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Abstract

Venereal disease was a major contributor to lost man days in World War I so the government attempted to implement an educational campaign beginning in 1918. After a loss of funding, venereal disease became unattended until 1936 when Thomas Parran was appointed as Surgeon General. He made prevention of venereal disease his top priority and began a new campaign, determined to make it more effective and better funded than its predecessor. The subsequent advent of World War II strengthened national interest. With the inspiration of Parran, the Public Health Service and other organizations made movies, posters, pamphlets, books, and school curriculums. Despite these efforts beginning before the war and only intensifying during the war years, venereal disease rates during World War II climbed through 1943. However, in contrast to the first campaign, Parran's attempt to end venereal diseases was better funded and longer lasting than its predecessor.

Keywords

venereal, disease, propaganda, world war II, wwii, education, sex education

Disciplines

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Comments

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The Other 'VD': The Educational Campaign to Reduce Venereal Disease Rates during World War II

Madeleine Gaiser
U.S. and World War II
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ABSTRACT: Venereal disease was a major contributor to lost man days in World War I so the government attempted to implement an educational campaign beginning in 1918. After a loss of funding, venereal disease became unattended until 1936 when Thomas Parran was appointed as Surgeon General. He made prevention of venereal disease his top priority and began a new campaign, determined to make it more effective and better funded than its predecessor. The subsequent advent of World War II strengthened national interest. With the inspiration of Parran, the Public Health Service and other organizations made movies, posters, pamphlets, books, and school curriculums. Despite these efforts beginning before the war and only intensifying during the war years, venereal disease rates during World War II climbed through 1943. However, in contrast to the first campaign, Parran's attempt to end venereal diseases was better funded and longer lasting than its predecessor.

"Wars are primarily won or lost by skills at arms, but they may also be won or lost by the success or failure of the methods to prevent and control disease"

Lieutenant General Leonard Heaton, Surgeon General 1959-1969

“Down through the ages, syphilis has continued to be man’s chief enemy of efficiency and longevity,” said Dr. George Cox. A Texas State Health officer, he was speaking at a Mother’s Day gathering in 1938.¹ At the same time, Dr. Frederick Kratz spoke to the State Medical Association of Texas on the rising rate of syphilis: “In 1935, in the nation, there were 12,000,000 cases of venereal disease, only 1,000,000 were under treatment. There are 518,000 new cases of syphilis discovered every year.”² Venereal diseases, diseases contracted through sexual contact, were on the rise in the United States. Syphilis and gonorrhea were the most common diseases.

The doctors had complementary ideas on how to slow this epidemic. Dr. Cox disliked the country’s “false standard of modesty” which made discussion and control of venereal diseases “practically impossible,”³ and Dr. Kratz agreed. He also advocated for the establishment of a state bureau which would distribute educational materials and mandate Wassermann blood tests to screen for syphilis during routine medical examinations.⁴

They might not have known it, but Surgeon General Thomas Parran had similar ideas for the nation, not just Texas. For Parran, fighting the venereal disease epidemic was more than a job, but a passion. Under his care, everyone in the United States, soldiers and civilians alike, were to be educated in an effort to combat venereal disease. Initially a measure of public health, Parran’s campaign quickly became a key part of the war effort at the dawn of World War II.

Inspiration from World War I

¹ “Syphilis Problem Topic of State Health Officers” *Galveston Daily News*, May 10, 1938. *Newspaper Archive*, accessed October 25, 2016, <http://access.newspaperarchive.com/us/texas/galveston/galveston-daily-news/1939/01-22/page-8>.

² “Pre-Convention Sessions Held by State Medical Groups as General Meeting Opens Today,” *Galveston Daily News*, May 10, 1938. *Newspaper Archive*, accessed October 25, 2016, <http://access.newspaperarchive.com/us/texas/galveston/galveston-daily-news/1938/05-10>.

³ “Syphilis Problem Topic of State Health Officers,” *Galveston Daily News*, May 10, 1938.

⁴ “Pre-Convention Sessions Held by State Medical Groups,” *Galveston Daily News*, May 10, 1938.

In 1910, roughly one out of five men accepted into the military were carriers of a venereal disease, often syphilis or gonorrhea.⁵ While it had been present in the military for decades, venereal disease was institutionally ignored by the Army until 1906 when the Wassermann reaction, the test for syphilis, was discovered.

Historically, the military provided more training to treat injuries received in the heat of battle than the treatment of disease. Disease was viewed as an inevitable part of war. However, with the recent discovery of germ theory, the medical department during World War I “sought to institute newly discovered diagnostic and therapeutic techniques.” Disease prevention and control took on a new found importance.⁶ The Surgeon General’s Office issued pocket-sized guides to medical officers titled *Venereal Diseases – Outline of their Management*, thus establishing a protocol for their treatment. “...extreme individualism on the part of the surgeon...does not necessarily lead to the best results and it greatly interferes with the teamwork which is essential in military service.”⁷ Additionally, the Army began to require that medical officers keep a syphilitic register.⁸

General John Pershing led the American Expeditionary Forces into France during the First World War. Previously, he established regulated houses of prostitution during the Spanish

⁵ Allan Brandt, *No Magic Bullet: A Social History of Venereal Disease in the United States since 1880*, (New York: Oxford University Press, 1985), 97-98.

Brandt is a professor of the History of Medicine at Harvard Medical School. He titled his book in reference to a film made in part by the Public Health Service, *Dr. Ehrlich's Magic Bullet* which is about the discovery of the drug, Salvarsan for the treatment of syphilis. His book is a social history on venereal disease in the United States since 1880 and tries to answer the question: why can't it be eradicated as other infectious diseases have? He looks at venereal disease from multiple perspectives over time.

⁶ Ibid.

⁷ *Venereal Diseases – Outline of their Management*. (Washington, D.C.: United States Surgeon General's Office, 1918), 7. University of Virginia Special Collections.

⁸ Ibid., 11.

