report suggested the appointment of an official “at a high national level” to facilitate action and urge that family planning be made an integral part of domestic medical programs. A group of distinguished Senators and Representatives led by Senator Gruening helped implement this suggestion by the creation of the post of Deputy Assistant Secretary for Population and Family Planning in the Department of Health, Education, and Welfare.

President Johnson referred to the problems of population growth on at least forty occasions. Addressing the United Nations 20th Anniversary Meeting in San Francisco, he said, “let us in all our lands—including this land—face forthrightly the multiplying problems of our multiplying populations and seek the answers to this most profound challenge to the future of the world . . .”

The President singled out family planning in his Special Message to Congress on Health and Education as one of the four critical health problems requiring special attention, declaring “We have a growing concern to foster the integrity of the family and the opportunity for each child. It is essential that all families have access to information and services that will allow freedom to choose the number and spacing of their children within the dictates of individual conscience.”

In 1967, Congress authorized earmarked funds for family

planning services within both maternal and child health, and foreign aid programs.

The importance of the population problem was emphasized by thirty of the world's leaders in the United Nations on Human Rights Day in 1967. They stated in part that:

We believe that the population problem must be recognized as a principal element in long-range national planning if governments are to achieve their economic goals and fulfill the aspirations of their people.

We believe that the great majority of parents desire to have the knowledge and the means to plan their families; that the opportunity to decide the number and spacing of children is a basic human right.

We believe that lasting and meaningful peace will depend to a considerable measure upon how the challenge of population growth is met.

We believe that the objective of family planning is the enrichment of human life, not its restriction.

We believe that family planning, by assuring greater opportunity to each person, frees man to attain his individual dignity and reach his full potential.

Finally President Nixon outlined the urgency and magnitude of the international and national population problem in a special message to Congress on July 18, 1969. In this message the President asked, but did not answer, many of the questions posed by our expanding and ill-distributed population that are of concern to all thoughtful people.

He set as a national goal the provision of adequate family planning services within five years to all those who want, but cannot afford them. In addition the President requested:

1. Increased research in methods of birth control.
2. The training of more people to work in family planning and population programs.
3. Action on the effects of population growth on environment and food supply.
4. Expansion and better integration of domestic family planning services.

The shift in official thinking was accompanied by a spate of policy statements from professional organizations in the health and welfare fields.

The Courts have also taken some cognizance of these matters. In all but two states, Connecticut and Massachusetts, no real statutory impediments to the administration of tax supported birth control existed. Since 1965, however, there have been a series of legislative actions that have encouraged the spread of family planning services in many states. In 1965 the Supreme Court of the United States, in a history-making decision, struck down Connecticut's archaic prohibition as a violation of the Bill of Rights. Similarly in Massachusetts, although that portion of the State Law that prohibits dispensing of contraceptives to unmarried women was repealed by the State Court, it was ruled unconstitutional in the Federal District Court in 1970. In the State Supreme Court, however, a different decision was reached. The matter will eventually be decided by the Supreme Court.

There is ambivalence in many of the statements both from the public and private sectors. Regardless of the professed goal to limit population they are concerned with contraceptive programs designed to equalize human opportunities or to improve the health of women and children. The solution of the New York controversy was straightforward in this matter. It made no pretense toward limitation of population growth, nor did it seek to diminish the number of the poor; the major indication for contraceptive services in this case was "health" in its broadest sense.

Confusion began to develop with President Kennedy's response to the first report of the National Academy of Science. On one hand, the goal is stated to be the curbing of population and on the other the support of research to develop contraceptive techniques. No doubt is expressed that once these techniques have been developed, population growth will be retarded.

President Johnson further clouded the issue when at the United Nations Anniversary speech he became rhetorical about the problems of population growth, but in his Special Message to Congress on Health and Education he expressed concern that families have access to contraceptive information and services

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so that they might choose the number and spacing of their children.

