

# National Health Federation



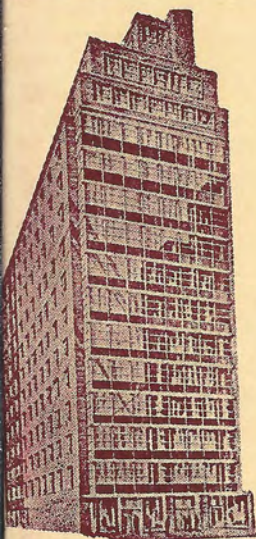
## HEALTH FUND SPECIAL

<i>Take Up Your Pen.....</i>	<i>Page 2</i>
<i>Family Circle.....</i>	<i>Page 3</i>
<i>Washington Office Report .....</i>	<i>Page 7</i>
<i>Osteopathic Group Objects to AMA Merger.....</i>	<i>Page 11</i>
<i>With N.H.F. Washington Counsel.....</i>	<i>Page 13</i>
<i>Truth Will Prevail — Editorial.....</i>	<i>Page 15</i>
<i>Governor Brown Betrays Californians.....</i>	<i>Page 17</i>
<i>Donors, Drives and Dollars.....</i>	<i>Pages 21 to 35</i>

## AMERICANS CRUSADING FOR BETTER HEALTH

Volume VIII—Number 5

May, 1962



Site of our Washington Office  
1012 - 14th St. N. W.

# BULLETIN

## Take Up Your Pen

"No king ever wielded a sceptre more powerful than a five-cent pencil in the hands of an American citizen when he sits down to write his Congressman." — Senator Norris Cotton

We suggest each of our readers take time, in May, to write to The Honorable Abraham A. Ribicoff, Secretary of Health, Education and Welfare, Washington, D. C. A sample letter follows:

The Honorable

Abraham A. Ribicoff

Secretary of Health, Education and Welfare.

My dear Mr. Secretary:

Your top level investigation of the U.S. Public Health Service and the Grand Jury investigation by the Justice Department of the Food and Drug Administration are the two most heartening news items of this century. This is especially true if you do not let them suppress its publicity, nor let them stop the investigation until they have exposed the apparent tie-up of the U. S. Public Health Service, the Food and Drug Administration, the American Medical Association, the drug and chemical interests and the food processors, which many have reason to believe exists. This combination has so strangled this country that, individually and collectively, we are physically the sickest and weakest of any first, second or third rate nation.

In this castigation we do not include the rank and file of medical doctors, but rather the Fishbein type who control the politics and the policy making of the medical profession, against the will and freedom of the individual doctor.

A vigorous prosecution of these two investigations by you will imprint your name in history as one of America's great benefactors.

Sincerely Yours

Name .....

Address .....

Regardless of how well you can write, send a letter. The Secretary does not care about your writing ability. What he wants to know is what you want him to do.

If you have on hand some of the Federation's Victory Stamps, we suggest that you stick one on the paper on which you write. **Put it in the upper left hand corner of the paper.** When a public servant gets these letters each stamp will remind him of the strength of the National Health Federation. On another page you will find two more sample letters — one to President Kennedy and one to Congressman Herlong. These letters are equally important.

# The NATIONAL HEALTH FEDERATION

VOLUME VIII

NUMBER 5

## BULLETIN

*Adventures on Health Frontiers*

*Published Monthly*

MAY

1962

## Family Circle

By FRED J. HART

Thanks to each and every one of you who, by your prayers, your expressions of sympathy, and your generous donations to the fund in memory of my wife, and the beautiful cards you sent me, have helped to sustain me in this my hour of trial.

The following verse was sent to me by Jean M. Cross, one of our members. I want to share it with you.

If I should die and leave you here a while,  
Be not like others, Sore undone, who keep  
Long Vigil by the silent dust and weep.  
For my sake turn again to life and smile,  
Nerving thy heart and trembling hand to do  
That which will comfort other souls than  
thine;

Complete these dear unfinished tasks of  
mine,

And I, Perchance, May therein comfort you.

— Mary Lee Hill.

Jean came across this verse in a book "Let Not Your Heart Be Troubled," by James Dalton Morrison.

Jean closed her letter with this wonderful thought:

"A thought, a friend, a word, a deed,  
is often just the thing we need, to make  
this earth a brighter spot and help to  
carry on the lesson taught.

Thanks again to each of you for doing  
just that.

MAY, 1962

Note: If any of you would like to get the book from which the poem above was taken, we are sure if you will send a stamped self-addressed envelope to Jean M. Cross, 1304 Elm Street, Alhambra, California, she will be glad to tell you the price and where to send to get a copy.

### Special Issue of the Bulletin

The main theme of this issue of the Bulletin is the need to require organizations which raise funds from the general public for the purpose of caring for the sick, or doing research in the field of disease and health, to give a detailed financial statement of the disposition of all funds raised the previous year. Failure to do so would cause such an organization to lose its tax exemption on gifts, until such was done. There are some 37 of such organizations and at present there is no law, on the Federal level, which requires such an accounting of the expenditure of the people's money. The lack of such a requirement encourages extravagancies and waste.

To remedy this situation, Representative Herlong of Florida has prepared and introduced into this session of Congress H.R. 9319. This bill does not concern itself with religious organizations,

(Continued next page)

etc. The organizations concerned are in the field of health.

If after reading the bill and the information contained in this issue, you feel the legislation is needed and is fair and just, you should write to Congressman Herlong and congratulate him on the introduction of the bill and promise him your support in securing its enactment into law. This bill is in keeping with the program of the National Health Federation, and is part of our crusade for better health.

#### **Please understand**

Nothing in this issue of the Bulletin is to be interpreted to mean, or infer the National Health Federation is opposed to such organizations, their raising of funds from the public or their attempts to solve the health problems of the nation. We do, however, infer such organization should give a true and detailed report of their expenditures to the people and the government, whose funds they have been entrusted with, and that no organization should object to such, unless they have something to hide.

#### **The June Issue**

The main theme of the June issue will be the setting forth of the facts about fluoridation, in support of H. Resolution 514, House Resolution 515 and House Resolution 516, by Congressman Baring of Nevada, (Note that the Herald of Health will carry a featured story about Congressman Baring and his fight to stop the Federal government from continuing to act as salesman for the manufacturers of Fluorides.

#### **The July Issue**

The July issue of the Bulletin will

have as its main theme the great Drugless Profession, which ministers to some 30 million Americans, and which the infamous "Quackery Congress," launched a drive to destroy.

#### **It would help**

If any of our members are interested in purchasing extra copies of either of these two issues, it would help us greatly, and save the Federation money, if such members would advise us at the earliest possible moment as to the number of copies they would like to have. Such advice would enable us to estimate how many copies of the Bulletin we should order on the first press run. If later circumstances are such that you cannot use the number ordered, no harm will be done.

#### **Compulsory Vaccination or Immunization**

The Attorney General of California, advises "there is no California State Law which compels any one to be vaccinated, or immunized against any disease, including Polio, unless he or she desires or consents thereto. Please note this has to do with state law and not local ordinances, etc.

#### **DR. PFEIFFER DIES**

Ehrenfried Pfeiffer, Ph.D., nationally-known biologist and long-time head of the Bio-Dynamic Laboratory, Spring Valley, N. Y., died November 30. A pioneer in the field of natural farming in Europe and United States, he wrote many articles and lectured extensively. Among his better-known books was "The Earth's Face and Human Destiny."

## **Health Food Dinners**

The Atascadero Chapter of the National Health Federation has come up with a novel idea for raising additional funds to help support the work of the Federation at Washington.

They propose to give Health Dinners at \$1.00 per plate. The dinners will be held at different homes and at different times. The profits from the enterprise will be sent to the Federation for us in Washington, D. C.

In addition to the dinner, a program will be given. This program will include a speaker on some health problem. Such a program has a three fold benefit. 1—It will acquaint folks with the taste of good wholesome food, 2—It will raise needed funds and 3—It will expose the participants to some good sound health truths.

We urge other health groups, whether or not they are chapters of the Federation, to try out this project for the same purposes. The Federation is fighting the battle for all health-minded folks and all health groups should help pay the Washington expenses.

## **Keep up the Good Work**

Many hundreds of members have purchased extra copies of the November-December, and the January issue of the Bulletin. The demand has been so great we have had to have three additional press runs of each issue.

We now have on hand a liberal supply of both issues. The November-December issue contained the Federation's answer to Dr. Stare, while the January issue exposed what is going on in our schools under the guise of "Youth Counseling."

This latter issue should be in the hands of every church and every post

of the American Legion and other organizations interested in the welfare of our Country and the mental health of our children. We urge more of our members to help accomplish this purpose by purchasing copies of the January issue and distributing it where it will do the most good.

## **Special Announcement**

The June issue of the Herald of Health will carry an illustrated special feature article about the largest organically farmed citrus and fruit orchard in the world and detail some of the problems the owner has had to face in order to make available natural and organically grown fruit. It is almost unbelievable. We urge each of our readers to read it. If any of you who read this item are not subscribers to this fine magazine, we urge you to subscribe immediately. The subscription rate is \$3.50 per year. If you are not now a subscriber and are a member of the National Health Federation, Don Matchan, the Editor, offers you for the next 60 days a special rate of \$3.00. The address is Herald of Health, 709 Mission St., San Francisco, California. If you desire a single copy, the price is 25 cents.

## **If You Are Interested**

John C. Eshleman of Greencastle, Pennsylvania is the head of "Better Foods Incorporated" a farm co-operative for the marketing of natural foods, grown without the use of chemicals and marketed in the same manner. The co-operative will process and handle among other items, Yogart, Honey, beef, poultry and vegetables so writes a member from Hagerstown, Maryland. The address is, Better Foods Incorporated, Greencastle, Pennsylvania.

National Health Federation Bulletin is published monthly, January through June, and bi-monthly July through December at 709 Mission St., San Francisco 3, Calif., by National Health Federation, a non-profit corporation. Fred J. Hart, Editor-Publisher. Subscription rate \$3.00 per year, included in membership dues. Single copies 25c. Second class postage paid at San Francisco, Calif.

