# **Enlisting Community Support** of a Polio Vaccine Program

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THE HEADLINE, "Outagamie County Medical Society To Conduct Oral Polio Vaccine Clinics," that appeared in the Appleton *Post Crescent* on January 20, 1964, heralded a change in attitude on the part of the medical society of this Wisconsin county. One year earlier the organization had turned down a similar plan to hold clinics for the valid reason that its members wanted more information on possible side effects of administering the oral vaccine.

Now that the society was satisfied with results of field studies, it scheduled clinics to dispense Sabin oral vaccine. Type I would be given on March 8, 1964, and types II and III on April 19, 6 weeks later. The county medical auxiliary, made up of physicians' wives, was given the responsibility of local arrangements for the clinics. The medical society was to obtain the professional help needed and handle finances.

The Appleton Health Department was assigned responsibility for publicity and conducting one clinic on both days. Since the health officer serves Appleton, the county seat of Outagamie County, only part time, many of his responsibilities in the vaccine program were delegated to the full-time assistant health officer of Appleton.

The Appleton health officer needed help in planning publicity that would achieve communitywide participation. Therefore persons working in communications media, representatives of the county's medical auxiliary, and volunteers from various service organizations were invited to meet with the publicity committee the health officer had appointed.

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The group considered the population to be reached and the funds and resources available. Seventy-five percent of the county population (101,000 by the 1960 U.S. census) live in the southern end of the county in an industrialized strip  $9\frac{1}{2}$  miles long and  $2\frac{1}{2}$  miles wide; the remainder reside in predominantly agricultural areas. Publicity would have to be directed at the largest segment of population but would also need to reach the more sparsely populated areas.

On January 29, 1964, the publicity committee did not yet know exactly how much money the county medical society would appropriate for publicity. Donations of 25 cents per dose from vaccine recipients were expected to help defray expenses. Moreover, volunteers from many fields were available to donate their services. The health department was selected to serve as the nucleus of the publicity program since it was centrally located and had personnel available. The assistant health officer was to spend approximately 85 percent of his time on the publicity phase of the program.

#### **Publicity Program**

Our plan of action was to start light but, in the week before the clinic, finish up with heavy publicity. The plan included:

1. Arrangement for newspaper and radio announcements relaying the endorsement of the program by the Surgeon General, Public Health Service, and the State health officer.

2. Preparation and distribution of visual aids—posters, banners, and the like.

3. Publicizing what oral vaccine is and its successes.

4. Stimulation of newspaper and radio human-interest stories.

5. Preparation of a speakers list of physicians to address various groups, describing the vaccine clinic and the oral vaccine.

6. Seeking possible television coverage.

7. Enlisting aid of churches and schools in relaying messages to the public.

8. Conducting a poster contest on the theme of Sabin on Sunday for children in schools throughout the county to stimulate them to carry the message home to the parents.

The letters of endorsement of the Surgeon General, Public Health Service, and of the State health officer appeared in the Appleton newspaper the first week and were read on the radio several times on 2 separate days that week.

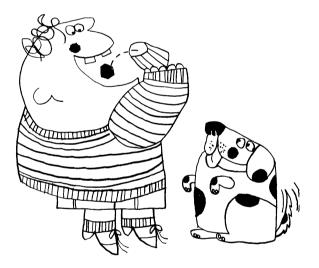
Posters depicting a child receiving oral vaccine while his dog looks on with envy became the first symbol of the campaign (at right). One hundred fifty posters 7 by 11 inches and 600 posters 14 by 22 inches were distributed to supermarkets, restaurants, taverns, banks, physicians' offices, and other places of heavy traffic. Pamphlets giving questions and answers about the vaccine, locations and time of clinics, recommendations as to who should take the vaccine. blank registration forms, and various other information were distributed with the posters. Before the first clinic, 50,000 pamphlets were printed and distributed in lots of 5,000 to supermarkets, whose clerks put one pamphlet in the shopping bag of each customer. Appleton's Junior Chamber of Commerce handled distribution of posters and pamphlets within the city.

A local advertising firm donated space for publicity on a roadside billboard, located on a heavily traveled road and visible from a good distance. A local department store provided a street window for a display and personnel to decorate the window according to the theme we gave them. Manikins represented a doctor, nurse, mother, father, and child. The child and parents were depicted receiving oral vaccine on a sugar cube or in a cup of distilled water. The display was on view for 7 days before the first clinic.

The newspaper and radio carried stories about families afflicted by poliomyelitis and about the volunteers who were setting up the clinics. Spot announcements by physicians were broadcast throughout the day. During the

## SABIN ON SUNDAY GO MARCH 8 AND APRIL 19

Morgan School Madison Junior High St. Pius School Jefferson School Huntley School



week before the first clinic, the publicity campaign was in full swing, spot announcements on radio and television were broadcast several times daily, and local newspapers carried as many as two or three feature stories every day.

Physicians on a speakers committee, organized as a subcommittee of the publicity committee, spoke to various lay and professional groups concerning the purpose of the clinic, pointed out successful programs elsewhere, and answered any questions.

At all schools of the county, children were given pamphlets and registration slips to take home and have filled out before they came to the clinic. A poster contest was held for fifthand sixth-grade pupils of all county schools. The poster theme was designed to encourage the public to participate in the clinic. Three judges, teachers of art in the schools, selected the 10 winners, who were awarded \$5 each. The posters were displayed in the window that the department store decorated for the vaccine program.

