FOREWORD.

My Friends: Do you know that one Indian baby out of every three dies before it is 3 years old because it does not have the right kind of care?

The reports which I receive from superintendents, doctors, field matrons, and others show this to be true.

Do you know that a great many of these deaths can be prevented? It is not natural for a baby to be sick. Health is its normal condition. It is a pity, therefore, that so many Indian baby lives have been lost because their mothers did not know how to keep them well. Almost every sickness your baby has had could have been prevented.

You are very much interested in the welfare of Indian babies, and I am, too. I hope you will read this pamphlet and faithfully follow the suggestions it contains. Possibly you will find that some of these differ from what you have supposed to be the best rules for taking care of your baby. It is because so many Indian mothers follow wrong ideas in caring for their children that so many of them die.

I am sure, therefore, that if you will endeavor to care for your little ones as suggested in this pamphlet you will be rewarded with the best and most wonderful possession any of us may ever hope to attain—healthy and happy children.

At the close of this pamphlet you will find my “Save the Babies” letter of January 10, 1916.

Tell your friends about this pamphlet and explain it to those who can not read. If you desire more copies the superintendent, doctor, field matron, or any other Indian Service employee will be glad to obtain them for you.

Sincerely, your friend,

[Signature]

Commissioner.
INDIAN BABIES: HOW TO KEEP THEM WELL.

BEFORE THE BABY ARRIVES.

Motherhood should cause you no fear or trouble. As soon as you know a baby is coming, tell your physician and field matron about it. They will tell you what you must do to keep well.

If you have had one miscarriage another may be prevented by proper treatment. These accidents are often caused by lifting heavy things and by sudden jolts, etc. They are more dangerous than normal births.

If you are going to have a baby you must have plenty of sleep. Do not stay up late and dance all night. Keep the windows open while you sleep or, better still, sleep out of doors when the weather will permit. Take frequent baths. It is better for you and will be better for the baby.

Keep your breasts clean and soften them with a little vaseline each day. If you do this they will not be so apt to get sore.

Drink plenty of water and keep the bowels moving every day. Eat clean, well-cooked food. The baby must not be starved before it is born. Remember, however, that overeating is bad both for you and the baby. Do not drink beer or other alcoholic drinks or patent medicines.

AFTER THE BABY IS BORN.

Have the baby's birth reported. For many reasons it is important that the birth of your child be legally recorded. Such a record may help you to prove some day that it is an American citizen. It will prove how old it is, and establish the right to vote, to marry, to make contracts, to establish claims to inheritance, etc. They all depend upon the filing of a correct birth record. The superintendent, physician, or field matron will attend to this for you, if you ask them.

If you love your baby, nurse it for the first 12 months. Ten babies nursed on the bottle among white people die to one nursed on the breast. The mother's milk is nature's food and is better for the baby than any other. It is always ready and is never sour. It does not have to be prepared or measured. It will make your baby strong, as it is free from germs and dirt.
Do not wean the baby until it has nursed 10 months or a year, as long as it is gaining weight; but if you are very ill or think you can not nurse, or the baby is losing weight, consult the doctor and ask him how to feed your baby from the bottle. Some Indian mothers, however, nurse their babies two or three years. This is a bad practice, both for mother and baby.

The baby may be put to the breast as soon as it is washed, dressed, and ready for the mother, if she is not too tired. If so, let her rest a few hours. During the first 24 hours the baby should not nurse more than four or five times, but at both breasts each time. If it cries much it can have cool boiled water. Do not feed it tea, coffee, melons, candy, or any solid food.

A new baby will thrive better if the intervals between feedings is fairly long. During the first two days three nursings a day and one at night are enough. From the third day to the fourth month there should be seven nursings in the 24 hours, three hours apart, one of them being at night. Night feeding (after the 10 o'clock
INDIAN BABIES: HOW TO KEEP THEM WELL.