Similarly, the first resolution of the world's leaders at the United Nations on Population Planning speaks to the population issue. The remainder of the resolutions are directed at family planning. The conclusion must inevitably be drawn that family planning alone will solve the problem.

President Nixon directed the major portion of his July 18, 1969, Message relative to Population Growth and his finest rhetoric toward the population problem. Although he recommended certain steps that might initiate a population policy such as the establishment of the Commission on Population Growth and the American Future, the only solution that he offered was support for contraceptive services for the poor and near-poor and increased research for a better contraceptive.

Confusion of goals persists in the statements of various scientific organizations. The position of the New York Academy of Medicine in its resolution of 1965 is clear: family planning is directed at the health of women. Similarly, the statement by the American Nurses Association in 1966 also does not confuse the issue, but the American Public Health Association urged study of population problems and again offered only the solution of family planning. The American Medical Association in its resolution on the subject speaks of population control, but it was obviously not their intent to go beyond making accepted methods of contraception available.

The courts offer no confusion in this matter. They speak of the rights of the people, not to the population problem.

We have traced the genesis of ambivalence in our expectations regarding family planning. Let us now examine briefly what can reasonably be anticipated from our current programs.

The effect of Federal family planning programs on the nation's fertility level is not quantifiable on the basis of limited information presently available.

The primary goal of federally supported family planning programs has not been reduction of the nation's birth rate but equal access to a health service resulting in improved health of mother and child. Findings of nationwide surveys show that the desired family size of the poor is the same as that of the non-

poor. Equal access to family planning services through subsidized programs should enable the poor to reduce their fertility to the level experienced by the nonpoor population.

We are already a nation of contraceptors. It is therefore difficult to separate the contribution of organized family planning programs to the reduction in fertility from that which results from intervening social, economic, and cultural variables. In addition to the availability and use of contraceptives, many factors influence fertility behavior. The proportion of women who marry, their ages at marriage, trends in complete fertility, the timing of births, the role of women in the family and the society as a whole, socio-economic forces—all have considerable influence on fertility of the nation.

Contraception has received wider acceptance in recent years, and modern contraceptive methods are more effective and easier to use than traditional ones. Rapid declines since 1960 in the probabilities of having fifth and higher order births are suggestive of possible improvements in control of fertility in the United States. Even among women with three children, the annual probability of having another child has declined considerably. It is only among women with none, one, or two previous births that the annual probability of having a child has remained at moderate levels. Childlessness and one or two child families are not in vogue yet.

It is obvious, therefore, that estimates of the effect of Federal family planning programs on fertility level of the nation can be considered only as approximations indicating an order of magnitude rather than precise estimates. They should serve as a working guide suggestive of the probable maximum effect under certain specified conditions. The most conservative and accurate statement that can probably be made at the present time is that federally supported family planning services will act as multipliers of undetermined strength to an already declining fertility rate in a nation where the number of unwanted children will remain formidable.

What course must we then plot if we are voluntarily to slow the advent of the third hundredth million citizen and prevent the birth of the four hundredth million.

We urgently need a forthright statement of options and

goals. This course may be politically difficult but it is the only way to make the issues stand clear so that a choice can be made. I believe that there are only two options to achieve an acceptable rate of growth of population: voluntarism or forced control. The latter approach is abhorrent to our thinking as a nation and has so great a potential for evil that it is unacceptable. To make voluntary population planning succeed, several elements are necessary:

1. A clarification of goals
2. Deceleration of growth of population.

Goals can be both long range and short range. Our short range goal has been set by the statements of President Nixon and the indicated purposes of the Family Planning and Population Research Act of 1970, namely, to give equal access of a public health service to all segments of our population.

The long range goal is the development of a population policy. Although we are by no means clear what the policy should be, we have taken the first steps toward its evolution. P.L. 91-572 mentions population research in its title and in three of its eight stated purposes.