American War and thus made it his personal mission to lead the only venereal disease-free American troops for World War I.⁹

Paris had regulated prostitution, with registered prostitutes undergoing medical inspections, which were inadequate. Additionally, even though Paris officials regulated and inspected the women of 40 different houses and 5,000 independent, professional prostitutes, there were still 70,000 clandestine women, unregistered, roaming the streets. The system gave American soldiers a false sense of public health and safety.¹⁰ Upon his troops landing in France, Pershing issued General Order No. 6 on July 7, 1917. A soldier with venereal disease “renders himself inefficient as a soldier...He fails his duty to his country and his comrades.” Semi-monthly inspections, educational lectures, and prophylaxis after sex are all required. Those who were diagnosed with venereal disease could be subject to court martial.¹¹

The order had its flaws. The line at the prophylaxis station was longer than that of the houses of prostitution. No ban was put on having sex with prostitutes, as France had regulated prostitution so they were all supposedly clean, yet soldiers kept contracting diseases. Dr. Hugh Young, an ardent critic of regulated prostitution, believed that the women became “septic tanks” by having sex with men in close succession without washing themselves.¹² Additionally, threatening to subject infected soldiers to court martial would not encourage them to seek treatment or report their condition to a medical officer. Thus, it would be near impossible to decrease the number of infected soldiers if none are cured.

⁹ Brandt, *No Magic Bullet*, 99.

¹⁰ *Ibid.*, 100.

¹¹ *Ibid.*, 102.

¹² Brandt, *No Magic Bullet*, 99, 102-103.

Prophylaxis was a set of preventative measures taken after sexual contact with an infected person to mitigate risk of contracting a disease. But it was flawed. To be most effective, it had to be administered within three hours of intercourse. The Medical Department claimed that, when used properly, prophylaxis was 99.6% effective, but there were problems. Often the soldiers did not administer the treatment properly. Many did it after the three hour time frame, sometimes drunk. Additionally, the prophylactic stations were not ideal. Most were hard to find and unsanitary, staffed by unpleasant attendants. When soldiers went on leave, there were no prophylaxis stations waiting for them. Dr. Young discovered that venereal disease rates increased during time of leave. To solve this problem, prophylactic stations were put on trains, but soldiers had often passed the three hour golden window before boarding.¹³

Regardless of effectiveness, self-treatment with prophylaxis was unpleasant. After washing, the soldier had to “apply two handfuls of biochloride of mercury to his entire genital area.” Next, he injected a disinfectant into his urethra and “held it there for five minutes.” To complete the process, mercurial ointment was to cover the entire genital area. One soldier reported almost fainting during his first treatment.¹⁴

Overall, during World War I, there were 415,000 cases of venereal disease. According to Dr. Joseph Moore, that is equivalent to 7,500,000 lost man days over 19 months or 21,000 soldiers being absent from duty over an entire year.¹⁵ The horrible venereal disease situation overseas inspired an anti-venereal campaign at home but it was short-lived. Only active in the

¹³ Ibid., 109-111.

¹⁴ Mary Louise Roberts, *What Soldiers Do: Sex and the American GI in World War II France* (Chicago: University of Chicago Press, 2013), 168. Roberts is a professor of history at the University of Wisconsin and has authored other works regarded sex in France. This book details the sexual atmosphere in World War II France, outlining the power struggle that developed between French men and American soldiers.

¹⁵ Statement by Joseph Earle Moore. Joint Army and Navy Committee, Conference of Morale Officers, Washington, D.C. February 25-28, 1941; Classified List of Social Hygiene Pamphlets – February 1944, Publications A-D, Records of the Office of Community War Services, Record Group 215, National Archives Building, College Park, MD.

war for twenty-two months, “the government barely had time to develop and implement sex education programs for soldiers, sailors, and prostitutes before the war was over.”¹⁶ As such, it is hardly a surprise that the campaign against venereal disease diminished only five years after its commencing in 1918. A lack of federal funds halted state sex education programs and films established by the Public Health Service were outdated. By the end of the 1920s, state health officials had lost their jobs.¹⁷ Just over ten years later, the United States would be engaged in yet another global conflict.

In 1941, the rate of venereal disease was forty out of every one thousand in the Army, eighty in the Navy. The rates only increased as new recruits join the forces. Dr. Joseph Moore of Johns Hopkins University and the Subcommittee on Venereal Disease at the National Research Council believed that if the current peacetime venereal disease rates continued, “the services must be prepared to deal with approximately 88,000 cases of venereal disease each year.”¹⁸ A repeat of the infection rate and absenteeism during World War I seemed inevitable.

As predicted by Dr. Moore, venereal disease was a major problem in World War II. For the duration of the war, the average rate of venereal disease was 37 per 1000 soldiers. By 1945, over two hundred thousand individuals had been treated for venereal disease at barrack hospitals stateside, not including those treated overseas.¹⁹ Unfortunately, the rates of disease only began to

¹⁶Alexandra Lord, *Condom Nation: The U.S. Government's Sex Education Campaign from World War I to the Internet*, (Baltimore: Johns Hopkins University Press, 2010), 30.

Lord previously worked as a historian for the Public Health Service. Her book covers sex education in America from World War I through present day. It covers one pertinent element of this paper but in great detail.

¹⁷ Lord, *Condom Nation*, 49.

¹⁸ Statement by Joseph Earle Moore, National Archives, College Park, MD.

¹⁹ Brandt, *No Magic Bullet*, 170.

improve at the war's end. This development is most likely because of the discovery of Penicillin for the treatment of venereal disease. The military first started using the drug in 1944.²⁰

Searching for solutions, Dr. Moore and many military officials blamed the prostitution industry and sought to repress it. The recommendation by Dr. Moore was that local officials would control prostitution in their jurisdictions and that service clubs on military bases would staff particular women to which the soldiers could have access.²¹ In 1942, the Secretary of War, Henry Stimson, sent a letter to state officials, reminding them of “the dangers prostitution and venereal disease presented to the war effort unless prompt and effective suppressive measures were enforced”²² Anti-prostitution measures were also put in place overseas. In France, the Supreme Headquarters Allied Expeditionary Forces (SHAEF) banned soldiers from visiting brothels. Yet, upon the Americans' arrival in France, rates of infection rose rapidly.²³ A repeat of World War I disease rates seemed likely.

Unlike World War I, the educational measures of the Second World War were long lasting and broad. The campaign against venereal disease began in 1936, before the United States entered the war, and was continued into the post-war years.²⁴ Unfortunately, despite the unwavering dedication of public health workers like Parran and the countless resources used to educate both civilians and soldiers, the venereal disease rates during World War II did not reflect the nation's efforts.