BABY BEING WEIGHED.
GIVE BABY PLENTY OF COOL, BOILED WATER.
nursing) may be omitted when the child is 4 months old. The following table shows the nursing interval and the number of feedings in 24 hours when the three-hour interval is used.

<table>
<thead>
<tr>
<th>Period</th>
<th>Nursings in 24 hours</th>
<th>Interval by day</th>
<th>Night nursings (14 p. m. to 6 a. m.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>First and second days</td>
<td>4</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Third day to four months</td>
<td>7</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Four to seven months</td>
<td>6</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Seven to twelve months</td>
<td>5</td>
<td>4</td>
<td>0</td>
</tr>
</tbody>
</table>

Mothers must not offer the breast every time the baby cries. Give the breast by the clock. At other times give pure water. Babies, as well as adults, need water.

If you follow this rule there will be fewer dead babies.

Do not give the baby solid food until the teeth are well-developed, and then only simple, well-cooked food, such as bread and butter, baked potato, cereal, rice, broths, soft-boiled eggs, or a little fruit. All fruits, however, should be well cooked. After the baby is a year old plenty of cow's milk is very good food. If you can not get this, you may be able to get condensed milk, which is a good substitute and many Indian babies thrive on it. Feed the baby regularly.

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BOTTLE FEEDING.

If the baby must be fed from the bottle, absolute cleanliness is essential in everything used, and the milk must be modified or diluted as the doctor directs.

Do not use patent foods sometimes found in traders' stores unless the doctor recommends them.

Be sure, if you are using cow's milk, that the cow is not dirty when milked, that the stable is not dirty, that the milk is not dirty. The milk must be clean and free from germs.

Many babies' deaths during the summer are due to feeding impure milk or milk which has not been kept cool. To prevent milk from
making the baby sick, during the hot weather, scald the milk without letting it boil. To do this set a covered bottle of milk in a saucepan and place this in a shallow pail. Pour water in the pail until the water level is about 4 inches from the top of the bottle. Set on the stove, and as soon as the water comes to a boil remove the bottle of milk and allow it to cool.

It is better to prepare in this way a day’s feedings at one time, if you have some way in which to keep the milk cool afterwards. Be sure to keep it covered. Never keep the feeding bottle warm all night, as germs will grow in it and the milk will get sour.

A double boiler, as illustrated, is a useful device for the purpose of scalding milk.

![Illustration of double boiler]

If you can not afford to consult a physician or there is no agency or school physician, read the following instructions in regard to feeding your baby.

The simplest plan is to use whole milk (taken before the cream has been allowed to rise), and dilute it according to the child’s age and digestion.

Beginning on the third day, the average baby should be given 3 ounces of milk daily, diluted with 7 ounces of water. To this should be added 1 tablespoonful of lime water and 2 even teaspoonfuls of sugar. This should be given in seven feedings. One ounce is about two level tablespoonfuls.

At one week the average child requires 5 ounces of milk daily, which should be diluted with 10 ounces of water. To this should be added 1½ even tablespoonfuls of sugar and 1 ounce of lime water. This should be given in seven feedings.

The milk should be increased half an ounce about every four days. And the water should be increased half an ounce about every eight days.
At 3 months the average child requires 16 ounces of milk daily, which should be diluted with 16 ounces of water. To this should be added 3 even tablespoonfuls of sugar and 2 ounces of lime water. This should be given in six feedings.

In mixing the milk and water after the third month, the milk should be increased half an ounce about every six days, and the water should be reduced half an ounce about every two weeks.

At 6 months the average child requires 24 ounces of milk daily, which should be diluted with 12 ounces of water. To this should be added 2 ounces of lime water and 3 even tablespoonfuls of sugar. This should be given in five feedings.

The amount of milk should now be increased half an ounce every week.

The milk should be increased if the child is hungry and is digesting his food well. It should not be increased unless he is hungry, or if he is suffering from indigestion even though he seems hungry.