Sec. 2. it is the purpose of this Act—

(1) to assist in making comprehensive voluntary family planning services readily available to all persons desiring such services;

(2) to coordinate domestic population and family planning research with the present and future needs of family planning programs;

(3) to improve administrative and operational supervision of domestic family planning services and of population research programs *related* to such services;

(4) to enable public and nonprofit private entities to plan and develop comprehensive programs of family planning services;

(5) to develop and make readily available information (including educational materials) on family planning and population growth to all persons desiring such information;

(6) to evaluate and improve the effectiveness of family planning service programs and of population research;

(7) to assist in providing trained manpower needed effectively to carry out programs of population research and family planning services; and

(8) to establish an Office of Population Affairs in the Department of Health, Education, and Welfare as a primary focus within the Federal Government on matters pertaining to population research and family planning, through which the Secretary of Health, Education, and Welfare (hereafter in this Act referred to as the "Secretary") shall carry out the purposes of this Act.

Although it is clear that the major thrust of the Act is the delivery of family planning services, the emphasis on population research indicates an unmistakable interest in a population policy.

Most significant, from the standpoint of a national population policy, was the request for a Commission on Population Growth and the American Future. The President asked this Commission:

- A. To chart the course of population growth and related demographic developments until the year 2000.
- B. To study the resources in the public sector of economy that will be required to deal with the anticipated growth in population.
- C. To ascertain ways in which population growth may affect the activities of Federal, State and local government.

The Congress added two precepts to the three requested by the President. Number four concerned the study of the effect of population on pollution; and number five the various means appropriate to the ethical values and principles of this society by which our Nation can achieve a population level properly suited for its environmental, natural resources, and other needs. This precept is a clear demand for a population policy.

While it does not define this policy in quantitative terms, it indicates that the direction should be toward declination of growth. The Interim Report of the Commission affirms its intent to develop such a policy, but also its intent to create a policy that will be flexible enough to change with changing conditions and increased knowledge.

How do we achieve decelerated growth? As I indicated, our

current program is a multiplier of a trend toward deceleration. Most of us in this room believe, however, that this particular multiplier, good as it may be, is, perhaps, too little and too late.

Sterilization should probably be a part of family planning. Most American families are completed at an early age when the wife may have as many as 20 years of fertility remaining. It is unrealistic to expect faultless performance of current contraceptives for this length of time. There is increased use of sterilization, both male and female, in this country and simpler and perhaps readily reversible sterilization techniques are in the offing.

Abortion is not a part of family planning, but in all countries it has acted as a deterrent to population growth. The estimated one million annual illegal abortions in the United States have already delayed the birth of the third hundredth million citizen. Recently, the legislatures have liberalized the abortion laws in 12 states and repealed them in four others. The constitutionality of restrictive abortion laws is on trial in our courts. These changes in law express the will of the people concerning the health hazard of illegal abortion and more importantly the rights of women. They do not express a concern for population growth but nevertheless they will exert a profound influence on it. Any population policy must give attention to abortion. Abortion is a mechanical and crude way to control fertility; it is repugnant to many of our people. It need not always be a factor of importance in population planning. Research may very soon make abortion, as we know it, a rare and even unnecessary procedure.

Research on better means of fertility control is an important ingredient in the implementation of a population policy. The changes of a successful research effort are vastly better and the points of attack much more varied now than they were just three years ago.

We need an expanded educational program. This program should go beyond "bread and butter contraception." It should use modern techniques of communication to inform the people of all the things we have been talking about. In particular, it should bring home to the individual his stake in the population problem and his profit in its control.

There should be expanded opportunities for women. We should make planned, not token, gestures in this direction. As is true about so many of my points, maybe the people are already ahead of us.

In the United States we may be lucky. The desires of the people seem to coincide with the needs of the nation and with scientific development. Even with these advantages there are many legislative and ethical problems that must be carefully evaluated before we can develop a population policy. If we can indeed solve our own problem, we can not ignore the population problems of the world. We are not an island.