## Come Join With Us

To adequately finance the National Health Federation, we, in the April issue of the Bulletin, inaugurated what is to be known as "The Three Hundred Club." To do this we established a life membership fee of \$100.00. All Life Members will automatically become members of this club. The last issue is just now reaching the members and we are happy to announce that, as of the date this issue of the Bulletin goes to press we have 19 toward our goal of 300. We absolutely must reach this goal by the end of this year.

The Federation has now reached a size both in numbers and program where it can no longer function properly without some working capital. These life memberships will furnish such capital. We urge each one of our readers, if they can afford to do so, to join. Your president belongs and gets a great deal of satisfaction out of the fact he no longer has to worry as to whether or not his dues are paid.

COME JOIN THE BAND.

## National Dietary Foods Assn. Special Bulletin

In the interest of clarification, we ask you to note the following information:

The National Dietary Foods Association has no connection with the National Protective Corporation. The National Protective Corporation is a private corporation collecting funds, part of which, it says, will be given to the National Dietary Foods Association.

N.D.F.A. does not have any arrangement with this corporation — has no control over it, and it can not give to its membership any information as to

what the future course of action of the National Protective Corporation will be.

The above statement was authorized by the Executive Committee of the National Dietary Foods Association and the executive secretary was directed to send it to all members.

NATIONAL DIETARY FOODS ASSN.  
Stanley N. Phillips,  
Executive Secretary

## In Memoriam

Since last this column appeared in the Bulletin, we have received donations from Margaret Forest of Mill Valley California in memory of the passing of Dr. Mary S. Coffman of Seattle, Washington; from Mrs. V. Schlemmer of Sacramento, California in memory of Dr. Daniel W. Abels of Sacramento; from the Kitsap County N.H.F. Chapter of Bremerton, Washington in memory of Mr. Earl Kimble of Bremerton; from Mrs. Anna A. Williamson of Alderpoint, California in memory of Mrs. Hilda Peterson of San Francisco; from Myrtle A. Velk of Fresno, California in memory of Ruby J. Seuffe of Fresno and from the American Legion and Auxiliary of the George A. Thompson Post No. 544 of Alderpoint, California.

This is a very practical way of remembering departed loved ones and friends.

## If You Want a Booth

Those of our readers who want a booth at the coming Mid-West National Health Federation Convention, at Columbus, Ohio, July 1-2-3-4 should write to the Federation at San Francisco for complete information. This will be the largest and best convention the Federation has ever staged. Our goal is 1,000 registered members and guests.

NATIONAL HEALTH FEDERATION BULLETIN

# N.H.F. WASHINGTON OFFICE REPORT

By Clinton R. Miller

## S-2910 Red Light Bill

Sen. Lister Hill (D)

Alabama

&

## H.R. 10541 Red Light Bill

Rep. Oren Harris (D)

Arkansas

These bills are identical. To be known as the "VACCINATION ASSISTANCE ACT OF 1962", the bill is far more than that. Nothing could be broader than the declared intention of the bill to support programs for the control of polio, etc. — "and against other diseases which may in the future become susceptible of practical elimination as a public health problem through such programs." This could include fluoridation, drugs for mental illness without limit, etc., etc. On page 2, line 18, we find these words — "in connection with any other diseases of an infectious nature which the Surgeon General finds to be a public health problem — susceptible of practical elimination — through intensive immunization activity — with vaccines, OR OTHER PREVENTIVE AGENTS WHICH MAY BECOME AVAILABLE IN THE FUTURE." (EMPHASIS OURS)

These bills have all the more importance for immediate action because they were introduced by the chairmen of the committees that will consider them. Oren Harris, of Arkansas is Chairman of the Interstate and Foreign Commerce committee of the House of Representatives. Senator Lister Hill of Alabama is Chairman of the Committee on Labor and Public Welfare of the

Senate. This is an administration favored bill. President Kennedy asked for this type of program in a message to Congress. This virtually assures that both bill will have hearings. While neither bill sets aside any money, the administration has estimated the cost over a three year period as follows: \$9.5 millions for 1963, \$13.4 millions for 1964, and 10.7 millions for 1965. This would give it a much broader scope than the polio vaccination drive of several years ago on Salk vaccine. Vaccination would not be compulsory, it is said, but it has been made clear that persuasion, publicity, and ridicule will be used in a drive to make coverage total.

**IMPORTANT:** Don't neglect to write just because you know, or think you know that the committee member is for the bill. This Congress has stood up to Administration backed bills and defeated them, and if you can flood these committee members with letters convincing them that S 2910, an H.R. 10541 are not popular bills, they may never come up for a floor fight. Be sure to write those you think favor the bills.

---

---

---

**The Bill Follows  
on Next Page**

# S. 2910

## IN THE SENATE OF THE UNITED STATES

March 1, 1962

Mr. Hill introduced the following bill; which was read twice and referred to the Committee on Labor and Public Welfare

# A BILL

To assist States and communities to carry out intensive vaccination programs designed to protect their populations, especially all preschool children, against poliomyelitis, diphtheria, whooping cough, and tetanus, and against other diseases which may in the future become susceptible of practical elimination as a public health problem through such programs.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*  
3 That this Act may be cited as the "Vaccination Assistance  
4 Act of 1962".

5 SEC. 2. Part B of title III of the Public Health Service  
6 Act is amended by adding after section 316 the following  
7 new section:

1 "GRANTS FOR INTENSIVE VACCINATION PROGRAMS  
2 "SEC. 317. (a) There are hereby authorized to be ap-  
3 propriated for the fiscal year ending June 30, 1963, and  
4 each succeeding year, such sums as may be necessary to  
5 enable the Surgeon General to make grants to States and po-  
6 litical subdivisions or instrumentalities of the States under  
7 this section. Such grants may be used to pay that portion of  
8 the cost of intensive community vaccination programs against  
9 poliomyelitis, diphtheria, whooping cough, and tetanus which  
10 is reasonable attributable to (1) purchase of vaccines needed  
11 to protect children under the ages of five years and (2) sal-  
12 aries and related expenses of additional State and local health  
13 personnel needed to promote and organize such programs,  
14 and personnel and related expenses needed to maintain ad-  
15 ditional epidemiologic and laboratory surveillance occasioned  
16 by such programs. Such grants may also be used to pay  
17 similar costs in connection with intensive community vac-  
18 cination programs against any other diseases of an infectious  
19 nature which the Surgeon General finds represents a major  
20 public health problem in terms of high mortality, morbidity,  
21 disability, or epidemic potential and to be susceptible of prac-  
22 tical elimination as a public health problem through intensive  
23 immunization activity over a limited period of time with  
24 vaccines or other preventive agents which may become avail-  
25 able in the future.

Note: Senator's Address — Senate Office Bldg.  
Congressmen — House Office Bldg., Washington, D. C.

1 "(b) For purposes of this section an 'intensive com-  
2 munity vaccination program' means a program of limited  
3 duration which is so designed and conducted as to achieve,  
4 with the cooperation of practicing physicians, official health  
5 agencies, voluntary organizations, and volunteers, the im-  
6 munization over the period of the program of all or practically  
7 all susceptible persons in a community, particularly children  
8 who are under the age of five years, and which includes  
9 plans and measures looking toward the strengthening of on-  
10 going community programs for the immunization of infants  
11 and for maintenance of immunity in the remainder of the  
12 population. No grant may be made under this section with  
13 respect to an intensive community vaccination program  
14 against poliomyelitis, diphtheria, whooping cough, and tet-  
15 anus which begins after June 30, 1965.

**Urgent Action:** We are listing below all the members of the two committees which will consider these bills. Write to the members of the committee from your state first, and then to all the others. As soon as you get a reply that a member of the committee is opposed to the bill, forward the information to the NHF Washington Office — 1012 -

14th St. N. W., Washington, D. C. You should also write to your own congressmen and Senators, and when you find some congressman who will oppose the bill when it comes on the floor, forward his name to the NHF Washington Office. Concentrate first on all committee members.

The Senate committee members to write on S. 2910 are:

### LABOR AND PUBLIC WELFARE COMMITTEE OF THE SENATE

Sen. Lister Hill, (D), of Alabama, *Chairman*  
Sen. Pat McNamara, (D), of Michigan  
Sen. Wayne Morse, (D), of Oregon  
Sen. Ralph W. Yarborough, (D), of Texas  
Sen. Joseph S. Clark, (D), of Penn.  
Sen. Jennings Randolph, (D), of West Virginia  
Sen. Harrison A. Williams, (D), of N. J.  
Sen. Quentin N. Burdick, (D), of N. Dak.

Sen. Benjamin A. Smith II, (D), of Mass.  
Sen. Claiborne Pell, (D), of Rhode Island  
Sen. Barry Goldwater, (R), of Arizona  
Sen. Jacob K. Javits, (R), of New York  
Sen. Winston L. Prouty, (R), of Vermont  
Sen. Towers, (R), of Texas  
Sen. Maurice J. Murphy, Jr., (R), N. H.

The House of Representative Committee Members to which you should write regarding H. R. 10541 (which is identical to S-2910) are:

### Interstate and Foreign Commerce Committee of the House of Representatives

Rep. Oren Harris, (D), of Arkansas  
Rep. John Bell Williams, (D), of Miss.  
Rep. Peter F. Mack, Jr., (D), of Ill.  
Rep. Kenneth A. Roberts, (D), of Ala.  
Rep. Morgan M. Moulder, (D), of Missouri  
Rep. Harley O. Staggers, (D), of West Virginia  
Rep. Walter Rogers, (D), of Texas  
Rep. Samuel N. Friedel, (D), of Maryland  
Rep. John James Flynt, Jr., (D), of Georgia  
Rep. Torbert H. MacDonald, (D), of Massachusetts  
Rep. George M. Rhodes, (D), of Penn.  
Rep. John Jarman, (D), of Oklahoma  
Rep. Leo W. O'Brien, (D), of New York  
Rep. John E. Moss, (D), of Calif.  
Rep. John D. Dingell, (D), of Michigan  
Rep. Joe M. Kilgore, (D), of Texas  
Rep. Paul G. Rogers, (D), of Fla.