At nine months the average child requires 30 ounces of milk daily, which should be diluted with 10 ounces of water. To this should be
added 2 even tablespoonfuls of sugar and 2 ounces of lime water. This should be given in five feedings.

The sugar added may be milk sugar, or, if this can not be obtained, cane sugar (granulated sugar) or maltose (malt sugar) may be used.

At first plain water should be used to dilute milk.

Barley water: After three months a weak barley water may be used in place of the plain water; it is made by adding one-half level tablespoonful of barley flour to 16 ounces of water and cooking for 20 minutes.

At six months the barley flour may be increased to 1½ even tablespoonfuls cooked in 12 ounces of water.

At nine months the barley flour may be increased to 3 level tablespoonfuls cooked in 8 ounces of water.

A very large baby may require a little more milk and a small or delicate baby will require less than the milk allowed in these directions.

The following table shows amount of food required at the different ages and the proper intervals between feedings.
Schedule for feeding healthy infants during the first year.

<table>
<thead>
<tr>
<th>Age</th>
<th>Interval between meals by day</th>
<th>Night feedings (10 p.m. to 7 a.m.)</th>
<th>Number of feedings in 24 hours</th>
<th>Quantity for 1 feeding</th>
<th>Quantity for 24 hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Second to seventh day</td>
<td>Hours</td>
<td>3</td>
<td>1</td>
<td>7</td>
<td>14-24</td>
</tr>
<tr>
<td>Second and third weeks</td>
<td></td>
<td>3</td>
<td>1</td>
<td>7</td>
<td>2-4</td>
</tr>
<tr>
<td>Fourth to ninth week</td>
<td></td>
<td>3</td>
<td>1</td>
<td>7</td>
<td>3-4½</td>
</tr>
<tr>
<td>Tenth week to fifth month</td>
<td></td>
<td>3-4½</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fifth to seventh month</td>
<td></td>
<td>3-4½</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seventh to twelfth month</td>
<td></td>
<td>3-4½</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Give the baby plenty of cool boiled water between feedings. Use nursing bottles like this:

**Right kind of bottle.**

Do not use a bottle with a long tube like this. It is too hard to clean and forms a good hiding place for germs:

**Wrong kind of bottle.**
Many Indian babies when very young are strapped by their mothers to boards and cradles.

A NAVAJO CRADLE.

This is not good for the baby as it restricts the baby’s movements. How would you like to have your arms and legs tied up so you could not move them? It is natural for a baby to want to work its arms and legs, and we must not stop him from doing so.
CLOTHING THE BABY.

Fresh air.—When Indian babies are very young it is not uncommon to see the Indian mothers cover the cradles entirely with a blanket. This shuts off the fresh air from the baby and does it harm. It renders the baby more likely to catch cold and makes it uncomfortably hot.

Later on when the baby learns to walk he is often allowed to run about naked. This is not good either. Babies must not be either smothered or frozen.
The baby is very sensitive to heat and cold. In hot weather mothers should not put too many clothes on the baby. When he gets older, however, and goes out, he should have clothing enough to keep his body, legs, and feet warm and dry.
Bathing.—Give the baby a warm bath in a warm room every day. The best time is just before a morning feeding between 8 and 10 o’clock. After its bath the baby will be ready to take its food and go to sleep. On very warm days cool water spongings will be very comforting.

**BATH THE BABY EVERY DAY.**

Keep the baby’s towels and wash cloths clean and in a separate place from all others. Be sure that cloths which are used around the baby’s eyes in bathing are perfectly clean, or he may catch trachoma.

**IMPETIGO CONTAGIOSA (SORES).**

This is a long name which is given to the “sores” which are often seen on the faces and hands of Indian children. It is contagious (“catching”) and often spreads among all the children of the same family or those children who play together.