²⁰ Ibid.,161.

²¹ Statement by Joseph Earle Moore, National Archives, College Park, MD.

²² Leonard Heaton et al., *Preventative Medicine in World War II*, Vol. 5 (Washington, D.C.: Office of the Surgeon General, 1960), University of Virginia Health Sciences Library Historical Collections, 173.

Preventative Medicine is an interesting source because it is written by 27 contributing authors who all had medico-military experience during the war. So while the source is secondary because it has the benefit of hindsight, all the authors are ‘primary.’ The 16 volumes are dedicated to World War II and the fifth volume in particular is dedicated to communicable diseases, like venereal diseases.

²³ Roberts, *What Soldiers Do*, 167. This point will be expanded upon in the final draft.

²⁴ Lord, *Condom Nation*.

* * *

The efforts to suppress venereal disease in World War II are largely to the credit of life-long public health servant, Thomas Parran. A native of Maryland, he received his medical degree from Georgetown University in 1915 and began his career with the Public Health Service just two years later. In 1926 Surgeon General H.S. Cumming appointed him chief of the Venereal Disease Division of the Public Health Service (PHS). However, with the onset of the Great Depression and a lack of federal funding, Parran was among those who left the PHS in the interwar years and instead served as the Commissioner of Health for the state of New York under Governor Franklin D. Roosevelt in 1930. As Roosevelt took office as president in 1933, Parran expressed his pessimism “about the future of worthwhile government activities of all types.” Venereal disease was not on the mind of American public or its government.²⁵

Knowing Parran’s passion for and knowledge of venereal disease, President Roosevelt appointed him Surgeon General in 1936, in hopes of finally eradicating, or at least alleviating, the epidemic. Parran, too, had high hopes, now finally having the power to prioritize venereal disease in American consciousness and turn it into a national issue.²⁶

Venereal disease did indeed become a national issue. In December 1936, shortly after Parran’s appointment, the National Venereal Disease Conference met in Washington, D.C. Leaders in medicine, public health, business, and civic organizations gathered to plan how venereal disease would be attacked. One of the top priorities was to gain Congressional approval and the funds to sustain the program long-term.²⁷ This was to avoid the failure of venereal disease control evident after World War I. The hard part was convincing state and local

²⁵ Brandt, *No Magic Bullet*, 125-126; Lord, *Condom Nation*, 50.

²⁶ Lord, *Condom Nation*, 51.

²⁷ Thomas Parran and Raymond Vonderlehr, *Plain Words About Venereal Disease* (Cornwell: Cornwell Press, 1941), 10.

governments to appropriate the money needed to match the federal funding. State health officers believed that the money needed to end venereal disease was equivalent to what was spent to “exterminate tuberculosis in cattle” per state. In dairy states between 1929 and 1939, this figure was \$143,000,000. The battle against disease was to be fought state-by-state.²⁸

Concerned that the country’s priorities were not lined up with his own, Parran said,

The good work begun in national control will be canceled, the declining attack rate of syphilis will be swiftly reversed, unless to our concern with munitions and maneuvers and equipment we add specific attention to the protection of our men in the armed forces and in the factories which supply them.²⁹

Parran wanted venereal disease to receive the same attention and funding as the essential elements of fighting a war. The movement against venereal disease received Congressional backing, and therefore funding, in 1938. Parran credits this success, in part, to citizens who encouraged their local leaders and legislators to back the campaign. The campaign also directly benefited citizens by giving more young men and women an education and medical training.³⁰

With the Assistant Surgeon General, Raymond Vonderlehr, Parran published *Plain Words on Venereal Disease* in 1941. Here, Parran and Vonderlehr criticized the actions, or lack thereof, taken by military personnel in the prevention of venereal disease. He also took aim at Congress for financially impeding the fight against venereal disease after World War I.

The most ambitious attack against these two diseases [syphilis and gonorrhea] came with World War I. It was handicapped by the passionate surge ‘back to normalcy.’ Congress assumed that the spirochete had stayed in the trenches and stopped appropriations for the control program.³¹

Parran admonished Congress about being more concerned about post-war “normalcy” rather than finishing what was started. He accused Congress of being naïve in that it assumed that the

²⁸ Ibid., 11, 14.

²⁹ Ibid., 18.

³⁰ Ibid., 20-21.

³¹ Ibid., 7. The spirochete is the germ which causes syphilis.

bacteria responsible for syphilis, the spirochete, remained in the trenches after World War I, and therefore cut funding to disease prevention.

Parran's Catholicism, which played a role in his work, as will be seen later, is also brought out in this book. Parran compares a good priest to a "good fighter against venereal disease." He says that both have a "passion for salvation" and are "as opportunistic as Paul of Tarsus," referring the Apostle Paul of the Bible. Both the priest and the syphilis fighter understand that deathbed conversation is pointless, advocating for early action in the treatment of venereal disease just like a priest would rather convert a man before his death. Most importantly, Parran says, they know the importance of their work.³²

Educate

The PHS and the American Social Hygiene Association (ASHA) did not implement much educationally in terms of 'boots on the ground.' Rather, state and local governments were encouraged to devise and carry out their own educational measures, with materials produced by the PHS and ASHA available upon request for a price.

While pamphlets and books were the most common materials, films and posters were also disseminated. School curriculums were developed to help teachers incorporate sex and venereal disease education into everyday lessons in English or Social Studies. There were two common messages conveyed: that venereal disease was detrimental to the community and, more importantly, the war effort; and the technicalities of the diseases, such as prevention, symptoms, and treatment. However, each medium - printed, filmed, or taught – imparted these ideas in a different way.

³² Parran and Vonderlehr, *Plain Words about Venereal Disease*, 19.