Rep. Robert W. Hemphill, (D), of South Carolina  
Rep. Dan Rostenkowski, (D), of Ill.  
Rep. James C. Healey, (D), of New York  
Rep. John B. Bennett, (R), Mich.  
Rep. William L. Springer, (R), of Ill.  
Rep. Paul F. Schenck, (R), Ohio  
Rep. J. Arthur Younger, (R), Calif.  
Rep. Harold R. Collier, (R), Ill.  
Rep. Milton W. Glenn, (R), N. J.  
Rep. Samuel L. Devine, (R), Ohio  
Rep. Ancher Nelsen, (R), Minn.  
Rep. Hastings Keith, (R), Mass.  
Rep. Willard S. Curtin, (R), Penn.  
Rep. Abner W. Sibal, (R), Conn.  
Rep. Vernon W. Thomson, (R), Wis.  
Rep. Peter H. Dominick, (R), Colo.

## Letter-Writing Clubs

Both the San Diego County Health Federation and the Utah Health Federation report they have organized letter-writing clubs, or legislative workshops. As reported to this office, the San Diego letter-writing club meets at a pot luck dinner prior to the regular meeting of the chapter. In Salt Lake a portion of the meeting time is given over to this work.

The chairman of the workshop leads the members in a discussion of legislative matters, following which the members write letters to the proper legislators. All letters are written during the meeting, collected and mailed at once.

The members bring their own envelopes and paper, etc. This type of work does three things: one, it acquaints the members with the purposes of the legislation with which they are concerned; two, it helps the member to learn how to write briefly his or her views and three, it equips the member with a knowledge of the legislative program of the Federation to the end he or she can more readily explain it to other interested citizens.

We are not sure, but we believe the Akron, Ohio Health Federation and the Greater New York Health Federation are doing similar work. We urge other chapters to do likewise.

## Birth Pills Fight Cancer

PHOENIX, March 10.—Birth control pills are not only 100 per cent effective in preventing pregnancies, but have also now been shown to cut the incidence of womb cancer to almost zero.

Furthermore, there are strong indications that better contraceptive pills, now being developed, may prevent all

cervical and breast cancer in women.

These heartening developments were reported here today before the American Cancer Society's annual science writers seminar, at which half a hundred of the world's leading experts on malignancies have assembled to report their latest research findings.

**The report on the anti-cancer dividend that accrues from the use of such birth control pills as enovid came from Dr. Gregory Pincus, research director of the Worcester Foundation for Experimental Biology, at Shrewsbury, Mass.**

**Among a group of 11,000 women not using birth control pills and followed carefully for more than five years, 3.3 per cent showed suspected cervical cancer on the basis of "pap" vaginal smear tests.**

**Of these, one third (1.1 per cent) had actual womb cancer.**

**In 2,100 women using enovid regularly, the incidence of suspicious smear tests was only two-tenths of one per cent, while only a single case of actual cervical cancer was discovered.**

### 16 TIMES

This means that the untreated women had 16 times as many suspected womb cancers as those taking the birth control pills, and 23 times as many actual cancers.

—San Francisco Examiner, Sunday, March 11, 1962

Editor's note: — We publish this item, in keeping with our policy of trying to keep our readers informed of what is being done in the fight against Cancer. We hope this is a key, as the substance used is a combination of male and female sex hormones.

NATIONAL HEALTH FEDERATION BULLETIN

# Osteopathic Group Objects To Merger

The pending merger between osteopathic and medical groups in California will end the two-party system of medicine and create a health care monopoly, the president of the Osteopathic Physicians and Surgeons of California declared here Friday night.

Speaking at a meeting of the Santa Ana Area Citizens Committees against Medical Monopoly at the Charter House Hotel in Anaheim, Dr. David Dobreer of Los Angeles said that the history of relationships between organized medicine and osteopathy makes it clear that the merger plan is simply another attempt to destroy the osteopathic profession.

"Organized medicine has realized that it cannot simply ignore the osteopathic profession out of existence," Dr. Dobreer said. "The California Medical Assn. now seeks to eliminate a competing school of practice by absorbing it."

Under the terms of the merger agreement, as ratified by both the CMA and the discredited California Osteopathic Assn., the Osteopathic College at Los Angeles would be converted into a medical school, osteopathic hospitals would come under medical control and all future licensing of osteopathic physicians would cease.

"This would, in effect, create a medical monopoly in the state by eliminating the free choice of physician and silencing a second voice in health legislation" Dr. Dobreer said.

For all this, osteopathic physicians

who elected to do so would receive a "second hand MD degree, the legality of which is presently being questioned in the courts, he added.

Claims by the pro-merger forces that the plan would result in improved health care in the state are simply not true, Dr. Dobreer said.

The plan would not create a single new physician and the simple conversion of one kind of a medical school to another kind does nothing to improve the shortage of physicians in the state which Gov. Brown has recognized as an acute and growing problem," Dr. Dobreer said.

He pointed out that if the merger is consummated it would actually reduce the number of physicians practicing in California since no out-of-state doctors of osteopathy would be allowed to enter the state to practice.

"It is this aspect of the merger agreement which is most objectionable to the people, the American Osteopathic Assn. and OPSC," Dr. Dobreer said.

OPSC is composed of Osteopathic Physicians and Surgeons who wish to continue as such and is the state osteopathic association recognized by the AOA, Dr. Dobreer explained.

Dr. Dobreer told the meeting that some 200 citizens committees with a combined membership of over 10,000 persons have been formed in California to protest the "choking off of a profession by out-lawing the DO degree in the State."

(Continued next page)

"This number is growing daily which indicates that the people of California have made it clear that a few medical politicians cannot remove their right to choose an osteopathic physician, a right the people themselves elected to receive 40 years ago when they approved separate osteopathic licensure in a state-wide referendum," Dr. Dobreer said.

"That this merger is not being given wholehearted support is best shown by a Facts, Consolidated, Inc. opinion poll held among MDs and DOs. In this poll 45 per cent of the MDs were against merger as were 46 per cent of the DOs when given the chance to speak through a secret ballot."

— The REGISTER, February 3, 1962

Editor's note: — The National Health Federation is working with this group to prevent this merger, on the ground it will help create a monopoly and further deprive the public of its right to have the type of treatment it desires, and the right of drugless doctors to have hospital facilities for the use of their patients.

## NEWS FLASH

A Federal Court ruling has just struck an important blow against the attempt of the Food & Drug Administration to regulate books, periodicals and products, under a sweeping concept of "labelling" as interpreted by the FDA under the Food & Drug Act. The FDA contended that by a reference to a book, such as CALORIES DON'T COUNT, a company automatically adopts the entirety of such book as "labelling" and "claims" for its product.

The Court Ruling Says Not So. We have asked Charles O. Pratt, the Washington General Counsel of the Federation, to devote his message in the June issue of the Bulletin to an explanation

## How to Write:

CONGRESSMAN Richard H. Poff, a Virginia Republican, recently laid down some simple rules for any of his constituents who want to communicate with him. He said: a letter is better than a phone call, make your letter brief, confine comments to one subject, and outline reasons for your position.

Poff also advised his voters: "Don't insult your congressman with promises or threats. A congressman is a human being, and most are earnestly trying to do the right thing. A promise signifies the writer's belief that the congressman can be bought; a threat that he can be scared. Both are self defeating."

That's good advice.

## Oral Vaccine In Connecticut Test

Middletown, Conn. — A field trial of oral polio vaccine has not produced any serious reactions among the 6,000 youngsters taking part in the test, it was reported yesterday.

Dr. Mario L. Palmieri, city health director, said only 18 children showed reactions to the cherry-flavored doses of Sabin live virus vaccine.

Ten had mild skin inflammations which cleared up to 24 hours, he said. Three had skin rashes lasting for several days and five had mild intestinal symptoms which also cleared up.

The test was conducted recently by the Middletown Health Department together with the Yale Medical School.

of this decision and its implications and application to the health food industry.

NATIONAL HEALTH FEDERATION BULLETIN

# With N.H.F. Washington Counsel

By CHARLES ORLANDO PRATT

Suite 712, Barr Building  
910 Seventeenth Street, N.W.,  
Washington 6, D. C.

## THE PROPOSED "DRUG INDUSTRY ANTITRUST ACT"

Your Washington Counsel, after studying the provisions of S. 1552, a Senate Bill, introduced by Senator Ke-fauver, "To amend and supplement the antitrust laws with respect to the manufacture and distribution of drugs, and for other purposes", is of the opinion that the real effect of the Bill would be to grant unreasonable, unnecessary and arbitrary powers to the Secretary of the U. S. Department of Health Education and Welfare.

Many people thought that this "Ke-fauver" Bill would be good for the people.

This Bill, as written, should be opposed for many reasons, some of which are as follows:

1. The Bill does not eliminate or punish a monopoly in drugs.
2. The Bill does not have the effect of reducing the cost to the consumer of needed drugs or medicines.
3. The Bill does not define a monopoly.
4. The Bill would have the effect of creating a dictator in the person of the Secretary of Health, Education and Welfare with unlimited powers to pass on patent rights.
5. The Bill provides that "The determination of the Secretary shall be sustained in any court if based upon a fair evaluation of the entire record before

the Secretary". However, there is no provision which requires or permits the patent applicant to submit evidence or argument on his behalf for the record.

6. The Bill arbitrarily and unreasonably denies the applicant's legal, and constitutional right to appeal any administrative decision or determination before the Courts of our land for the purpose of correcting any wrongful or unconstitutional act of a government agency or bureau. (I believe that such a denial would be held unconstitutional.)

7. The Bill would destroy the incentive to spend time, energy and money to research and develop new ideas for new inventions and patents, if the person to whom the patent was issued could keep it only three (3) years unless he sold or transferred the same rights to his competitors for 14 years. This elimination of the full statutory rights to the exclusive use and benefits of a patented invention in the drug field would have the effect of taking private property without due process of law or just compensation. The enforceable payment of a limited royalty would not adequately compensate the holder of the patent for any drug or medicine who would thereby lose his exclusive rights.

(Continued next page)

## Suggested Letters

The President

The White House

Re: Grand Jury investigation of the Food and Drug Administration

My dear Mr. President:

There is nothing you could do as President that would be of as much benefit to our nation as a thorough investigation of the Food and Drug Administration, which we understand the Justice Department has already started. We trust you will not stop until you have exposed and stamped out the apparent tie-up of the F.D.A., the A.M.A., the U.S.P.H.S., the chemical and drug industry and the food processors and refiners.