When the trouble starts, all that can be seen is a small vesicle (blister) about the size of a pinhead, most often on the face. It soon spreads until it is about the size of a dime. Within a few days straw-colored crusts form, which are loose at the edges and appear as if stuck on the skin. If one of the crusts is pulled off it leaves a red
spot which may ooze a drop of blood. When the scab falls off a small spot is left which gradually fades.

This disease gives the child a nasty appearance, and it may spread the disease to other children, so you should make haste to cure the trouble. The physicians or field matrons will gladly help you. The crusts may be removed with soap and water. Sometimes it is well to soften them with vaseline. After the crusts are removed apply 5 per cent carbolized vaseline or ointment of ammoniated mercury.

![Baby with "sores"](image)

**HEAD LICE.**

Children often become infested with lice, which multiply very readily. The "nits" (little whitish bodies) are glued to the hair with a substance which is secreted by the female louse. The lice cause irritation of the scalp and the child scratches vigorously to relieve the itching, and often makes sores on its head by so doing, therefore you should try to keep the child's head free from these pests. Consult your doctor or the field matron if you can. If you can not, a thorough application of kerosene oil will get rid of the lice if left on the scalp for 12 to 24 hours and then removed with soap and water. The nits can be removed from the hair with vinegar. Be careful not to get either of these remedies in the child's eyes.

Blue ointment is often asked for by Indians, and is beneficial, but is rather a nasty remedy.
BODY LICE.

Body lice are also troublesome and cause itching. They have been found to spread typhus fever. To get rid of the body louse, boil all cotton clothes and bake woolen clothes in a hot oven, which will kill the lice. If this can not be done, a teaspoonful of powdered sulphur may be placed in the bed, and rubbed into the seams of the clothing, and a 2 per cent ointment of carbolic acid applied to the body.

SCABIES ("ITCH").

This disease is accompanied by itching and is caused by the itch mite.

The itch mite digs into the skin, and you can sometimes see the burrows—little dotted lines about one-fifth of an inch in length.
The dots are the eggs. At the inner end of the burrow may sometimes be seen the itch mite, a bright shining speck.

The itch is so severe that the child scratches itself until it makes sores. The places which itch the worst are the tender places in the skin such as between the fingers, backs of the hands, arm pits, and around the breasts. This disease is usually caught by one child sleeping with some one who has the trouble.

Consult the doctor or the field matron. If you can not, give the child a bath in hot water and soap, dry the skin vigorously with a rough towel, and rub sulphur ointment into every spot that itches. Use the sulphur ointment morning and night for three days, having the child wear the same underclothes. Then give the child a bath with soap and water, and the patient should be well. It is a good thing to throw into the bed a teaspoonful of powdered sulphur.

In all cases the clothing and bed must be disinfected. Boil everything that will stand it. Clothing may be baked or ironed with a very hot iron. All the children of the family, as well as any grown-ups who may be infected, should be treated at the same time.

FLIES.

Here is a picture of the baby’s worst enemy—the house fly. Do not allow flies on the baby’s face or bottle. Do not allow them on the table or in your house. Flies feed on manure, spit, and other filth. Flies’ hairy legs are covered with germs which they carry to food, infecting it. They are disease carriers. They infect meat, melons, and all food they touch. Many Indian babies have died in the summer time from diseases carried by flies.

Keep flies from the sick, especially those who have contagious diseases. They may carry the disease to others.

Screen all windows and doors. Cover all food after a meal. If there is no dirt or filth there will be no flies. If you have flies there are breeding places near by. It may be behind the door, under the table, or in decaying food in your yard. Do not have corrals or barns near the house, and do not have burros or horses tied close to your door.

Kill all the flies you see. It has been said that in one season a female fly may have 5,000,000,000,000 offspring. Poison, tangle, trap, and swat. Get the habit.
TUBERCULOSIS (CONSUMPTION).

Many Indians have this disease. It is catching and is caused by a germ. Many of the "kernels" or enlarged glands in the neck among Indian children are due to this germ. Flies are active in spreading it by carrying germs to your home and depositing them on the food you eat and in the milk and water you drink.