Pamphlets and booklets were a frequently used method of educating the public. They were cheap, often only costing 10 cents to be purchased by the public, and could be mailed en masse to schools and communities for distribution. Some publications placed a heavier emphasis on the medical facts of the diseases rather than emphasizing prevention. *Current Information on Syphilis*, published in 1942 by Committee for Syphilis Control of the Medical Society of Virginia, was focused on the medical aspects of syphilis. Much of the booklet is dedicated to symptoms and the details of treatment. Treatment, it says, “gives protection to others by preventing infectious relapses,” emphasizing that venereal diseases are contagious and a danger to public health.³³ In keeping with the national state of affairs, *Current Information* incites the war effort through militant language, saying that Americans need to “vigorously combat” syphilis.³⁴

Facts About Syphilis, Gonorrhea, and other Venereal Diseases also had a medical focus. Especially regarding syphilis, it reminds the reader that “a good physician always insists upon...a blood test.”³⁵ To discourage negligence, the reader is reminded that even though syphilis is a venereal disease,” it still a serious communicable disease which is “to be dealt with as any other dangerous communicable disease.”³⁶

A great advantage to small publications was that they could be customized for their audience while still being inexpensive to produce. It is more practical to make dozens of pamphlets to suit different audiences than to produce dozens of films. The targeted audiences were soldiers and women.

³³ *Current Information on Syphilis* (Richmond: Medical Society of Virginia, 1942), 1, University of Virginia Special Collections.

³⁴ *Ibid.*, 5.

³⁵ *Facts about Syphilis, Gonorrhea, and other Venereal Diseases* (Richmond: Virginia State Department of Public Health), 4, University of Virginia Special Collections.

³⁶ *Ibid.*, 6. This was an allusion to tuberculosis and other common communicable diseases.

The target audience for *The Facts of Life* was soldiers, specifically new recruits. Written and illustrated in a way reminiscent of a children's book, this booklet tells the story of a new recruit, Willie Getit. Young and naïve, Willie was uneducated on the facts of life but had a "sixth sense" which kept him safe as Private Curr pushed Willie to meet women. In the end, Willie was teased for following his instincts by visiting a prophylaxis station or "pro station" for treatment after sex. But Willie came out ahead as Pvt. Curr, who did not exercise caution, contracted a disease. The end sheet tells the moral of the story: "If you can't say no, take a pro!"³⁷

Also aimed at soldiers is a pamphlet titled *You Don't Think*, telling the story of a soldier who felt that he was invincible in the face of venereal disease. He thought that he was "too smart at sizing up a gal" and could "tell at a glance if she had it or not." Unfortunately, the soldier was wrong and wrecked "a lot of plans," alluding to marriage with an image of a bride accompanying the text. However, since this was published by the War Department, the concern is concentrated on how venereal disease affected America's plans to win the war. "Your Army's plans: venereal disease can put a man off the team."³⁸ Like other pamphlets, advice is given to the reader on prevention and treatment. Use a rubber, take necessary precautions, and always carry a pro-kit (prophylaxis kit). However, this one is unique because it includes a moral element (and even lists it first): "Live by the moral and religious laws that have been taught to you."³⁹ Both these booklets aimed at soldiers emphasized the importance of prevention over the treatment of venereal disease. It is easier to prevent diseases than to treat them, especially those contracted through illicit sex.

³⁷ *The Facts of Life*. Classified List of Social Hygiene Pamphlets – February 1944, Publications A-D, Records of the Office of Community War Services, Record Group 215, National Archives Building, College Park, MD.

In the middle of the book, there an "Intermission." The page reads, in all-caps, red lettering, "INTERMISSION! BUY WAR BONDS!" War stamps and bonds were sold by the government so the American people would fund the war effort.

³⁸ *You Don't Think*, War Department n.d. University of Virginia Special Collections.

³⁹ Ibid.

Women had anti-venereal disease publications aimed at them as well; however, it was not quite as common. One pamphlet was titled *Calling All Women*, published by the American Social Hygiene Association in 1941. Like other publications of the era, the pamphlet quickly made it clear that the reader should avoid venereal diseases as a matter of duty during war time. “Women need to be in good health to be happy and successful in their life at home and at work. Especially today, women need strength to meet the added cares of national defense.”⁴⁰ For women, while prevention was important, pamphlets often pushed the duty argument: that a woman could not perform her motherly, wifely, or community responsibilities if she is sick.

The booklet, *The Enemy Always Leaves His Mark*, is unique because two versions were published – one for men, the other for women. In the drafts written by Margaret Craighill, she specified which pages were to appear in all publications and which pages were to be added to versions aimed at women. While the general book emphasized that “If you [were] foolish enough to expose yourself” to venereal disease, you should visit a prophylaxis station, the added sections for women advised against such actions. Instead, Craighill informs her female reader that there is no safe method of prophylaxis for women, as it often causes severe, irreversible damage to the organs and tissues.⁴¹

Another way to educate people was through films. Parran and Vonderlehr, the spent a lot of time and money on producing films to educate civilians and soldiers on venereal diseases. The

⁴⁰ *Calling All Women*, American Social Hygiene Association Margaret Craighill Collection Box 13, Folder 1, United States Army Education and Heritage Center, Carlisle, Pennsylvania. (hereafter USAHEC)

⁴¹ “The Enemy Always Leaves His Mark” drafts. Margaret Craighill Collection Box 13, Folder 12, USAHEC. Margaret Craighill was the first commissioned woman officer in the United States Army Medical Corps. Given the rank of Major, Craighill was assigned as the Women’s Consultant to the Surgeon General of the Army. She received her medical education at Johns Hopkins School of Medicine and was the Dean of the Women’s Medical College of Pennsylvania before requesting leave in 1943 to join the military. During her time in the Medical Corps, Maj. Craighill worked to extend venereal disease training and education to the women enlisted in the Women’s Army Auxiliary Corps (WAAC), writing pamphlets, tracking disease rates among WAAC women, and even wrote a film script in collaboration with the American Social Hygiene Association. See the Finding aid for the Margaret Craighill Collection at the USAHEC.