BE GOOD TO THE LITTLE PEOPLE

The *Saturday Review* is mostly an erudite publication, dealing with books, music and contemporary problems. But it does have one page called "Trade Winds," which touches on the lighter side. This page recently presented a list of class standards as written by sixth graders in a California school at the request of their teacher. Here are a few of them, with the spelling unchanged.

Be good to the little people.

Listen to the teacher when she is talking or yelling.

Don't be a taital tail.

Try not to hit your classmates.

Don't bother the Princeble.

Youse are time wisely.

Leave your treshures at home.

Wash your language.

—*The Colonial Crier*, July-Aug., 1971
Colonial Hospital Supply Company
Chicago, Illinois

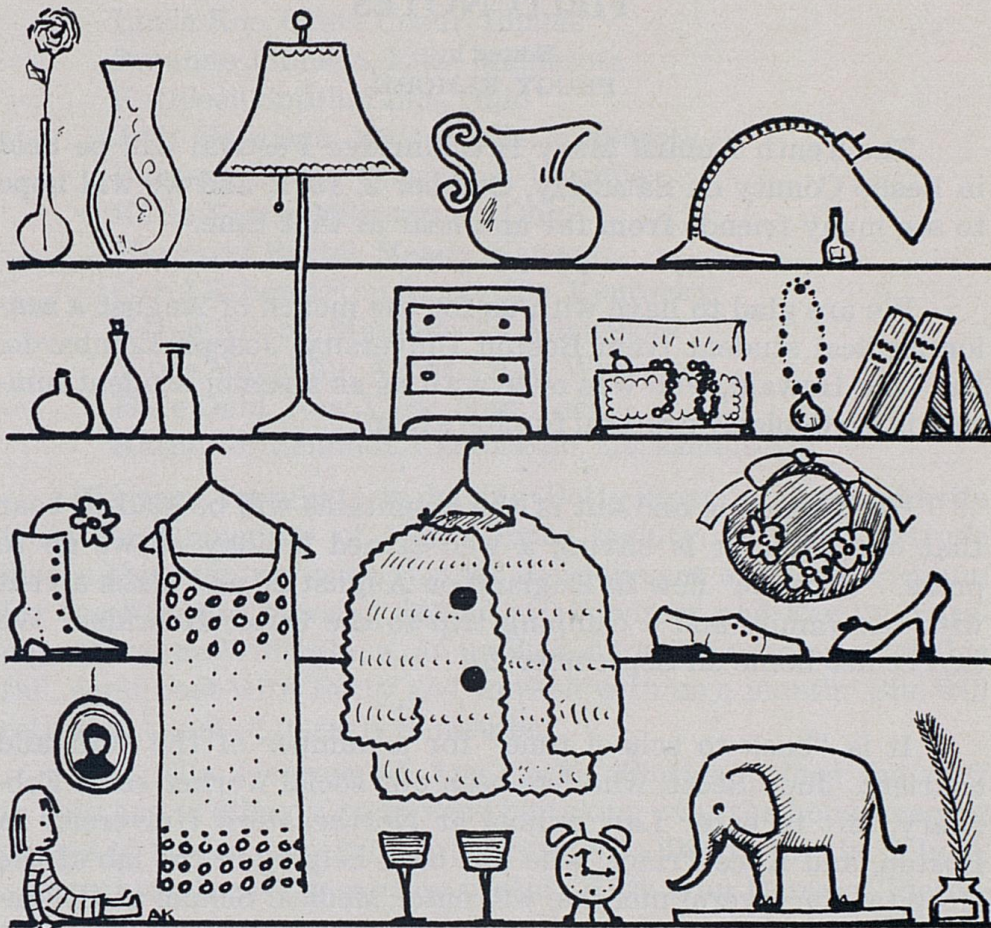


GREETINGS

This enchanting silhouette appeared on the front cover of both the Autumn 1940 and Autumn 1968 Quarterly Bulletins. Everyone admired it so much that it now graces the FNS gift card! You, our readers, may be interested to know when any donation is received by the Frontier Nursing Service in lieu of gifts to family and friends to honor special dates or events such as Christmas, we mail this charming card with the requested greeting.