I believe this combination has done more in the past 40 years to destroy the health and moral fiber of this nation than two world wars.

We pray that you will not permit the powerful money interests to whitewash this long overdue investigation. May God give you the strength you will need in this endeavor.

Very respectfully yours

The Honorable

A. S. Herlong

House of Representatives

My dear Mr. Herlong:

This letter is being written to express to you my appreciation for introducing H.R. 9319, the purpose of which is to require proper reporting of expenditures of funds given to health organizations by the public.

This requirement is long overdue and we pledge our support to you in your endeavor to get it enacted into law.

I am not opposed to this type of organization, but I do feel that the

Government should require a full and complete accounting of expenditures, as provided in your bill.

Please call on our N.H.F. Washington office for any help you feel it can render.

Sincerely yours

(Note: Write in your own words and manner.)

## Cigarettes Linked to Number of Diseases

LONDON — A committee from Britain's Royal College of Surgeons reported today after a two-year study that cigarette smoking may be a contributing cause of death from a number of diseases besides lung cancer.

The committee studied thousands of case histories and examined more than 200 other medical inquiries into smoking. Some of their conclusions leaked out several weeks ago. But the full 70-page report was not made public until today.

Here are some of their findings:

Cigarette smoking is the most likely cause of the recent world-wide increase in deaths from lung cancer;

The habit probably increases the risk of death from coronary heart disease, particularly in early middle age;

It may be partly responsible for tuberculosis deaths among elderly men;

Smoking may be a contributory factor in cancer of the mouth, pharynx, esophagus and bladder;

It may be a reason for the increased mortality from peptic ulcers; and

It is an important predisposing cause in development of chronic bronchitis.

—The Independent, Richmond, Calif., March 7, 1962

## Governor Brown Betrays Californians

California legislative procedure, established by the people, provides for a legislative session with legislative safeguards, every two years, and a budget session every other year. At this latter session nothing but the budget can legally be considered, unless there is a state of emergency in some particular matter, in which case the Governor can add such a measure to the agenda.

This year, because many of the items desired by the Governor would not stand the light of a regular session, with its legislative safeguard, he added those items to the agenda of the budget session. Among those items was A.B. 19, an amendment to last year's A.B. 1940 (so-called compulsory polio immunization law). The bait in the measure was its expressed purport to exempt adults in short term school classes from the law.

However, the real purpose was hidden in section 3387 of the bill. This section was so written as to declare the intent of the legislature to achieve, in the long run, total immunization of all school students. This clause invites all kinds of interpretations and so mixes the situation that local school and health officials can attempt to enforce their own interpretation of the law. All of this was not too bad, because the law, when introduced, did not touch the exemption section of A.B. 1940.

But Governor Brown's cohorts in the legislature waited until the last minute and twice amended A.B. 19, further confusing the issue of exemption by providing that letters or forms requesting exemption on the ground of not believing in polio immunization must be obtained from local health or school authorities. The exemption provision of A.B. 1940 still prevails and a person need not be immunized, if such is contrary to his or her belief. Such belief need not be religious, but he must file his objection on forms provided by his local health or school officials. In the closing days of this irregular session the bill was rushed through and will be law within 60 days. The National Health Federation will follow through on this matter and keep you advised. In the meantime, file your letters requesting exemption, and insist on them being honored.

It could well be that the Federation will have to rally the members in California and take some school board or health official to court, if attempt is made to force folks to be immunized against their will by false statements or improperly drawn exemption forms or letters. Notify the Federation if you have trouble.

MAY, 1962

17



# FOOD and DRUG ADMINISTRATION

## FDA Warns on Mineral Oil Labels

WASHINGTON.—The Food and Drug Administration warned that mineral oil should not be sold as a salad oil and that it must be properly labeled as a drug.

FDA issued the warning in connection with a seizure of 140 gallons of mineral oil by U. S. marshals at the Rochester Drug Cooperative, Inc., Rochester, N. Y.

FDA said that labels on a number of the bottles read in part:

**"Extra heavy mineral oil . . . for internal use in chronic constipation and intestinal disorders . . . may be used during pregnancy or in cases of piles. Excellent for use as a non-fattening oil in salad dressings."**

Technically, mineral oil is unsafe as a food additive. No tolerance has been established for the substance as a food additive. Therefore, it may not legally be sold as a salad oil.

FDA said the seized mineral oil was also misbranded because labeling falsely claimed it to be adequate for chronic constipation, intestinal disorders and hemorrhoids.

The agency further charged that mineral oil should be taken only at bedtime; that it is not for prolonged use and that it should not be given to infants or youngsters, in pregnancy or to bedridden or aged persons unless directed by a physician.

## P & G Agrees to Consent Order By FTC on Ads for Crest

WASHINGTON.—Procter & Gamble Co., Cincinnati, maker of Crest toothpaste, agreed to a Federal Trade Commission consent order barring it from making misleading claims on comparison tests made on the dentifrice or any other of the firm's products.

The agreement is for settlement purposes only and does not mean the firm admits violating the law.

FTC had challenged television, newspaper and magazine advertising comparing Crest with "regular toothpaste." The Commission alleged that the comparisons were not made with competing market brands, as implied in the ads, but with a dentifrice substantially the same as Crest without one of its ingredients — stannous fluoride.

One of the challenged claims was: "In a clinical test with 382 children, half used regular toothpaste for two years, half used Crest."

The other bars use of any advertisement that:

- Represents, directly or indirectly, that any drug or cosmetic product has been tested in comparison with competing products, when such is not the fact.
- Misrepresents the manner in which any such drug or cosmetic product has been tested.

Procter & Gamble issued a statement here saying that its agreement to the Federal Trade Commission consent or-

der on its Crest toothpaste advertisements did not mean that it "agreed that our advertising has misled the public."

Company president Howard Morgens said in Cincinnati that the agreement was "the sensible alternative to a prolonged controversy" with FTC over the legal definition of the word "regular."

"Our advertising has accurately described Crest's ability to reduce tooth decay," he added. The test "control" product, he said, was designed to give "complete scientific validity to the test results."

## From France

"Chemical additives to fodder and fertilizers are changing the flavor of food," insists M. Mouquet. "Butter doesn't have the nutty taste I remember 50 years ago. Chickens are scientifically fed, but the flesh is pappy. Chemical baits even alter the flavor of fish."

Hence, the increased popularity in France for wild fowl — a food that remains pure.

Many members of the Club des Cent now collect not only the addresses of good restaurants, but also the names of suppliers who raise chickens the old way, and who graze cattle in meadows where only natural fertilizers are used.

## CREDIT TO WHOM CREDIT IS DUE

If the January N.H.F. Bulletin accomplishes good, a large degree of credit should be given to Anna Ruth Henry, of Seattle, Washington, who paid our plane fare to Seattle and return in order that we might meet with a committee, the members of which had personal and factual evidence as to what was being done to school children under the cloak of the term "child counseling".

## Akron, Ohio Chapter

### The Harvest

If you sow seeds of happiness —  
Your harvest will be sweet —  
You'll give a smile and get a smile  
From everyone you meet —  
Your thoughts will be affirmative —  
Your life will be aglow —  
You'll have a pleasant word or two  
For everyone you know —  
You'll get a lot of pleasure from  
Most everything you do —  
Within your heart the sun will shine —  
For God will smile on you.

With the foregoing, Ruth Crichton, the efficient secretary of the Akron, Ohio, National Health Federation chapter, gave some very fine advice for living on both the moral and physical planes. In a nutshell she set forth what we should do if we would have life and have it more abundantly on all planes of living.

Very adroitly she led her readers into the field of organic farming, eating and care of the body. This procedure led naturally into the announcement of the next meeting and the speaker, Dr. Leo B. Schumacher, whose subject, "Nutrition in Regards to Dental Health", was a natural, following such an introduction. We enjoyed every word of the announcement and we feel sure that if you will send Ruth a stamped, self-addressed envelope she will be glad to send you a copy of it.

If our chapters will send us short (100 words) items about what took place at their last meeting, we will publish them for the benefit of other chapters.

# STOP LOOK and LISTEN

Unless you can read the following six articles with an open mind, please do not read further. The reason for the foregoing admonition is, the Washington Post gave the Federation permission to publish the following six articles, which were published in the Post in 1960; provided they were published without change.

Neither we or our readers will agree with every phrase of the articles especially that portion which infers a cure for Polio has been found. In our opinion it is far too early to properly evaluate this subject. It is true there is less Polio in the world today than five years ago, but this could well be because Polio runs in cycles. It could also be because no case is now reported as Polio, unless confirmed by a laboratory report, where previous to the Salk campaign, the statistics were based on doctor's reports of a patient's symptoms. Be that as it may, the point we are trying to make is that the articles are not being reprinted to establish the case of Polio, but rather to provide our readers with what others are thinking about the way health charity fund raising organizations are operating as well as to provide our readers with material on which to base their decision on whether such organizations should be compelled to give detailed financial statements to the public each year as provided in the Herlong Bill H. R. 9319.

It is our hope our members will purchase extra copies of this issue and use them to alert Congress to the reasons for the Herlong Bill, as was done with the January issue of the Bulletin, on the subject of school questionnaires.

(See next page)

## Something to Ponder

Finally, here is something to think about concerning all vaccines and similar nostrums: In the 21 years ended December 1958, only a little more than one-third of the children born in England and Wales were vaccinated for smallpox, yet only two children aged under five years died of smallpox; but of the one-third vaccinated, 91 were killed by vaccination. (From Ministry of Health Reports.) Why did the two greatest epidemics of smallpox in England in 1871 and 1881 occur during mass compulsory vaccination? Why did the smallpox rate start to drop slowly only after isolation and better sanitation were put into effect? If vaccines were responsible for the eradication of diphtheria why had the death-rate dropped from 893 to 275 per million in the 40 years prior to the beginning of diphtheria vaccination? Why have measles and scarlet fever, once the greatest killers of children before the age of 6,

become trifling illnesses now, without the benefit of any vaccines or inoculations? Do parents realize that the vaccine used to "prevent" diphtheria originated in Austria, where its use is now banned because it killed so many children — yet the same Schick nostrum is standard equipment of the American medical man? Why has England repealed her compulsory vaccination laws? Do you know the answer?