The most common source among Indians is the spit from those Indians who already have the disease. Consumptives are much more dangerous to infants and young children than to adults. If a patient is careless with his spit, he may spread the disease to his friends and family and lessen his own chances of getting well. When it is necessary for him to cough or spit he should use a paper napkin or a rag, which can be burned before it becomes dry and which can be kept from the flies. Better than either a rag or a napkin are the spit cups which are furnished to the Indian Service physicians, and which you can obtain for the asking. These cups should also be burned after being used.

If you have some one in your home who is sick with consumption, make them use either a sputum cup, rag, or napkin to spit in, and be sure to burn these before the spit becomes dry.

Anyone with consumption should never swallow his own spit, because in this way the disease might be carried to the stomach and bowels.

A person having consumption should stay in the open air as much as possible. If he sleeps in the house it should be well ventilated. The room in which he sleeps should have at least two windows, and the windows should be on at least two different sides of the room.

He may sleep out of doors with benefit. Sun and air every day the room in which a consumptive sits.

Eggs and milk are two very good foods for him. He should drink no whisky or alcohol in any form.

Cold will not hurt the consumptive if he is warmly clad. Keep your homes ventilated. Where there are many persons in one room
without ventilation the air becomes very bad and tends to make their health poor. If one of them has tuberculosis the rest have a good chance to catch it. Therefore, place more windows in your home.

Do not practice overcrowding. Stay away from those houses where you know Indians have tuberculosis. Your child may catch it, even if you do not. Overheated houses make you more likely to catch cold, and a bad cold is often the way a case of tuberculosis begins. Whenever, therefore, you have a bad cold you should consult the doctor.

Dishes used by consumptives should not be used by others, and they should be boiled after being used by the sick person, in order to kill any germs which may be on them.

**VACCINATION.**

Have your baby vaccinated. If all Indians would be vaccinated every five years there would be no smallpox on Indian reservations. Persons who are properly vaccinated seldom have smallpox. Have the physician vaccinate you and your baby, and return to see him as often as necessary.
TRACHOMA (SORE EYES).

Watch your baby’s eyes, especially if any of the family have trachoma. You have seen many Indians with “sore eyes” and know how much pain they suffer and how many of them lose their sight, some of them becoming totally blind. The matter from these “sore eyes” is very contagious, and will surely give your baby trachoma if any of it gets into the baby’s eyes. Therefore do not allow anyone to use the towels or wash clothes that belong to the baby. Do not wipe the baby’s eyes with anything dirty. Trachoma spreads very rapidly in dirty homes. Keep your homes clean and your towels, handkerchiefs, bedding, clothing, and bodies clean.

Have the baby’s eyes examined by the doctor from time to time to see whether he may have trachoma. This disease can be cured and the eyesight saved if treatment is given early. Unless the treatment is kept up for many months the disease will not be cured. If you have sore eyes, go to the doctor at once.

Indians having trachoma should have their towels, handkerchiefs, wash cloths, and washbasins separate from those used by well persons.
HOSPITALS.

On some of the reservations hospitals have been erected where the sick grown-ups and the Indian babies as well may receive treatment. Many diseases can be handled better in a hospital than at home. This is true of tuberculosis (consumption), trachoma (sore eyes), pneumonia, any serious lung trouble, and many other diseases.

Mothers should go to hospitals when their babies are about to be born, especially those women who have had trouble before. The mothers can then have good treatment and the babies will get a good start in life.

When the superintendent or physician tells you you ought to go to a hospital, you should go at once.

Of course, all Indians treated in hospitals do not get well, but almost all of them do. You are much more likely to get well if treated in a hospital than if treated any other way.
SAVE THE BABIES.

JANUARY 10, 1916.