—E.H.M.

WHITE ELEPHANT



DON'T THROW AWAY THAT WHITE ELEPHANT

Send it to FRONTIER NURSING SERVICE
1579 Third Avenue, New York, New York 10028

You don't have to live in or near New York to help make money for the Nursing Service at the Bargain Box in New York. We have received thousands of dollars from the sale of knickknacks sent by friends from sixteen states besides New York. The vase you have never liked; the ornaments for which you have no room; the party dress that is no use to shivering humanity; the extra picture frame; the old pocketbook; odd bits of silver; old jewelry—There are loads of things you could send to be sold in our behalf.

If you want our green tags, fully addressed as labels, for your parcels—then write us here at Wendover for them. We shall be happy to send you as many as you want by return mail. However, your shipment by parcel post or express would be credited to the Frontier Nursing Service at the Bargain Box if you addressed it

FRONTIER NURSING SERVICE
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FIELD NOTES

Edited by
PEGGY ELMORE

The Tenth Annual Mary Breckinridge Festival will be held in Leslie County on Saturday, October 2, 1971, and we will hope to see many friends from far and near at that time.

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We are glad to have with us for the month of August a senior medical student from Boston University, Joseph Lombardo. Dr. Tom Howald, who was once with us as a senior student himself, is particularly grateful for Joe's help!

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Her friends in and out of the mountains will be glad to hear that our Director is having a well-earned holiday as we go to press. "Brownie" flew to England on August 20 and plans a visit with her family and a camping trip to the Outer Hebrides. We expect her home on September 20.

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It is "back to school time" for a number of the staff and couriers. Judy Scott, who has been our social worker since February, left to enter Law School at Northeastern University in Boston, and Alice Prince, who has been helping in the lab at the Hospital for several months, will enter Medical School at Columbia University. Sally Steeves, who has been the senior courier at Wendover for many months, will soon return to Scripps College in California. Agnes Cornett, who worked in Miss Browne's office while Ellen Howard was recovering from a nasty fracture of the humerus, will enter Cumberland College in Williamsburg, Kentucky, early next month. Margaret Martini, a licensed practical nurse who has been on Hyden District this past year, will enter the baccalaureate nursing program at Berea College in September. And Lorraine Weber, who has helped keep Wendover clean and its staff fed for a number of years, entered Lees Junior College in Jackson, Kentucky, on August 23. Our best wishes go with all these girls.

As some leave to further their education, others come to learn with us. We are pleased to welcome to our nursing staff:

Judy Gordon, Cincinnati, Ohio

Carolyn Ruth, Evanston, Illinois
Linda Roe, Creve Coeur, Illinois
Suzanne Johnson, Effie, Minnesota
Kathleen Smith, Lima, Ohio
Judy Haralson, Minneapolis, Minnesota
Barbara Kinzie, Courtland, Virginia
Katie Yoder, Millersburg, Ohio
Margaret Bartel, Meade, Kansas
Carol Etherington, Louisville, Kentucky
Karen Knapp, Minneapolis, Minnesota
Marie Margitan, Arbor Vitae, Wisconsin
Elsie Dahl, New York, New York
Katherine Schmidt, Cambridge, Massachusetts

We were fortunate in having Betty Bear, a nurse-midwife from the University of New Mexico faculty, to help Gertrude Isaacs this summer with further development of the curriculum for the Frontier Nursing School of Midwifery and Family Nursing. Rexanne Willingham, an applicant for the nursing staff this fall, came east with Betty and worked with us a month. She will return to the staff in early September.