PHS partnered with other organizations such as the ASHA, the United States Department of Agriculture (USDA), and the American Medical Association.⁴² *Three Counties Against Syphilis* was one of these films. Produced in 1938 in cooperation with the United States Department of Agriculture (USDA), *Three Counties* advocated for the curability of the disease. The film follows a syphilis control program implemented in rural Georgia in 1937. The program being demonstrated was a fleet of mobile PHS clinics, led by Leroy Burney of the PHS.⁴³ In one week, the film claims, the mobile clinic saw over 500 patients for a variety of reasons. The clinics did not just test for and treat venereal diseases but also provides immunizations and drew blood to test for other illnesses. The counties visited were predominantly black hence the emphasis on the importance of church in black culture. The arrival of the clinic is “Next to church, the biggest event of the week.” Blacks are only pictured in labor jobs and the literature distributed is described as “simply written...so that the illness can be fully understood”⁴⁴

Know for Sure, made by the Academy of Motion Picture Arts and Sciences at the request of the War Department, was a documentary focused on sexual hygiene. Its target audience was male defense workers in factories and plants. In the film, a man learns that his son was stillborn because of congenital syphilis. After attempting suicide, the man talks to the doctor about how he could have prevented contracting syphilis and what the symptoms are.⁴⁵ This film and *Three*

⁴² John Parascandola, “Syphilis at the Cinema: Medicine and Morales in VD Films of the U.S. Public Health Service in World War II” Leslie Reagan, Nancy Tomes, Paul Treichler, *Medicine’s Moving Pictures: Medicine, Health and Bodies in American Film and Television* (Rochester: University of Rochester Press, 2007).

Parascandola area of expertise is venereal disease during World War II. He also wrote an article on the rapid treatment centers establish to treat infected women titled “Quarantining Women: Venereal Disease Rapid Treatment Centers in World War II America.”

⁴³ Parascandola, “Syphilis at the Cinema,” 75.

⁴⁴ *Three Counties Against Syphilis* directed by Philip Broughton (United States Public Health Service, United States Department of Agriculture, 1938). *NIH National Library of Medicine Digital Collections* accessed December 11, 2016 <http://resource.nlm.nih.gov/101216493>.

⁴⁵ Parascandola, “Syphilis at the Cinema,” 76-77.

Counties Against Syphilis use plotlines to convey medical facts to the viewer to make them more digestible. This strategy is also seen in pamphlets like *The Facts of Life*.

In contrast, *Fight Syphilis*, a PHS film produced in 1942, was heavier on facts than plot, teaching viewers what they could do to stop the spread of the disease. This film was also adapted into a short version to be more targeted at individuals.⁴⁶ *Fight Syphilis* begins by showing a veteran who is physically disabled because of syphilis. The viewer is then taken into the lab and the process of diagnosis through blood tests is explained. Emphatic language is used as the narrator reminds us that only half the battle is fought the laboratory; the other half is fought in schools and colleges, mills and plants.⁴⁷

A surprising amount of controversy surrounded the making of these films. The debate was morals versus medicine. Parran, a devout Catholic, was attacked by the Legion of Decency, a Catholic organization after the release of *To the People of the United States* in 1944 by the PHS. *To the People* is about a disappointed syphilitic bomber pilot. The Army doctor tells him to be more open about the disease so he can get proper treatment and be cured. The film opens and closes with statements from Parran, who believed the film would be “extremely valuable for an intensified national program of public education and information.” However, the Legion of Decency felt there was a lack of emphasis on morals and asked the PHS to not sponsor the film. Knowing the political power of the Catholic population in the United States, Parran changed his closing statement to something more morals-based. “It is important to remember that the only sure way for the individual to avoid infection is to avoid exposure.”⁴⁸

⁴⁶ Ibid., 80.

⁴⁷ *Fight Syphilis* directed by Owen Murphy (United States Public Health Service, 1942). *NIH National Library of Medicine Digital Collections* accessed December 11, 2016, <http://resource.nlm.nih.gov/8700182A>.

⁴⁸ Parascandola, “Syphilis at the Cinema,” 82-84.

This concession compromised Parran's views on venereal disease and how it should be handled in public discourse. Despite his Catholic faith, Parran firmly believed in educating the public on medical means of prevention and the ways to treat disease when contracted. In a letter defending the educational campaign, Parran wrote, "teaching sexual morality is the foundation of the home, the church and the school,"⁴⁹ in contrast to his job of teaching the medical facts. Critics of his campaign, he said, "will have a tremendous job of their own gaining acceptance of a way of life that would prevent them [venereal disease]," taking aim at moralists who only want to teach abstinence as the primary method of disease prevention.⁵⁰ Parran is challenging his opponents to successfully spread abstinence in American culture.

Posters

Posters as a form of propaganda and spreading information were common during both world wars. The posters, similarly to the pamphlets, were targeted at different audiences but all advocated for the prevention or treatment of venereal disease. While the PHS and ASHA printed many posters, other organizations, governmental and otherwise, also got the word out.

There was a rampant problem of people going to 'quack' doctors or using home remedies to treat their syphilis or gonorrhea. These methods were useless and just instilled false confidence. So the PHS made a poster about it (Figure 1). "No home remedy or quack doctor ever cured syphilis or gonorrhea," it reads. "See your doctor or local health officer." A figure of a man comprised of newspaper headlines is pouring what is to be understood as a dose of

⁴⁹ Ibid., 85.

⁵⁰ Ibid.

‘medicine’ into a spoon. Some of the headlines read, “‘Men’s Doctor’ Racket Dopes Thousands, Slaying Reveals” or “Blood Disease Controlled with Home Treatment.”⁵¹

The Second Air Force of the Army printed its own poster regarding rising rates of venereal disease and the importance of prophylaxis (Figure 2). It shows a line graph steadily trending up until a soldier pulls the line down as it peaks. “It’s too high, Soldier! Better get it LOW! After each exposure, always take a PRO!”⁵² Since it was hard to stop the soldiers from having sex, the military relied on prophylaxis as a means of minimizing infection rates.

It is not hard to find posters containing images of women and these are often aimed at soldiers, both stateside and overseas. “Venereal Disease Covers the Earth,” is one example. “Learn to protect yourself NOW,” it says on the bottom (Figure 3). The image on the poster is simply an illustration of an attractive women with the world in the background.⁵³ On another poster, “Joint Juke Sniper,” (Figure 4) a shadowy blonde woman is smoking outside of a dancing hall; the bottom of the poster simply says “Syphilis and Gonorrhea.”⁵⁴ Yet again, “She may look clean – but” (Figure 5) depicts a young women in the foreground with a soldier, sailor, and civilian admiring her. The bottom of the poster tells men to be wary of pick-up girls and warns that “you can’t beat the Axis if you get VD.”⁵⁵ These posters reflect the blaming of women for a man contracting venereal disease. While the women may be promiscuous, it seems unlikely that

⁵¹ “No home remedy or quack doctor ever cured syphilis or gonorrhea” United States Public Health Service, n.d. *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016, <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101450677-img>.