### Mark Your Calendar

If you are interested in natural hygiene, we suggest that you write to the American Natural Hygiene Society, P.O. Box 4421, Chicago, Illinois, for complete information regarding their coming national convention which will be held in Miami Beach, Florida, during the week of July 1 through July 7, 1962. Outstanding speakers and round-table chairmen will help you to understand how you can have "better health through natural living".

NATIONAL HEALTH FEDERATION BULLETIN

# Donors, Drives and Dollars

A Series of Six Articles on Charity Drives

by  
Eve Edstrom

Reprinted From

The Washington Post

Times Herald

By Special Permission

## Open War Erupts Among Nation's Charity Appeals

Article I

By Eve Edstrom  
Staff Reporter

The kid gloves are off in the charity appeal arena.

Until recently an armed truce existed between the "go-it-alone" health appeals and the "give-once-for-all" United Funds.

But now such fighting words as "intimidation," "coercion," "bribery" and "blackmail" are being hurled by the principal protagonists in a field where charity and compassion are considered to be more fitting language.

Among the current national developments that have precipitated the charity appeal breach are:

- The rapid desertion of United Funds, which combine many charity drives into a single package, by American Heart Association and American Cancer Society chapters whose national organizations have ordered them to withdraw.

- The move to establish health foundations of United Funds to halt the splintered disease-by-disease battle and meet the total needs of the "whole man."

Squarely in the middle of the fight is the giver. Each year donors give bil-

lions to charity, but seldom give 10 cents worth of thought to what the charity dollar buys.

While local health and welfare services starve, voluntary dollars go to support:

- One prominent national health agency which from 1951 to 1957 spent more than \$40 million on fund-raising—and less than \$20 million for research.

Another which requires 75 cents out of every \$1 collected locally be shipped to national headquarters, which piled up millions in the bank.

But the most glaring fact that emerges from any study of the major health appeals is that givers' contributions bear no relationship to relative needs.

The National Foundation for Infantile Paralysis, for example, consistently had been first in funds — and last in number of patients needing care. This was true before as well as after the Salk vaccine was proved effective.

This Nation's worst polio epidemic occurred in 1952. That year polio killed 3145, of whom 1560 were children.

(Continued next page)

But heart and other cardiovascular diseases killed 796,871 of whom 2392 were children. And cancer claimed 233,277 of whom 3614 were children.

Pictures of polio victims, however, are more appealing than statistics.

And so the public gave \$41.4 million to combat polio. This was more than six times the amount that was contributed to conquer our No. 1 killer, heart disease, and more than double the amount of charity dollars that went to fight cancer, the major killer of school children.

While in more recent years the American Heart Association and American Cancer Society have been getting a larger share of the charity dollar, this inverse ratio of giving to need still exists and cuts across all health charity fields.

The same amount of money, for example, is contributed for the aid of the 9 million who suffer from severe mental illness as is given to help the 200,000 muscular dystrophy victims.

Four times as much money goes to assist cerebral palsy victims as for retarded children although the latter outnumber the former 10 to 1.

And just a few more dollars aid the 10.6 million arthritis and rheumatism sufferers as are given for the 250,000 multiple sclerosis victims.

From these facts, it seems probable that this Nation would be a lot closer to discovering successful vaccines for other diseases if the \$186 million collected by the major health charities each year were spent according to need.

But this appears impossible because the chief health agencies seem to be infected with the Basil O'Connor virus.

O'Connor is the head of the mighty National Foundation (formerly the National Foundation for Infantile Paralysis). He proved that his adamant "go-it-alone" jolity paid off. The March-of-Dimes became a march of millions and conquered a disease.

Promotions — Franklin D. Roosevelt's heroic fight against polio, the President's Birthday Ball, the door-to-door Mothers' March — were so successful that the general public genuinely believed that polio was a chief killer andcripler.

Taking a lesson from polio's book, special interest groups have been organized for practically every significant disease. And most of their national leaders insist they must follow O'Connor's technique.

Therefore, in some instances, they ride roughshod over community opinion to go their independent way.

Probably the most flagrant example occurred in Detroit where the give-once-for-all principle originated and where the celebrated Torch Fund, Detroit's united appeal, has been phenomenally successful.

In that city the American Cancer Society guaranteed its Southeastern Michigan Division \$600,000 if it would leave Detroit's United Foundation and conduct a separate campaign next year.

Cancer Society spokesmen say the \$600,000 offer was made to make sure there would be no disruption of division program in the first year of its return to an independent appeal.

In less kindly quarters the offer was looked upon as a bribe. It was pointed out that there was no need to put up a guarantee because Detroiters always had financed generously the Southeastern Michigan Cancer Group through their United Foundation.

Even with unemployment at a high level in Detroit last year, \$16 million was contributed through the United Foundation and \$775,294 was allocated for cancer.

Therefore, the \$600,000 offer, Detroit newspapers said, raised these questions:

- How could the American Cancer Society spare \$600,000 to "wage what essentially is a power struggle among

those presumably engaged in public assistance work?"

- Is the American Cancer Society more interested in fighting over fund-raising methods than in fighting disease?

The American Cancer Society insists that the fight is against cancer and not against United Funds. But it states the public should have the right to decide how fast this battle should be waged. This can be done best, its spokesmen say, by giving time and money directly to it through independent fund-raising drives.

For these reasons the American Cancer Society has ordered all its chapters which joined federated drives to withdraw by Jan. 1, 1960.

Detroit, however, defied the national organization's edict. Cancer Society officials there signed a new five-year contract with the United Foundation.

What irked Detroiters, according to the Detroit Free Press, was the national's "willingness to undermine such splendid organizations as the United Foundation and the unutterable gall exhibited in dictating the terms under which contributed money will be accepted."

Now Detroiters face the possibility that the American Cancer Society will establish a new chapter there outside the Foundation. This has happened in Rochester, N. Y. where the original group elected to remain with the federated drive and a new one now plans an independent appeal three weeks before the federated drive.

This type of action compounds the confusion already existing in the overpopulated health charity field.

There is no question that the Cancer Society and the Heart Association, which also has asked its chapters to withdraw from United Funds, spend contributors' money reasonably well in their chosen fields.

But there are a number of appeals that do not. And how is the average contributor able to differentiate?

About 60 appeals revolving around the human body have been listed by the National Information Bureau which provides a reporting service on fund drives. Many of these agencies pass the hat for the same cause.

The NIB, for example, lists 19 organizations seeking funds for the blind, 6 for the crippled, 3 each for muscular dystrophy and mental illness, 2 each for polio, cancer, leprosy and brain injury, and one each for alcoholism, allergic diseases, arthritis and rheumatism, asthmatic children, cerebral palsy, the common cold, diabetes, epilepsy, deafness, facial disfigurement, heart disease, hemophilia, multiple sclerosis, myasthenia gravis, nephrosis, paraplegia, retarded children, social diseases and tuberculosis.

Obviously, the harassed contributor must assume a major share of the blame for the situation. He has put all these appeals in business because he has never looked as critically at the need for an agency's service as he has looked compassionately at a picture of a crippled child.

(Continued next page)

---

### Special Notice

The N.H.F. Washington office has advised us that at the present time Congressman Herlong is receiving about 25 letters per day in support of his bill H.R. 9319

To secure a hearing for the bill he will need at least 100 letters per day. This bill would force the Cancer Society and other organizations to give detailed financial reports each year or lose their tax exemption until they do. If you are in favor of this worthy bill, write at once. See page 16 for sample letter.

# ***Its Major Goal Achieved, Polio Fund Refuses to Die***

## **Article II**

**By Eve Edstrom  
Staff Reporter**

The National Foundation is the foremost example of the fact that old health appeals don't die — they multiply.

As the National Foundation for Infantile Paralysis, it did the principal job it set out to do: It produced the money that enabled the Salk vaccine to be developed to conquer polio. Even though the agency continued to care for polio victims over the years, it might appear logical that it should disappear, leaving one less health agency on the public's doorstep.

But in 1957 the Polio Foundation had \$44 million worth of reasons for staying in business.

That was the amount collected from the public at a time when polio deaths had dropped to 220 — about half the number who died from measles that year.

Small wonder that the Foundation officials, when they announced a new program, stated it would be "unthinkable" to just sit back and let a successful organization break up.

Therefore, as the National Foundation, they have staked a claim on "3 Faces of Crippling" instead of one and now are roaming in the fields of rheumatoid arthritis and brain defects as well as polio.

The National Foundation explains its success by stating simply that "people believe" in it, that a survey has shown that "almost everyone" accepts the over-all purpose to which its funds are put as "worthwhile."

There is no question that the National Foundation earned the heartfelt thanks of families for paying costly polio patient care bill. It could afford to because

it had so much money and so few patients in relation to available funds.

But heart disease and cancer are just as costly to families and affect many more persons. Therefore, some community health planners question whether health charity dollars should be spent disproportionately to pay the total hospital bills of a preferred group.

### **Research Proportion Low**

There also is no question that the Polio Foundation earned worldwide thanks for financing the Salk vaccine research. But could the Salk vaccine have been developed earlier if more of the National Foundation's funds had gone into research?

Between the years 1950 and 1957, it is reported by the National Information Bureau, the National Foundation's income amounted to more than \$381 million while its research expenditures amounted to about \$22 million or less than \$1 out of every \$17.

Furthermore, the National Foundation consistently spent more money on fund-raising than research. Fund-raising costs amounted to more than \$40 million between 1951 and 1957 while research costs were under \$20 million. However, the Foundation's promotional material doesn't reflect this.

In its 1957 printed report, for example, there is a dime cut into percentage pieces to show how March of Dimes money was spent. The third largest category of disbursements, a fund-raising cost of \$6,347,000, is omitted.

### **Heart, Cancer Approved**

Such omissions plus the National Foundation's refusal to release generally an audited account of total income and total disbursements have resulted

in its not being accredited as meeting minimum National Information Bureau (NIB) standards for charity appeals.

NIB is a non-profit organization devoted to providing reports on fund-raising organizations for the guidance of contributors. Such organizations as the American Heart Association and the American Cancer Society meet its standards.

The National Foundation also was dropped from the National Advertising Council's list of approved agencies for free radio and television time this year. The reason was that it failed to submit in time a detailed statement concerning its new program although it had been given ample prior warning.

Locally the March of Dimes effort also deserves scrutiny.