Mrs. Ella Jacobsen of Apa Locka, Florida, joined the staff in July and is filling a great need by taking over the housekeeping chores at Hyden, supervising the reference library for the School, and making herself generally useful. Ruth Ann Dome of Pierceton, Indiana, is our new social worker. Judy Asher of Wootton and Fay Napier of Clay County have joined the Wendover office staff, and Evelyn Pace, who worked at Wendover during her summer vacations from college, is now in the Hyden Hospital business office. When Alice Whitman, the Office Manager at Hyden, became ill in August, Evelyn and Ruby Moore assumed the responsibility for the smooth running of business affairs at Hyden. We are happy to report that Alice hopes to return to Hyden in October.

Many of our readers will remember Hope Muncy who was, for many years, on the staff of the Frontier Nursing Service—as secretary to the Medical Director, as secretary to Mrs. Breckinridge, and as Medical Records Librarian. Those of you who did not know her personally will remember the occasional delightful stories about the mountains which she wrote for the Quarterly

Bulletin. It was with regret that we said goodbye to Hope this summer when she left to be near her mother who is in poor health.

We were fortunate to have Venita Estep, who had worked with Hope for some months, to take over the Medical Records post. Venita has rapidly mastered the intricacies of the PAS/MAP Program and will soon begin a correspondence course in Medical Records. Ruby Hoskins, who is in charge of hospital supplies, has begun a correspondence course in Hospital Purchasing, and several of our staff completed a course in Medical Terminology offered by the Hazard Community College this spring.

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We are pleased to introduce Philip P. Isaacs of Winnipeg, Canada, to our Bulletin readers. Phil is an administrative assistant to the Director and is presently helping to implement and further refine our accounting system, and with the organization of maintenance at Hyden Hospital. When construction begins on the new hospital, Phil will act as the owner's representative to work with our architect and the contractors. Mrs. Isaacs will be joining her husband in Kentucky in early September.

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Seven young women have been with us during the summer to help Kate and Sally Steeves with the myriad activities of the Courier Service. Sandra Spicer, Barrington, Rhode Island, Emily Davies, Cincinnati, Ohio, Nancy Martz, Boulder, Colorado, Audrey Newell, Rumson, New Jersey, Mary (Holly) Hauserman, Cleveland, Ohio, Emily Fuller, York, Maine, and Frances Frick, Alpine, New Jersey, have all been most useful.

Cathy Hoffman, who had been a courier earlier in the year, returned this summer as a social service aide, and Sally Kundert continued her activities with young children at the Beech Fork Center until late July when she returned to her home in Excelsior, Minnesota.

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Some of you have been kind enough to comment on the article in the last Bulletin entitled COMMUNICATIONS. So you may be interested in a "progress report" on telephones. Well, at the moment, the grapevine still has a slight edge! We have learned to cope with the routine operation of the new system at Wendover, but not with some of its rather peculiar features.

For instance, if the electricity goes off for any reason, the phones go off too. We can't use the intercom, we can't dial anyone outside, and, even worse, we can't answer the phone when it rings for an incoming call. We can't help but feel that *something* needs to be done to correct this problem. With the old system we could at least make and receive outside calls! As yet, installation of the new system has not been completed at Hyden Hospital so we do not have direct intercom communications between the Hospital and Wendover.

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FNS staff members had the pleasure of attending the Dedication of the Memorial Hospital in Manchester, Kentucky, followed by an Open House, on Sunday, July 25, 1971. This new facility replaces the Oneida Mountain Hospital at Oneida, some twenty miles from Manchester.

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Our dear Agnes Lewis spent several weeks with us this summer, taking on, as she always does, a number of important projects.

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We are grateful to our National Chairman for a shipment of furniture to replace some of the old and worn furnishings in many of our buildings.