⁵² “Venereal Disease Rates,” Second Air Force, n.d. *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016 <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101439085-img>.

⁵³ “Venereal Disease Covers the Earth. Learn to protect yourself now” 1940. *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016, <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101439085-img>.

⁵⁴ “Joint Juke Sniper” 1942. *NIH National Library of Medicine: Profiles in Science: Visual Culture and Health Posters*, accessed November 8, 2016, <https://profiles.nlm.nih.gov/ps/retrieve/ResourceMetadata/VCBBBZ>.

⁵⁵ “She may look clean – but” 1940. *NIH National Library of Medicine: Profiles in Science: Visual Culture and Health Posters*, accessed November 8, 2016, <https://profiles.nlm.nih.gov/ps/retrieve/ResourceMetadata/VCBBCF>.

the soldiers minded. One study found that 50 percent of married soldiers and 80 percent of unmarried soldiers had sex during the war. One medical officer said, “The sex act cannot be made unpopular.”⁵⁶

At the most basic, some posters just advocated for the end of the epidemic (Figure 6). “Stamp out VD,” it reads. A foot is stepping on “VD,” thus shrinking the letter V, and the bottom of the poster simply reads “Venereal Diseases.”⁵⁷

In Schools

To exploit the public interest in combating venereal disease, there was also a push for sex education in public schools. A 1936 poll reported that nine-in-one voters were in favor of “a nationwide campaign against venereal disease,” a two-point program consisting of educational programming and government clinics. 90% of respondents were in favor of “education of the public”⁵⁸

Students were an easy target for education; they were students in classrooms therefore within easy reach of local health officials. During the war, 75% of adolescents stayed in school.⁵⁹ Education about venereal disease for young people was under the guise of sex education. In 1940, the PHS published *High Schools and Sex Education*, under the guidance of Parran, but written by Benjamin Gruenberg, a special consultant to the PHS, and J. L. Kaukonen. Since teaching “repression of sex” was feared to negatively affect mental health, students were encouraged to focus those energies on other things, such as “marriage, homemaking, and carving

⁵⁶ Roberts, *What Soldiers Do*, 167.

⁵⁷ “Stamp out VD” *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016 <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101438704-img>.

⁵⁸ “Voters in Survey Favor Bold Campaign to Stamp Out Venereal Disease Scrouge” *Butte Montana Standard* December 20, 1936. *Newspaper Archive*, accessed October 25, 2016, <http://access.newspaperarchive.com/us/montana/butte/butte-montana-standard/1936/12-20/page-28?>.

⁵⁹ Lord, *Condom Nation*, 82.

a place out for himself in the adult world.” Similarly, masturbation was not taught as to be prohibited, but as something to be “outgrown.”⁶⁰

Venereal disease was a part of the high school sex education curriculum. However, teachers were encouraged to not develop “unwholesome anxieties” in students which could lead to a fear of sex. Rather, instead of inciting anxieties around sex, proper education will “base its plea for prevention on a sound footing, calling attention to all facilities of knowledge...now available to prevent infections.”⁶¹ *High Schools and Sex Education* claimed that 10 million people in the United States “have or have had” syphilis; over half of new cases discovered each year were of someone under the age of 30. A distinction was also made for ‘innocent infections.’ These are cases in which disease was acquired through “legitimate sexual contacts, as distinguished from those legally or morally proscribed.” For dramatic effect, the book makes a point to not give the numbers for the rates of infection of gonorrhea, only stating that it is more prevalent than syphilis.⁶²

In Chapter 5, “Physiology and Hygiene Course,” the book outlined that gonorrhea and syphilis should be studied as part of a lesson in bacteriology. Rather than encouraging students simply not to acquire these diseases, it is recommended that emphasis be placed on “what may be brought down upon husband, wife, and children.”⁶³ Like the poster and pamphlets aimed at adults, this curriculum invoked a sense of duty as to why one should avoid venereal disease. While the printed materials told the readers it’s their duty as a citizen during wartime, the curriculum told students to avoid venereal disease because it a duty to their futures.

⁶⁰ Benjamin C. Gruenberg and J.L. Kaukonen, *High Schools and Sex Education* (Washington, D.C.: United States Government Printing Office, 1940), 66.

⁶¹ *Ibid.*, 33, 56.

⁶² *Ibid.*, 55-56.

⁶³ *Ibid.*

This type of education evolved during the war and was not supported by just the PHS. The ASHA published *Some Dangerous Communicable Diseases: A Handbook for Students* in 1943 and its teacher-edition counterpart.⁶⁴ The books are focused on syphilis, gonorrhea, and tuberculosis. A strong emphasis was placed on the effect of venereal disease in the war. “Syphilis and gonorrhea aid the enemy,” it says.⁶⁵ “Every infected man in the armed services or in war industries loses time. In World War I, such infected soldiers lost seven million man days.”⁶⁶ Reflecting the national effort to prevent the venereal disease disaster that was World War I, the book continues, “Absenteeism helps the enemy.”⁶⁷ The primary concern of this book was not soldiers getting infected, but rather the need to maintain a large fighting force to defeat the Axis powers.

Just as important as the curriculum is how the materials are taught. The teacher’s edition, *Some Dangerous Communicable Diseases: A Manual for Teachers and Students*, opens with a section explaining the curriculum to the teachers. Venereal disease, it says, should be treated as a topic of health education, not just sex education; teachers should teach beyond the scope of the book; the included slides should be used in class before showing films such as *With These Weapons*, *Health is Victory*, or *Know for Sure*.⁶⁸

In 1944, PHS officer, Dr. Lester Kirkendall was given the task of creating a curriculum in cooperation with the Department of Education. Kirkendall knew that it was naïve to think that

⁶⁴ *Some Dangerous Communicable Diseases: A Handbook for Students* (New York: Albert H Vela Company, 1943), *Some Dangerous Communicable Diseases: A Handbook for Students*, Publications Social Hygiene News, Records of the Office of Community War Services, Record Group 215, National Archives Building, College Park, MD.