Concurrently with the publicity campaign, the vaccine clinics were being organized. This responsibility was assigned to two full-time members of the medical society auxiliary. Ten clinics were set up, five in Appleton and five in outlying districts. Members of the auxiliary were responsible for obtaining all volunteers to man the clinics. The ten clinics required approximately 40 volunteers per clinic to work 3-hour shifts. Committees were set up to obtain supplies, which were both purchased and donated. The Appleton Health Department was able to borrow freezers from a local dairy store in which to store the vaccine until it was used.

On the Sunday before the first clinic, a dry run was held in which 200 persons participated. This rehearsal proved effective in ironing out potential bugs in the operation.

#### First Clinic

On Sunday, March 8, 1964, the clinics were scheduled to start processing at 11 a.m. By 10:15 a.m., however, lines started to form, and at 10:30 we decided to open the doors. A starting time of 10 a.m. is ideal. Churchgoers can participate in the clinics before or immediately after services. At the clinic under supervision of the health department, approximately 2,000 persons received the vaccine in the first hour and a half. The weather in the early morning hours was ideal considering it was March, but shortly after twelve it started to snow and freeze. This adverse weather affected the outcome slightly since it was unwise to thaw all the vaccine ahead of time. It was decided to transport the vaccine to the clinics only as needed. Mobile units of the Civil Air Patrol were effective in cutting travel time and getting the supplies to the clinics as needed. The total

count for the clinics at day's end, based on number of vials of vaccine used, was 84,000 recipients of type I, or 80 percent of our population. In makeup clinics in physicians' private offices during the following week, approximately 10,000 additional persons received the vaccine, bringing the total to about 94,000, or 88 percent of the population, the highest percentage that had been attained in the State at the time.

#### Second Clinic

As planned, the publicity committee followed up the first clinic with stories and information about it. After 2 weeks, publicity was reduced until the 2 weeks before the second clinic. By then 500 new small-size posters had been prepared. Five hundred banners replaced the 600 large posters used in the first clinic; 40,000 new information pamphlets were published. As before, these pamphlets and local newspapers carried registration slips. A person with a filled-out form could go in the front door of the clinic, receive his vaccine, and be out the back door in 1 minute. Different information was given out using the same format as in the publicity for the first clinic. Success of the first clinic made distribution of this information and the banners an easy chore.

Appleton has no television station, but in Green Bay, a city approximately 30 miles away, there are three stations. We had written them asking for aid with publicity. One of the two stations that agreed to participate had suggested televising a program about the clinic as a public service. Since there was not time to prepare such a program before the first clinic, we decided to put on the program 2 weeks before the second. The presentation consisted of a question-and-answer panel discussion with a moderator and four other participants. A physician spoke about his experience with the poliomyelitis epidemic in Appleton in 1955, an occupational therapist discussed how her services could be used by a patient with poliomyelitis, the director of our vaccine clinics represented the county medical society auxiliary, and a physician discussed the present and future status of poliomyelitis control.

The program was shown on Sunday evening,

prime television time. It had been taped 1 week earlier. A rehearsal held before the taping helped reduce the nervousness of participants who had never been on TV before. A letter was written to all churches and schools asking that one person from each help publicize the vaccine program. All denominations complied with our requests to remind their congregations of the clinics.

On the Sunday of the second clinic, at which Sabin oral vaccine types II and III were administered, the weather cooperated better than on the day of the first clinic. Volunteers were asked to report to work by 9:45 a.m. and be ready to start at 10 o'clock. The crowds were already there by 10. The early start eliminated some of the problems encountered in the first clinic in handling the great numbers waiting at the door.

From the first to the second clinic there was a rise in number of participants, rather than the drop that sometimes occurs in such programs. Approximately 90,000 persons, 85 percent of the county population, received types II and III, as compared with 84,000 receiving type I. Records were not kept on the number or percent of the population receiving all three types.

A community had united to make a health program succeed. Its residents actively participated, both in receiving oral vaccine and as volunteers manning clinics. Some 500 persons worked during the 8-week campaign. Radio and television time, newspaper space, other publicity, and supplies, such as sugar cubes, freezers to store vaccine, and coffee and rolls for clinic volunteers, were donated. Publicity expenditures amounted to \$2,500.

#### Summary

After the Outagamie County (Wis.) Medical Society had approved holding countywide oral polio vaccine clinics during 1964, a plan of implementation was necessary. It was decided that the county's medical auxiliary would handle local arrangements for the clinics and the health department of Appleton, the county seat, would be responsible for publicity. Volunteers aided in all phases of the program. Some 500 county residents worked on the 8-week campaign.

The publicity committee told the story about the oral vaccine clinics through posters and banners, displays in store windows, daily radio and newspaper spots, television panels, and information pamphlets.

Community teamwork resulted in 84 percent of the population's receiving Sabin oral type I and 90 percent receiving types II and III on the two Sundays that the clinics were conducted. Makeup clinics for type I increased the percentage receiving that type to 88 percent.

### **Computer for Bacteria Identification**

A television-computer combination is being constructed at the University of California, Berkeley, as part of a 5-year program for identifying bacteria and other micro-organisms and studying their hereditary characteristics.

The purpose of the study is to determine what minerals, vitamins, and foods the micro-organisms need to survive; what drugs, poisons, and other agents they are able to resist; and of their behavior at high and low temperatures, under various lighting conditions and under exposure to a variety of environments.

The equipment will also be used in an experimental diagnostic system. The investigators hope to enable a research laboratory or hospital to incubate a specimen for only 12 to 18 hours, instead of the usual 48 hours, before identifying and counting bacteria. Thus infectious diseases could be identified at a significantly earlier stage.

A Public Health Service grant of \$629,038 was awarded for the first year of the program. The total cost is an estimated \$1,239,910.