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Our guest list for the summer of 1971 was headed by our dear friend and Trustee, Miss Margaret Gage of Los Angeles, California, and by Mme. Jeanne Rouamba, wife of the Ambassador to the United States from Upper Volta. Mme. Rouamba, a nurse-midwife herself, was most interested in the health services we offer mothers and children. Other health professionals who spent from two days to two weeks with us have included:

Drs. K. L. Bai and Amla Rama Rou, obstetricians from India,
Mrs. Chusie Sujpluem, a nurse-midwife from Thailand,
Mrs. Perpetua W. Kanyoko, a nurse-midwife from Kenya,
Dr. Juan Pizarro, a public health officer from the Philippines,
Drs. S. S. Tulachan, H. B. Shrestha, M. Joshi, and P. P. Rijal,
physicians from Nepal,
Mr. Teshome Demeke, from the Public Health College in Gondar, Ethiopia,

- Dr. Brooks Ranney of the American College of Obstetricians and Gynecologists, with his wife and daughter, from Yankton, South Dakota,
Dr. and Mrs. Allan B. Crunden of Monclair, New Jersey,
Dr. Lillian Runnerstrom, a nurse-midwife from Chicago,
Dr. Samuel M. Putnam of the University of North Carolina who brought with him two nurses who are working with him in a nurse practitioner program in North Carolina, Mrs. Sandra Hogan and Mrs. Evelyn Arbel,
Dr. Hillary E. C. Millar of Washington whose HEW Office sends us many foreign guests, and
Dr. Michael Scott of Philadelphia who came down with Mrs. Scott to visit Judy and was so kind as to lecture to our staff and students on head injuries.

In early August we arranged a day-long seminar for twenty-two foreign physicians, nurses and health administrators who came to Hyden under the auspices of the Government Affairs Institute. We were gratified to receive the following letter from the representative of Government Affairs Institute who accompanied this group:

"There can be no question that our visit to FNS was a big success from our point of view. Everything that our participants heard and saw was directly relevant to our 'seminar' and served to underline and reinforce much of the classroom work.

"As for the participants themselves, they rated their visit to FNS as their top field experience and several ranked it as one of the most important parts of the entire seminar."

We were pleased to catch a glimpse of several old couriers and old staff members during the summer. Janet Hudson, Kristy Davis Taylor and her husband, Sally Humphrey and her attractive small daughter, Pris Craw, back from Nigeria, Darline Wilke, Cynthia Gould, Delphine Jewell, and Anne DeTournay Boyer and her husband were welcome guests. A number of Lexington friends have paid us brief visits—Dr. and Mrs. Tom Nuzum spent a night on one of the many Saturdays that he has come to lecture to the students, Dr. Francis Massie came up for a day, Dr. and Mrs. William Jordan and their son and daughter spent a night in late August, Christopher Combs spent a week end with us, and Mr. Rex Potter, Mr. Stanley Jones and Mr. Bill Hainsworth were here to present our annual audit.

Mrs. C. Fenno Hoffman of Cambridge, Massachusetts, came

down to spend a few days with her daughter, Cathy. We enjoyed her very much and know how much her fellow guest, Mme. Rouamba, appreciated the excellent French she spoke! Mr. and Mrs. Don P. Davies of Cincinnati and Mrs. William Hauserman of Cleveland brought their daughters to Wendover when they joined the Courier Service.

Our staff have had many personal friends and family members visit them in the mountains and we have discussed our work with numerous medical and nursing students who were spending a summer in Appalachia with SAMA or ALCOR.

. . . .

The district and hospital nursing staff took time off from more serious pursuits to challenge each other to a softball game in celebration of the Fourth of July. Any staff member or guest who felt able to hobble on to the field was welcome to play so each team was able to put approximately 17 people in the outfield. In spite of the congestion no serious injuries were incurred. We don't recall the exact score but it can be reported that the hospital won!

READERS' MOTORING TALES—149

From time to time I have to journey to Rochester and park my car in the cathedral precinct. I first saw Pookey, a large fluffy cat, asleep on a car bonnet. I noticed that, during the short time I was there on business, he sometimes changed cars. The weather turned colder, and one day as I drove in I saw Pookey in the distance, but had barely halted when he was alongside and, as soon as the engine stopped, he was on the bonnet. I wondered how long he took to realise that the last car in was the warmest.—Norman G. Suffield

—*The Countryman*, Summer 1971, Edited by
Crispin Gill, Burford, Oxfordshire, England.