This newspaper received a statement from the National Foundation which declared "it is interesting to note of the \$233,689 raised in the Washington metropolitan area in 1958 through the March of Dimes, 77 per cent of this total remained for local chapter activities."

### **Inflated by \$34,000**

It is also interesting to note that \$311,353 was raised here but \$77,664 was spent on fund-raising. This cost, amounting to almost \$1 out of every \$4 collected, is ignored in the statement. It would bring the 77 per cent down to 58 per cent.

Furthermore, the local chapter's share was inflated further by the addition of \$34,000 which came from national headquarters and was not raised here during the 1958 campaign. If that sum were deducted, 47 per cent of what was collected here in 1958 remained for the local chapters.

The District of Columbia's chapter

spent about two-thirds of the \$77,664 fund-raising cost charged to the total metropolitan area campaign. Its financial records for the 1958 March of Dimes raise the question of whether the effort now produces enough dollars to be worthwhile — especially for the hard-working volunteers including the 12,000 marching mothers.

In 1958, the March of Dimes events raised \$108,919 of which \$50,204 went for expenses. The National Foundation and its Medical Aid program got \$36,696 and the D. C. Chapter received \$22,019 or \$1 out of every \$5 raised in the District.

The high cost of the 1958 campaign was caused by the fact that the D. C. Chapter spent \$25,000 on office salaries, a five-fold increase over 1956 when it was able to net four times as much money as it did last year.

### **Stimulant Attempted**

A local National Foundation spokesman explained the additional help was hired to stimulate the campaign.

The drop in March of Dimes contributions is attributed to public apathy since the Salk vaccine was discovered and to the fact that the National Foundation has shut itself out of Government agencies because it refuses to join federated drives.

For the 1959 campaign there was a cutback in office labor but fund-raising costs based on preliminary figures still amount to about \$1 out of every \$3. Collections to date also are considerably under last year's low. Nationally, Foundation collections dropped from \$66.9 million in 1954 to \$35.4 million in 1958.

This would appear to indicate that at least a portion of the public does not believe it "unthinkable" that the National Foundation go out of business.

(Continued next page)

---

### **To Our Members**

May we suggest you purchase extra copies of this issue, as you did the Nov.-Dec. and the January and use them to alert Congress to the need of forcing organizations raising funds for health purposes to report what they do with these funds. This money belongs to the givers and they have a right to know. H.R. 9319 by Congressman Herlong is designed to do this.

# Public Generosity Shows Charity Can Be Blind Too

## Article III

By Eve Edstrom  
Staff Reporter

The public is blind when it makes some of its gifts to help the blind.

It has poured millions of dollars into national organizations to buy guide dogs which the majority of the blind cannot use. Yet it does not give a few thousand dollars to prevent persons from becoming blind.

Chaotic is the only word to describe charity for the blind.

At least 19 organizations — many with similar names — solicit nationally. One, Seeing Eye, Inc., is so prosperous that it has \$10 million in securities and its income averaged \$1 million more than it spent each year for four recent years.

Another, Guiding Eyes for the Blind, Inc., is reported by the National Information Bureau to have spent 40 per cent of its 1957 income on fund raising and public education and 21 per cent on the training of the blind.

A few are alleged frauds. The New York Attorney General's Office last month accused Buddies, Inc., of dissipating all but \$3200 of the \$28,000 reportedly raised since 1956 to provide dogs for blind children. None of the money went to any charitable purpose, it was charged.

In such ways and as a direct result of the confusion over the multiplicity of appeals for the blind, the charity dollar is diverted away from badly needed local services.

An example of a starved local agency is the Prevention of Blindness Society of Metropolitan Washington, which is expected to skimp along on \$20,000 annually.

The Prevention of Blindness Society knows that 50 per cent of the blind cases can be prevented. It also knows

that two out of every 100 persons over 40 have glaucoma, an eye disease that gradually destroys sight. It currently is conducting tests to spot early cases of glaucoma so they can be treated.

But it can afford a professional staff of only two people to cover the entire metropolitan area.

Many area residents never think to enlarge their United Givers Fund contribution so that Society's work, as well as the work of the other 141 UGF agencies, can be expanded. But some of these same residents will respond to one of the thousands of solicitation letters mailed each year to obtain funds for guide dogs.

In so doing they unwittingly add to the multiplicity of drives.

For example, the local Prevention of Blindness Society is under strong pressure from its national organization to leave UGF. This is because as long as the local group is in UGF the national body cannot participate in the Washington area solicitation of Government employes by the Federal Service Campaign for National Health Agencies.

Until this year, when UGF contributors overdesignated the local group, it was unable to contribute any funds to its national organization. Now it has given \$1000. But its national feels it would receive more through the Federal campaign.

This might have been averted if contributors had spent their charity dollars for the blind more wisely. But in 1958 they gave considerably less money to the National Society for the Prevention of Blindness than they did to buy guide dogs.

The latter cause is an appealing one and few contributors know that:

- Such institutions as Seeing Eye Inc., have ample funds to provide dogs so that no blind person is refused a dog because of lack of money.

- Only a handful of the blind either want or can use a dog. Guide dogs, for example, are not considered suitable for persons over 65 and more than half of the blind are in that age category.

These facts are underscored in a special "wise giving" bulletin issued by the National Information Bureau, a non-profit reporting service for contributors.

The NIB studied three eastern training schools for the blind which mailed an estimated 850,000 solicitation letters in 1957.

These institutions serve all parts of the United States, but they were unable to find enough blind persons to use their facilities. They trained 217 but could have handled 269, NIB reported.

Furthermore, NIB found that the three organizations received \$900,000 more than they could spend for their services.

NIB figured that an average of \$7700 was contributed for each of the 217 students.

That \$7700 was "spent" in this way:

- \$4100 per student was put into reserves as not needed for current work.
- \$900 per student was spent on promotion, fund raising and public relations.

### "Pillitis"

That great modern medical discovery . . . the pill . . . is threatening to become the most common cause of illness in Denmark. A study of patients admitted to a medical ward in a hospital at Copenhagen showed misuse of medicine was second only to heart diseases on the list of causes of hospitalization. Doctors have reported cases of patients

- \$2700 went for recruitment, training of the blind and dog guides, administration, board, room, purchase of new plant and equipment.

In other words, two thirds of the money contributed was not needed for its intended purpose that year.

The NIB study was issued last November. This was about the same time that another study to determine the number of blind persons who could use dog guides was completed by the New York School of Social Work.

The latter study was financed by Seeing Eye, Inc., and its findings prompted Seeing Eye to send letters in March to all contributing members. They were told they need not renew memberships by sending contributions for 1959 because Seeing Eye had ample funds and the "number of qualified blind persons desiring Seeing Eye dogs does not require at this time further expansion of our facilities."

But other guide dog institutions show no inclination to stop solicitations. And they continue to multiply. At last count there were 12 of them.

What has happened in the blind field is not typical of charity generally. But it points up how well-intentioned but misplaced philanthropy misses its mark.

That is why citizen screening committees — such as the UGF admissions and allocations committee — which apportion funds according to need are essential to make certain your charity dollar is invested wisely.

(Continued next page)

who walk about in a constant daze of intoxication, caused by munching a mixture of all types of headache pills, sedatives and sleeping tablets. In 1958, Danes consumed over 65 tons of pep pills, 24 tons of tranquilizer and 100 tons of sedatives. Many patients reported that they started eating tablets because it was fashionable. (From "Seed For Thot" by Betty and J. T., of Organicville, Los Angeles, California.

# Independent Fund Raising Is Costly in Net Value

## Article IV

By Eve Edstrom  
Staff Reporter

"You have to spend money to make money."

This is how a spokesman for the D. C. Area Chapter, National Multiple Sclerosis Society, explains that \$1 out of every \$2.70 contributed to it last year went for fund-raising and administrative expenses.

That cost compares with the less than \$1 out of every \$12 that the United Givers Fund spends to raise money for its 142 member agencies.

The health agencies, in effect, contend that their end justifies the means because they are after the big prize — the conquering of a disease through research.

### Take Issue

But how many contributors know how much of their charity dollar goes into research?

If it can be assumed that local contributors to the Muscular Dystrophy Associations of America know that 75 cents out of every \$1 they contribute goes to the national organization, can it also be assumed they know that:

- The money spent for muscular dystrophy research in the year ending March 31, 1958, amounted to less than one-fourth of the Association's income.

- Fewer dollars went to research than to fund-raising and field organization.

- Between 1952 and 1958 the national body received \$7.2 million more than it spent.

These are just a few of the reasons why the muscular dystrophy group does not meet the standards of the National Information Bureau, a non-profit reporting service for the guidance of contributors.

### Fund Costs Go Up

Muscular Dystrophy Associations of America spokesmen take issue with the NIB report. They list larger appropriations for research, for example, but this includes money that was earmarked but not spent during 1958. They also state it was necessary to set aside large reserves for the \$5 million research center being built in New York.

But whether contributed funds should have been used for the building is a controversial issue. Some original members of the Muscular Dystrophy Associations of America split off from it in 1953 to form the National Foundation for Muscular Dystrophy because of a disagreement on how research funds should be used.

When agreement does not exist among the devotees of the muscular dystrophy cause, how can the public know if its charity dollars are going for needed services? The public hardly knows now that two different muscular dystrophy groups are soliciting.

This competition causes fund-raising costs to go up and up. The Muscular Dystrophy Associations of America, for example, spent \$464,553 on fund raising in 1957 and \$622,694 in 1958. The National Foundation for Muscular Dystrophy spent \$28,930 on fund raising in 1957 and \$171,466 in 1958.

It has been estimated conservatively that it costs \$26 million annually for major health drives to collect \$170 million.

Much of the \$26 million could be put to use for the cause to which it is contributed if it were collected the united way.

But United Funds require a rigid fiscal accounting of each member agency's expenditures, and that funds be distrib-

uted according to demonstrated need. They do not permit million-dollar backlogs while other services go begging.

### Does Better in UGF

The costliness of "go-it-alone" campaigns — in money, in services to those they help and in volunteers' effort — can be shown by an examination of those appeals established here to compete with UGF agencies doing the same job.

Washington has two multiple sclerosis groups.