⁶⁵ *Ibid.*, 4.

⁶⁶ *Ibid.*, 20.

⁶⁷ *Ibid.*

⁶⁸ *Some Dangerous Communicable Disease: A Manual for Students and Teachers*, (New York, Albert H Vela Company, 1943), 3, 5. *Some Dangerous Communicable Diseases: A Manual for Students and Teachers*, Publications Social Hygiene News, Records of the Office of Community War Services, Record Group 215, National Archives Building, College Park, MD.

young people are ignorant about sex. Backed by PHS studies, he believed that a strong push for prophylaxis would simply encourage students to experiment sexually. For this reason, Kirkendall did not want to teach young people about condoms, instead emphasizing “human relations,” “family life,” and sexual morality.⁶⁹ In a word, Dr. Kirkendall wanted an abstinence-based curriculum. But Kirkendall was an outlier only in the PHS, not in society. American society loosened its sexual expectations in the 1920s and 1930s and became more accepting of sex before marriage. However many wanted to tighten moral codes again. The public felt that promoting protective measures such as condoms and prophylaxis was condoning sexual behaviors.⁷⁰ This was reflected in *High Schools and Sex Education*, as mentioned earlier. The book emphasized discouraging young people from having sex and instead being moral, family-oriented citizens which is exactly what Kirkendall advocated four years later.

To supplement the curriculums, the PHS sent its officers to schools and communities to give lectures. Robert Anderson spent time in Forrest City, Mississippi “to direct an educational program relative to venereal disease control.”⁷¹ On November 29, 1944, Anderson spoke to sociology and science classes at Mississippi Southern College. Rather than talking about measures students can take to keep themselves healthy, Anderson implored his crowd of the power they have as young people. “Every boy and girl in America can help reduce the annual death rate of 100,000 from syphilis alone by manifesting a willingness to talk about the disease,” he said. He also advocated that students start advocacy groups to spread awareness and educate

⁶⁹ Lord, *Condom Nation*, 82-83.

⁷⁰ Brandt, *No Magic Bullet*, 159.

⁷¹ “College Classes Hear Venereal Disease Lecture,” *Hattiesburg American*, November 29, 1944, 10. *Newspaper Archive*, accessed November 2, 2016 <http://access.newspaperarchive.com/us/mississippi/hattiesburg/hattiesburg-american/1944/11-29/page-8?>

the public. To ensure they stay clean, Anderson recommended that students get semi-annual blood tests to check for infection.⁷²

Blamed

While the resources to educate the public were spread far and wide, they were not spread evenly. The group that suffered the most was the African-American community. The resources made for the general public were seen unfit for them because of the level of intellect needed. “[The] negro can be taught, slowly, about the facts about syphilis,” some believed. Even films, the most expensive and time-consuming educational tool, were under consideration to be remade to accommodate for the supposed low level of intelligence of black people: “Movies are not simple and plain enough for them to understand,” but would more understandable if they were “in their own language.” But the bias went further. Some in the PHS, such as Leroy Burney who created the mobile PHS clinics, thought that African-Americans held themselves to a lower “moral code,” and were especially “promiscuous”⁷³ With a perspective like that, it is understandable that the PHS was reluctant to send resources to their neighborhoods.

This bias and subsequent lack of resources contributed to African-Americans having higher rates of venereal disease than whites. At the peak, 152 per 1000 African-American soldiers were infected in August 1943 alone.⁷⁴

With no advocate, the African American population took venereal disease prevention education into their own hands. In 1941, inspired by General Parran and the war, the theme of

⁷² Ibid.

⁷³ Parascandola, “Syphilis at the Cinema”, 75.

⁷⁴ Heaton et al., *Preventative Medicine*, 189.

Negro Health Week was “Personal Hygiene and First Aid Preparedness.”⁷⁵ Spanning March 30 through April 5, each day had a different focus, with events planned in communities. In Aiken, South Carolina, the schedule included “Make Ready for the Service” to kick-off the week, and “Community Sanitation” a couple days later.⁷⁶ In 1943, the African American community in Pensacola, Florida established the Negro Wartime Health Committee. Their educational efforts were very successful – more successful than that of the white community. In fact, the Negro Wartime Health Committee so upstaged the white community in venereal disease prevention and education, that a local friendly rivalry developed between the two groups. Unfortunately, the African-American groups were not given credit where due – officials often credited outside institutional or official pressures for the black population taking an interest in social hygiene.⁷⁷

Regardless of the African-American community’s willingness to learn about venereal diseases and be treated, white officials still regarded them as a threat to public health. While the rates of disease in those communities were indeed higher, the blame could not just be placed on black people. In Jim Crow America, the black population had limited access to adequate medical care or education, or even a well-paying job to pay for these basics needs.⁷⁸ The circumstances were not conducive for black communities to have average rates of disease. The military also ignored circumstantial reasons for black soldiers to have higher disease rates. On base, much of the wholesome entertainment arranged for soldiers to keep them out of brothels was segregated, especially in the South. Only after pressure from the NAACP did the USO open clubs for black

⁷⁵ Marilyn Hegarty, *Victory Girls, Khaki-Wackies, and Patriotutes: The Regulation of Female Sexuality during World War II* (New York: New York University Press, 2008), 82.

⁷⁶ “Colored Farm Agent News” *Aiken Standard and Review*, March 28, 1941. *Newspaper Archive*, accessed December 1, 2016 access.newspaperarchive.com/us/south-carolina/aiken/aiken-standard-and-review/1941/03-28/page-7?

⁷⁷ Hegarty, *Victory Girls*, 82.