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S.C.M. stands for State Certified Midwife and indicates a nurse, whether American or British, who qualified as a midwife under the Central Midwives Boards' examination of England or Scotland and is authorized by these Boards to put these initials after her name.

C.M. stands for Certified Midwife and indicates a nurse who qualified as a midwife under the Kentucky Department of Health examination and is authorized by this Department to put these initials after her name.

FORM OF BEQUEST

For the convenience of those who wish to remember the Frontier Nursing Service in their wills, this form of bequest is suggested:

"I hereby give, devise and bequeath the sum of _____ dollars (or property properly described) to the Frontier Nursing Service, a corporation organized under the laws of the State of Kentucky."

HOW ENDOWMENT GIFTS MAY BE MADE

The following are some of the ways of making gifts to the Endowment Funds of the Frontier Nursing Service:

1. **By Specific Gift under Your Will.** You may leave outright a sum of money, specified securities, real property, or a fraction or percentage of your estate.
2. **By Gift of Residue under Your Will.** You may leave all or a portion of your residuary estate to the Service.
3. **By Living Trust.** You may put property in trust and have the income paid to you or to any other person or persons for life and then have the income or the principal go to the Service.
4. **By Life Insurance Trust.** You may put life insurance in trust and, after your death, have the income paid to your wife or to any other person for life, and then have the income or principal go to the Service.
5. **By Life Insurance.** You may have life insurance made payable direct to the Service.
6. **By Annuity.** The unconsumed portion of a refund annuity may be made payable to the Service.

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The principal of the gifts will carry the donor's name unless other instructions are given. The income will be used for the work of the Service in the manner judged best by its Trustees.



FRONTIER NURSING SERVICE, Inc.

Its motto:

“He shall gather the lambs with his arm
and carry them in his bosom, and shall
gently lead those that are with young.”

Its object:

To safeguard the lives and health of mothers and children by providing and preparing trained nurse-midwives for rural areas in Kentucky and elsewhere, where there is inadequate medical service; to give skilled care to women in childbirth; to give nursing care to the sick of both sexes and all ages; to establish, own, maintain and operate hospitals, clinics, nursing centers, and midwifery training schools for graduate nurses; to educate the rural population in the laws of health, and parents in baby hygiene and child care; to provide expert social service, to obtain medical, dental and surgical services for those who need them at a price they can afford to pay; to ameliorate economic conditions inimical to health and growth, and to conduct research towards that end; to do any and all other things in any way incident to, or connected with, these objects, and, in pursuit of them, to cooperate with individuals and with organizations, whether private, state or federal; and through the fulfillment of these aims to advance the cause of health, social welfare and economic independence in rural districts with the help of their own leading citizens.

Articles of Incorporation of the
Frontier Nursing Service, Article III.

DIRECTIONS FOR SHIPPING

We are constantly asked where to send gifts of layettes, toys, clothing, books, etc. These should always be addressed to the **FRONTIER NURSING SERVICE** and sent either by parcel post to **Hyden, Leslie County, Kentucky 41749**, or by freight or express to **Hazard, Kentucky**.

Gifts of money should be made payable to

FRONTIER NURSING SERVICE,

and sent to the treasurer

MR. EDWARD S. DABNEY

Security Trust Company Building

271 West Short Street

Lexington, Kentucky 40507



Photograph by Virginia Branham

On the front cover of this Bulletin we proudly present the architect's rendering of our new hospital. Above, we reprint a familiar picture of Hospital Hill showing the many buildings which comprise our medical headquarters. The site for the new hospital is on level ground almost directly underneath the roof which can be seen at the bottom of this photograph.