One is the Multiple Sclerosis Association of Greater Washington, a UGF member which lost its national character when it joined the united effort. Its "before and after" story sums up the case for United Funds.

From 1953 to 1956 it collected \$116,900 here when it conducted independent campaigns as a chapter of its national society. From 1957 to 1959, as a member of UGF, it received \$135,400.

This represents a 16 per cent increase in funds — but it bought a 600 per cent increase in service to local multiple sclerosis victims.

During its four years of national affiliation it was able to contribute only \$15,650 to the Multiple Sclerosis Center at George Washington University.

### Charter Revoked

But as a UGF member for three years it has given \$102,350 to support the MS Center as well as research and direct care programs at both George Washington and Georgetown Universities, Visiting Nurse services, patient equipment and transportation.

The reason for these gains is that when the Association was affiliated with its national organization it spent \$45,000 of the \$116,000 raised here on fund-raising and administration, while another \$42,000 was shipped to the national organization.

As a UGF member, the Association has no fund-raising expenses and spends

about \$1 out of every \$7 on administration.

The National Society revoked its charter because it believes that only through an independent appeal can it obtain the necessary funds for a nationally coordinated research, patient aid and educational program.

It established a new affiliate, the D. C. Area Chapter, National Multiple Sclerosis Society, which this year will conduct its campaign from May 10 to June 21. Its request that the District Commissioners issue a proclamation in support of this campaign was turned down because the Commissioners are committed to united giving.

In 1958 that group received locally more than double the money that the UGF agency received — \$96,875, compared to \$43,000 — but the funds did not do double the work.

### Costs Compared

Furthermore, it took practically a year-round effort to raise the money. The May-June appeal — a door-to-door, canister, mail and business solicitation — came on top of that group's participation in the Federal Service Campaign for National Health Agencies. In addition it conducted four benefits, one of which stretched into December.

Those benefits cost \$4556 and produced \$4804, for a net gain of \$248. The independent appeal cost \$20,257 and netted \$39,358. The Federal Service Campaign cost \$4026 and netted \$24,696. Another \$7490 went for administration.

The local chapter justifies these expenses on the basis that it was able to produce \$35,460 for its national organization, spend \$10,000 on patient services and \$11,188 on professional and public education.

But can such expenses be justified on the basis of getting the most out of each dollar contributed?

Spokesmen for the UGF-supported

(Continued next page)

multiple sclerosis group say there can be no such justification. So do spokesmen for the Arthritis and Rheumatism Association of Metropolitan Washington, which also lost its national charter when it joined UGF.

"Each year that we have been a member of UGF the entire amount of all

contributions received from UGF was given entirely to five arthritis clinics," the Arthritis and Rheumatism Association says. "Our experience with UGF more than vindicates the judgment of our Board that the cause of arthritis would be best served by joining with others in a united appeal."

## National Health Appeals Have No Room for Ceilings

### Article V

By Eve Edstrom  
Staff Reporter

The sky's the limit for the national health appeals.

They do not set out to raise \$77 million when they know local services need \$8.5 million as the United Givers Fund did here last fall.

"Unlimited" is how the American Cancer Society describes its goal.

The American Heart Association, a simple \$100,000 operation in 1946, had its eye on \$24 million this year.

And as the pots of money get bigger and bigger, they ask on what dollars-and-cents basis can their participation in one-fund drives be justified.

Take the Washington Heart Association's case against joining UGF even if its national body would allow it.

As a member of the Community Chest, the predecessor of UGF, from 1930 to 1948, the Washington Heart Association received a total of \$117,000 or an annual average of \$6500.

#### A 20-Fold Increase

As an independent health campaigner for the last 10 years, the local Heart Association has raised \$1,332,000 for an annual average of \$133,200 or a 20-fold increase.

The Washington Heart Association left the Chest in 1948 after it was budgeted for \$8500 but had asked for \$25,000 to meet new requirements of the American Heart Association.

In its first independent appeal it received \$55,000. Each subsequent year it has received public support so that its 1957-58 effort produced \$237,000.

Its fund-raising and administrative cost amounts to about 18 per cent of the total collected and about one-fourth of its net goes to the American Heart Association.

But even after deducting these expenditures, the Heart Association had about 15 times more money to spend on local services than it did during its Chest days. Also the largest single item in its budget, \$60,000, went for local research.

#### Sees Straitjacket

Therefore, the Washington Heart Association looks upon federated drives as financial straitjackets which do not permit growth of service as need develops.

Heart Association members are convinced that the enormous progress made in the diagnosis and treatment of heart diseases in the last 10 years is the result of "more money and better public understanding and this is possible only in an independent approach to the public."

This reflects the policy of the American Heart Association. At one time it permitted chapters to join United Funds although the Washington group never did.

But in October, 1955, all chapters in United Funds were ordered to get out as soon as possible.

That was the same year, incidentally or coincidentally that the Salk vaccine proved effective, thereby reducing the need for millions for polio. Also President Eisenhower's heart attack increased public attention on heart diseases.

The Heart Association's participation in federated drives subsequently dropped from 470 campaigns to less than 250.

#### Data Used as Justification

The withdrawals are necessary, Heart Association spokesmen say, because independent appeals raise more money. They produce data from selected cities of similar size to show per capita increases when they conduct go-it-alone campaigns.

However, United Community Funds and Councils of America figures show Heart Association chapters received 27.5 per cent more money from their first United Fund allocation than they did in their last separate agency campaign.

The American Cancer Society has ordered all its chapters to withdraw from United Funds by January, 1960. It was included in 392 federated drives in 1958.

In Washington the Cancer Society never was a member of UGF. Its rate of financial growth has kept pace with its national organization. It raised \$113,600 in 1947 and \$354,065 in 1958. Its national body went from \$10 million to almost \$30 million in that time.

When health appeals can collect such vast sums, it does little good to talk to their leadership about the economy of one fund campaigns.

Furthermore the Federal Government's fund-raising policies reinforce the desire of the health appeals to remain outside United Funds.

Original intent of drafting a Federal fund-raising policy was to cut down on

the harassment of Government employees by multiple appeals.

#### Government Not as Firm

But Government was not firm as industry was in Detroit where no solicitation of employees is permitted except through a united drive.

As finally evolved, Government's policy permits the major health appeals to solicit simultaneously through the Federal Service Campaign for National Health Agencies in the spring of each year while United Funds can solicit Government employees in the fall.

This policy was developed after the health appeals exerted great pressure on some of the plan's chief architects, including former Assistant to the President Sherman Adams and former Civil Service Commission Chairman Philip Young.

Instead of cutting down on multiple appeals in this community, the Government's policy has strengthened the position of the "go-it-alone" campaigns and weakened the united effort for these reasons:

- There is no incentive for the major health appeals to join a united drive because they still can get to their chief source of contributions, the Government employe, through the Federal Health Service Campaign.

- National health appeals are eligible to solicit through the Federal health campaign if their local affiliates are not already in United Funds. Thus, they are exerting pressure on their affiliates to get out of the united campaign, join the Federal effort and then conduct independent residential and business campaigns.

This fierce competition over the charity dollar places the problem of the multiplicity of campaigns squarely on the shoulders of the giver.

#### Giver Faces Choice

He must decide whether he should give money in terms of loyalty to a particular specialty or in terms of pro-

(Continued next page)

viding balanced community services.

As the independent appeals continue to multiply and ask for an ever-increasing share of the charity dollar, the giver begins to look upon a United Fund as just another single drive.

Consequently many givers make the same contribution to the multi-agency United Fund as they do to a drive specializing in one cause. So community services suffer.

In the National Capital Area, for example, the \$6.7 million raised during last fall's United Givers Fund drive was short of a \$7 million goal which was \$1.5 million short of what agencies said they needed.

### Additions Questioned

Next fall there probably will be four additional UGF members. But some givers already are questioning the wisdom of admitting these new agencies because there is not enough money available for existing UGF members.

It appears that many givers have forgotten the two basic objectives of UGF. One was to end the multiplicity of drives. But the first objective was to give participating agencies a "FAIR SHARE" of dollars. And that "fair share" was to be increased in proportion to the number of increased services UGF was able to finance.

Until givers make good on their end of the bargain, there can be no end to multiple appeals.

---

## Giver Alone Has Power to Halt Fund-a-Month Cycle

### Article VI

By Eve Edstrom  
Staff Reporter

That rallying cry "give once for all" strikes a sour note today.

In the Washington metropolitan area, as elsewhere, United Givers Fund campaigns are not even ended before the parade of those passing the hat for health charity dollars begins.

In November it is give to muscular dystrophy and arthritis and rheumatism.

In December it is give to tuberculosis.

#### Housewives Call a Halt

In January it is give to the "3 Faces of Crippling," polio, rheumatoid arthritis and brain defects.

In February it is give to heart.

In March it is give to crippled children.

In April it is give to cancer.

In May it is give to multiple sclerosis and cerebral palsy.

Will this contagion of disease appeals ever stop?

In a variety of ways communities have attempted to cut down on the mushrooming appeals.

Housewives, who have rebelled as volunteers, have conducted combined drives for all health agencies.

Citizens have established review boards that give or withhold seals of approval for local campaigns.

And six cities — Durham, N. C.; Lorain, Ohio; San Bernardino, Calif.; Newport News, Va.; Boston and Pittsburgh — have set up health foundations as affiliates of United Funds to achieve a balanced program of planning and fund-raising for health needs.

Money for the health foundations is collected during the regular United Fund campaign. In Pittsburgh, for example, about \$775,000 or 8 per cent of the annual United Fund collection went to the health foundation. This supports health agencies which joined the United Fund effort, such as the cerebral palsy

and multiple sclerosis groups, as well as research in the fields of those appeals which did not join. Recently the Pittsburgh foundation gave \$434,000 for 38 medical projects, many of them to be carried on in university medical laboratories.

The Pittsburgh effort is designed to support health research while not giving a disproportionate share of the community charity dollar to it.

#### Ford Urges Balance

"The community's health program should reflect a full and carefully considered balance," stated Benson Ford, president of Detroit's United Foundation.

"Not only should the function and facilities of already existing services be coordinated but if the United Fund is to continue to appeal through the program it offers, then its program must have a continually adjusted balance designed to care for the whole man," he added.

This approach is based on the belief that the needs of the "whole man" must be assessed before research funds are assigned according to these needs and not according to the emotional appeal of a particular cause.