To superintendents and other employees of the United States Indian Service:

In an address before the Congress on Indian Progress held at San Francisco in August of last year I said:

It is our chief duty to protect the Indian's health and to save him from premature death. Before we educate him, before we conserve his property, we should save his life. If he is to be perpetuated, we must care for the children. We must stop the tendency of the Indian to diminish in number, and restore a condition that will insure his increase. Every Indian hospital bed not necessarily occupied with those suffering from disease or injury should be available for the mother in childbirth. It is of first importance that we begin by restoring the health and constitution as well as the education of our Indian children. Education and protection of property are highly important, but everything is secondary to the basic condition which makes for the perpetuation of the race.

That thought has deepened its hold upon my convictions.

We must guarantee to the Indian the first of inalienable rights—the right to live. No race was ever created for utter extinction. The chief concern of all ethics and all science and all philosophies is life.

The Indian has demonstrated his humanity and his capacity for intellectual and moral progress amid conditions not always propitious, and I am eager to participate with all the favoring forces that contribute to his racial triumph, believing as I do that when he comes to himself as a factor in the modern world his achievements will enrich and brighten the civilization of his native land.

I should like to get the feeling I have upon this question into the conscience and aspirations of every Indian Service employee until there shall prevail a sort of righteous passion to see that every Indian child has a fair chance to live.

There is something fundamental here.

We cannot solve the Indian problem without Indians. We cannot educate their children unless they are kept alive.

All our Indian schools, reservations, individual allotments, and accumulated incomes tend pathetically toward a wasted nitre of untaught and untaught, decadent people.

If we have an Indian policy worthy of the name, its goal must be an enduring and sturdy race, true to the noblest of its original instincts and virtues and loyalty sympathetic with our social and national life; a body of efficient citizens blending their unique pulse and powers with the keen and sleepless vigor of the white man.

We must, therefore, renew daily our warfare against the arch foe of efficiency—disease.

We must begin at the right place—not only with the infant at its mother's breast but with the unborn generation.

The new campaign for health in which I would enlist you is first of all to save the babies.

Statistics startle us with the fact that approximately three-fifths of the Indian infants die before the age of 5 years.

Of what use to this mournful mortality are our splendidly equipped schools?

I earnestly call upon every Indian Bureau employee to help reduce this frightful percentage! Superintendents, teachers, physicians, matrons, nurses, everyone can do something by instruction or example, the physician with his science, the nurse with her trained skill, the matron with her motherly solicitude, all of us by personal hygiene, cleanliness, and sanitation.

With this idea uppermost, all employees whose duties bring them in touch with Indian families must work in closest harmony for surrounding the expectant Indian mother with favorable health conditions before and after childbirth. The sanitation of the homes of such women should have special attention, and no baby allowed to be born into an environment generating disease if prevention is available.

The simplest rules of motherhood applied under intelligent and friendly direction would save most of the Indian babies who annually fill untimely graves.
I want to send this safety, as far as possible, into every home of an Indian mother, whether that home be a topa, a tent, a log house with dirt floors, or a mere comfortable shed.

This means work, hard work, but the reward will be living souls.

I shall expect each superintendent to acquaint himself with the home conditions of every Indian family on the reservation and to adopt practical and effective means for quick and certain improvement.

Superintendents must organise such a system of cooperative information through their employees as will enable them to do this, exercising, of course, great care and discretion in gathering the requisite information.

I shall consider, on the superintendent’s recommendation, a reasonable use of individual Indian monies for the improvement of Indian homes, where the family has such funds. In the absence of such monies, every effort must be made to secure clean and wholesome conditions through the efforts of the adult members of the family.

If there are no members physically able to labor, expenditure may be recommended from the funds “Relieving distress and prevention, etc., of disease among Indians.”

The core of the matter is this: We must, if possible, get rid of the intolerable conditions that infect some of the Indian homes on the reservation, creating an atmosphere of death instead of life.

It will be the duty of the field matron to learn of conditions existing in Indian homes and of cases requiring medical attention and report them to the superintendent. It will be her duty to see that the prospective mother knows what equipment is necessary for the proper care of her new-born babe, and the importance of the provision which the husband should make for the health and comfort of the mother and child should be early and urgently impressed upon him.