But the independent health appeals bitterly assail this movement toward health foundations of the United Funds.

The American Heart Association, for example, looks upon the health foundation as "an instrument of coercion designed to parallel the work of the voluntary health agencies and to deprive them of their independence."

#### Apathy Cause Charged

Heart spokesmen further declare that federated appeals cause citizens to become apathetic and the educational message of heart or cancer is lost.

But that is not true if a United Fund is strong.

Detroit is the foremost example of how a united drive pays off for national health agencies and local services.

In that city spokesmen for the major health appeals believe they have im-

proved their contact with public since joining the federated campaign.

During Cancer Crusade month, for example, Cancer Society workers can concentrate on the seven danger signals of cancer instead of having to raise the \$770,000 they get from the United Foundation.

Despite their success, however, the American Cancer Society ordered its Detroit affiliate to drop the United Foundation.

But the Detroit area chapter stood firm, declaring that participation "is not only justified but indeed essential to this community's complete support of the cancer program."

If a united appeal can get the charity health message across in Detroit why can't it in other cities?

#### Lip Service Not Enough

The blunt truth is that too many communities have given only lip service to the "give-once-for-all" principle. Too few have put their money where their mouth is.

Through their United Funds, they have created economical fund-raising vehicles only to place too cheap a price on their product so that while United Funds may meet dollar goals, they seldom meet total community service goals.

This failure to get behind United Funds has permitted independent appeals to flourish and has allowed national agencies to dictate how local money is to be collected.

In effect, the independent health appeals say that is the way it should be. The giver, they say, must be permitted to exercise his democratic right and give to what he pleases. He must not abdicate this right to a "catch-all," impersonal fund.

But United Fund spokesmen ask if it is democratic for the independent appeals to abdicate responsibility for seeing that all charity dollars are spent in relation to BALANCED COMMUNITY needs?

The answer to that question must come from the giver.



# You Have a Right to Know

By CLINTON MILLER

The series of articles reprinted in this issue from the Washington Post are to help you inform friends, neighbors, editors, and Congressmen of the need for H. R. 9319 which was published in full in the Feb. N.H.F. Bulletin, p. 15. This green light bill only covers public appeals which collect over \$1 million per year. There were 19 such appeals in 1961:

	Million
1. American Cancer Society	\$37
2. National Tuberculosis Association	29
3. American Heart Association	27
4. National Foundation (March of Dimes) (est.)	27
5. Nat. Soc. for Crippled Children and Adults	19
6. United Cerebral Palsy Associations	12
7. National Assn. for Retarded Children	10
8. National Assn. for Mental Health	6
9. Muscular Dystrophy Assns. of America	5
10. Arthritis & Rheumatism Foundation	4
11. National Fund for Medical Education	4
12. National Multiple Sclerosis Society	3
13. Planned Parenthood Fed. of America	3
14. American Foundation for the Blind	3
15. National Council on Alcoholism	2
16. Seeing eye	2
17. National Society for the Prevention of Blindness	1
18. Damon Runyon Memorial Fund for Cancer Research	1
19. National Cystic Fibrosis Research Foundation	1
TOTAL	\$196

In addition, there are the following general appeals:

	Million
1. Local United Funds and Community Chests	\$497
2. American National Red Cross	98
3. USO	7
	\$602

Over 50,000 local level volunteer health agencies, and those national appeals who collect less than \$1 million are not covered by H. R. 9319.

This bill forces a full disclosure of fund raising and fund expenditure. It has a particular spotlight for the "Pro-

essionals". It would allow the public to know about all salaries paid over \$10,000.00 per year.

## 48,000.00 PER YEAR SALARY

April 6, 1961, the AP reported that Marvin L. Kline was sentenced to serve up to 10 years for fraudulently obtaining a \$23,000.00 yearly pay raise as head of the Sister Elizabeth Kenny Foundation. How much was he getting before? Only \$25,000.00. He was former Minneapolis Mayor, and was convicted of first degree grand larceny Feb. 2 in Minn. State District Court. If salaries of \$48,000.00 per year are paid (by charities) that aren't even in the top 19, then how much do you think they pay officials in **leading** appeals? Your Washington Office tried to find this out.

We called the Washington Office of the National Foundation (March of Dimes). We asked if they would object to H.R. 9319 which would require an accounting of all salaries over \$10,000.00. We were informed that they made this declaration now. I asked them to send it to me. This is what I received:

"During 1961, salaries totaling 3.3 million were paid by the National Foundation to 837 employees." They broke down the figures as follows: 2% received over \$15,000.00; 8% received from \$10,000.00 to \$15 Thousand; 20% received from \$5,000.00 to \$10,000.00 and 70% received less than \$5,000.00. This means that for this single drive, 16 people in America receive over \$15,000.00 per year. (Just how much more is not known, and will not be known until H.R. 9319 becomes a bill.) 67 people receive between \$10,000.00

and \$15,000.00 per year, and 1167 employees get from \$5,000.00 to \$10,000.00. This totals 250 people, an average of five per state that are receiving more than \$5,000.00 per year to conduct one fund raising activity per year.

## INVASION OF PRIVACY

When we again contacted the office of the National Foundation and told them that this was not the full disclosure that the Herlong Bill, (H.R. 9319) would require, and that we wanted to know what the salaries of the top 16 were, I was informed that this was regarded by the Foundation as an "invasion of privacy". We reminded them that theirs was not a private, but a **public** fund raising agency, given the special privilege of TAX EXEMPTION. We suggested that we know that Congressmen get \$22,500.00, and we still support them. Because the public knows that some men receive large salaries does not mean that the public will not support their charity, but they have a right to know just how large the policy making salaries are. So we are left wondering what the top 16 make and what they do. At a dime a day, it would take over 90,000 years to pay the yearly salaries of just this one fund. That's quite a march of dimes! Public confidence in the National Foundation may be reflected in the following figures: In 1957 they collected \$44 million. They had dropped to \$34 million in 1959, to 31 million in 1960, and \$27 million (est) in 1961. Wide circulation of this Bulletin may result in a voluntary public disclosure by all fund raising appeals. Certainly every congressman should receive a copy of this Bulletin, and every editor of every newspaper. By requesting permission from the Washington Post, they can reprint this series in their own paper. Encourage them to do so. Write to Wilbur D. Mills as

## Monday May 21st

This could be a great day for the American People. On this date the suit of the Boston Nutritional Society against Dr. Frederick Stare of Harvard University comes to trial. If the Nutritional Society wins its case, it will act as a curb on the practice of so-called orthodoxy calling all those who do not agree with them in matters of health and diet, "quacks and charlatans."

We have been advised that through the generosity of those who read the complete story in the January Bulletin, some \$1400.00 has been received to help pay the expense of the trial. More is needed and as this case is so important to those of the general public who are interested in the health of themselves and their children, we hope others will send a donation to The Boston Nutritional Society, Box 408 Back Bay Annex, Boston 17, Massachusetts.

## Tuckey and Hydro-Chloric Acid

So many folks have written to the Federation to secure reprints of Dr. E. Hugh Tuckey's convention talk on the "Place of Hydro-Chloric Acid in the Diet" we have requested Merle Enterprises, 145 Lombard, Illinois to transcribe the talk and make reprints. This has been done and you can now secure copies at the rate of: One copy 40c—10 for \$3.50—100 for \$30.00. Send all orders direct to Merle Enterprises, P.O. Box 145, Lombard, Illinois. Do not send your orders to the Federation at San Francisco.

Chairman of the House Committee on Ways and Means and request that they have early hearings on this bill. (H. R. 9319 Herlong, Fla.) Do not write Senators yet on this bill.

Published for Distribution to Members  
Without Extra Charge by the

**NATIONAL HEALTH FEDERATION**

709 Mission Street  
SAN FRANCISCO 3, CALIFORNIA

Return Postage Guaranteed  
Entered as Second Class Matter

Subscription: \$3 Per Year (to Non-Members)

The subscription price of the National Health Federation  
Bulletin is included in the membership dues.

PRICE FOR ADDITIONAL COPIES OF THIS ISSUE  
25¢ each — 7 for \$1.00 — 35 for \$5.00 — 100 for \$12.00

PLACE  
3¢ STAMP  
HERE

- I wish to become a **REGULAR MEMBER** of the National Health Federation and am enclosing \$3.00 as dues, \$1.50 of which is for a subscription to the **BULLETIN** for the current year. Family membership \$4.00.
- I wish to become an **ACTIVE MEMBER** of the National Health Federation and am enclosing \$5.00 as yearly dues, \$1.50 of which is for a subscription to the **BULLETIN**. I wish to form a local chapter, so please send me necessary literature and instructions.
- I wish to become a **SUSTAINING MEMBER** and am enclosing \$..... (minimum fee, \$25.00) as membership dues for the current year, \$1.50 of which is for a subscription to the **BULLETIN**.

Name .....

Address .....

NOTICE: Regular Membership Dues have been raised from \$3.00 to \$5.00 per year as of June 1st, 1962.

Mail direct to **NATIONAL HEALTH FEDERATION**  
709 Mission Street, San Francisco 3, Calif.

Renewal

New Member

## NHF Will Celebrate the 4th of July

- 1—The next mid-west convention of the National Health Federation will be held at Columbus, Ohio, July 1-2-3 and 4, this year 1962.
- 2—The place will be the Neal Hotel and to help the Federation make it a real old-fashioned family celebration the hotel management has made the following low rates. Single room \$7.00, double room only \$8.00, twin beds \$10.00, and all children under 14 free.
- 3—For years we have been celebrating the 4th of July by putting on our liberty stamp drive on that day. We have long felt our mid-west convention should climax on that day. We were hindered, but at long last we have the go ahead.
- 4—The liberty stamp drive will continue to climax on the Fourth of July, while our members in convention seek to arouse the public to a realization of our rapidly vanishing freedoms in the health field.
- 5—We have set our goal at 1,000 paid registered members and guests. Plan your vacation so you can be there. We suggest different groups start now planning on car loads and bus loads. The program will be the best. The June issue will tell you about it.
- 6—The Eastern convention — three days — will be held either the last week in September or the first week in October in Washington, D. C. THE NATIONAL HEALTH FEDERATION IS ON ITS WAY.