Physicians must be promptly advised of all cases of prospective motherhood and they must see that proper attention is given before and after that event, arranging, if practicable, for hospital facilities where the home surroundings are unfavorable. Special effort should be made to see that the mother has nourishing food before and following childbirth.

I am advised that the death rate among Indian babies is most excessive after the nursing period when, through ignorance or carelessness, they are given improper food, such as green fruits, melons, or corn, made further harmful, perhaps, by the presence of flies, and from the use of which intestinal disorders are almost sure to follow.

There should be vigilant and unrelenting effort to impose upon parents the great importance of supplying food which will furnish proper nourishment for the growing child. There should be constant endeavor to educate parents to an understanding of the values of a sufficient supply of cow’s or goat’s milk, or condensed milk, pure water, and suitable solid food, and to the necessity of maintaining cleanliness of person, cooking utensils, and other articles of domestic use.

It would be worth while, it would be great, if we could lift the Indian out of his unenforced condition and induce him to see that the natural and beautiful love he has for his children will not keep them alive and well and joyful unless supplemented by a rational use of food, clothing, fresh air, and pure water.

If Government aid is necessary to bring health out of disease and squaller, it should not be withheld, but good results if obtained will surely continue unless the Indian parents exchange indolence for industry and are awakened to the use and beauty of personal and enduring cleanliness.

This campaign for better babies, for the rescue of a race, calls for redoubled energy and zeal throughout the service, for it means personal work and tireless patience. It is a well-nigh stupendous task, but will be a glorious one if we can make successful headway.

I believe that the high aspirations and missionary spirit generally prevailing among our field employees are a guaranty of substantial and lasting achievements, and I hope and believe we shall have the quickest cooperation of all denominational agencies, religious missionaries, and mission schools having special interest in the Indian’s spiritual welfare and whose precious labors, humanitarian with self-sacrifice and religious fervor, have done so much for the red man. We shall all, I am sure, exert an irresistible union of effort.

The educational propaganda against disease must, of course, be steadily increased and strengthened. Our Indian schools, where so many of the rising generations are assembled, are well organised and should be a mighty instrumentality for health and higher ideals of life. In their education of girls I hope to see added emphasis given to such subjects as home nursing, child welfare and motherhood, the sanitation, arrangement, and management of the home, and that nothing reasonable shall be spared to fit every Indian girl for intelligent housekeeping and for attractive home making.
There is among the Indians a marked and tender affection for their children, but too often the wife, the mother, is regarded and treated as the burden bearer. I wish we might see this habit overcome, for it is distinctly barbaric. I want to see developed and prevalent in every Indian school from the least to the largest that modern and truly chivalrous spirit that recognizes and respects the sacredness of womanhood. I should like to have every Indian boy leave school with this lofty and just sentiment fused into his character, as the picture is the porcelain, because of the deep and exquisite power it will have to shape his future home with health and happiness.

While, therefore, this appeal aims primarily at the safety and health of the child and is intended to enforce the thought that the future of the Indian race may depend vitally upon what we shall be able to accomplish for its new generation, it is also a message of reinforcement to every utterance and every effort expressed or put forth within the Indian Service in behalf of the adult against tuberculosis, trachoma, and every other disease; against the liquor curse; and the use of any kind of enervating drug or dope. I look to the schools chiefly to safeguard the boys and girls enrolled there against these deadly scourges, and there must be no abatement but rather renewed and continuing energies in this direction.

In closing, I ask every employee to do his or her part in widening our work against disease until our Indian reservations become the home of healthy, happy, bright-eyed children with a fair start in life, and our schools become impregnable defenses against every enemy to healthy and high-minded boys and girls.

Sincerely, yours,

Cato Sells, Commissioner.

HEALTHY INDIAN BABY.