⁷⁸ Claire Strom, “Controlling Venereal Disease in Orlando during World War II,” *The Florida Historical Quarterly*, 91, no. 1 (2012), 89. *JStor*, accessed December 2, 2016 www.jstor.org/stable/23264824.

personnel.⁷⁹ While on tour in Italy, black troops continued to have higher rates of venereal and disease and were frequently accused of rape. Despite circumstantial reasons for these occurrences, such as less troop movement in the black divisions which leads to more contact with local civilians, officers blamed the high rates of disease and rape on their race. One officer said that black soldiers “simply incline toward more serious crimes.”⁸⁰

In 1941, Congress passed the May Act. This law gave local officials the power to arrest prostitutes or suspected promiscuous women in the vicinity of military bases and close nearby brothels.⁸¹ Orange County, Florida, where Orlando is located, tracked the race, age, and gender of arrests through the May Act made between 1942 and 1948. The first and last years of the program saw predominantly white arrests while 1943-1947 had majority black arrests. The peak came in 1945 when 68 blacks were arrested compared to only 15 whites.⁸²

Following these arrests, if infected, many women experienced control through quarantine rather than education. Quarantine facilities were built around military bases, beginning in 1939 in Leesville, Louisiana outside Camp Polk. Four years later, there were over 20 operating facilities across the United States. The facilities were referred to as “rapid treatment centers” because their purpose was to quickly treat prostitutes. Raymond Vonderlehr made this clear in a letter in 1942, that the facilities are “detention centers to provide treatment for prostitutes infected with venereal disease”⁸³ Prostitutes and other promiscuous women needed these facilities, Parran believed, because they could not be trusted to go through with the long-term

⁷⁹ Strom, “Controlling Venereal Disease”, 95, 115.

⁸⁰ Roberts, *What Soldiers Do*, 204.

⁸¹ Strom, “Controlling Venereal Disease”, 94-95.

⁸² Strom, “Controlling Venereal Disease”, 106.

⁸³ John Parascandola, “Quarantining Women: Venereal Disease Rapid Treatment Centers in World War II America” *Bulletin of the History of Medicine* Vol 83, 3 (2009), 434. *Project Muse*, accessed October 2, 2016. <http://muse.jhu.edu/article/317223>

treatment generally required for syphilis and gonorrhea. The PHS was seeking to control women to protect the servicemen from the risk of venereal disease,⁸⁴ getting to the treatment centers via arrests made with the May Act.

Women who served were not allotted the resources they deserved during the war. The women of the Women's Auxiliary Army Corps (WAAC) were not given the venereal disease education and training that was mandatory for male soldiers. The matter was discussed at a meeting of the Subcommittee on Venereal Disease of the National Research Council on July 24, 1942.⁸⁵ While the meeting was positive – in favor of educating women officers with the same standards used for men – the fact is that educating women was an afterthought.

Rather than educating women about the dangers of venereal disease, men were educated about the dangers of women. In a book titled, *Instructions for Servicemen in France During World War II*, there is a section titled, "Security and Health," outlining the risks of French women. The section explains how France's attempt to regulate prostitutes, by issuing them official cards, was not successful and that no prostitute, with or without a card, should be trusted. Sex with a prostitute can "leave you with a nasty souvenir of Paris to take back home," it warned. Ironically, the following section is titled "Mademoiselle," teaching the soldier how to court her.⁸⁶ A man acquiring venereal disease was not at fault, but the fault lay with the woman. Before the war, it was believed that adolescent girls were in need of protection because "her emotions overruled her judgement."⁸⁷ Once the war began, these women were now viewed as a

⁸⁴ Parascandola, "Quarantining Women", 44-443.

⁸⁵ "Minutes of the Sixteenth Meeting of the Subcommittee Venereal Diseases – National Research Council July 24, 1942. Margaret Craighill Collection, Box 13 Folder 5, USAHEC.

⁸⁶ U.S. War and Navy Departments, *Instructions for American Servicemen in France During World War II* (Washington, D.C.), 17. EBSCO, accessed December 1, 2016. http://ezpro.cc.gettysburg.edu:2048/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=e000xna&AN=298514&site=eds-live&ebv=EB&ppid=pp_16

⁸⁷ Hegarty, *Victory Girls*, 68 quoting Howard Woolston's *Prostitution in the United States*.

danger to the troops. Officials thought they were “aggressively sexual” and thus needed “new measures of control.”⁸⁸ In contrast, men who had extramarital relations while separated from their wives were not considered promiscuous, only if they maintained multiple partners.⁸⁹ A man who infected his wife was blamed but, since he was not expected to exercise sexual self-control, society did not blame him harshly.⁹⁰

Success?

Parran’s campaign apparently did not fully please everyone. Harry Truman, who took office as president after Roosevelt’s death in April of 1945, sought a new Surgeon General and forced Parran into retirement in 1948. Dr. Paul de Kruif of Holland, Michigan wrote a letter to the editor on the subject to the *New York Herald Tribune*. Dr. De Kruif listed the high points of Parran’s legacy, such as the establishment of the National Institutes of Health in Maryland, and thus called for a Congressional investigation of Parran’s dismissal. The official reason for Parran’s dismissal is “fantastic,” Dr. de Kruif said ironically. “...appointment of Dr. Parran for another four-year term would make his tenure (it would be 16 years) too long.” However there is precedent for a surgeon general to serve a 19 year term.⁹¹ In a press conference in February, Oscar Ewing of the Federal Security Administration, cited that length of term and current world affairs were factors in Parran’s dismissal. “If you don’t rotate it [the position of surgeon general], you, to a certain extent, kill the ambition,” he said. The national and international state of affairs in 1940 and 1944, years in which Parran could have been dismissed, were not ideal for change. Another factor, Ewing said, was morale, suggesting it was necessary “to balance the

⁸⁸ Ibid., 68.

⁸⁹ Ibid., 75.

⁹⁰ Strom, “Controlling Venereal Disease in Orlando”, 88.

⁹¹ Paul de Kruif, “Fighter Against Death: Retirement of Dr. Parran” *Rhineland Daily News*, March 8, 1948. *Newspaper Archive*, accessed December 10, 2016. access.newspaperarchive.com/us/wisconsin/rhineland/rhineland-daily-news/1948/03-08/page-12.

consideration of morale as against the factor of keeping on a wonderful man”⁹² Meanwhile, Raymond Moley of the *Los Angeles Times* believed that Truman appointed a new surgeon general to appease Republican congressmen “who believe that Dr. Parran has permitted his bureaucracy to advocate too actively the principle of socialized medicine.”⁹³

It is hard to tell whether Parran’s dismissal had any connection to his venereal disease campaign. Death rates due to venereal disease dropped between 1938 and 1946 from 16 to 10 per 100,000 and infant death rates dropped by half.⁹⁴ But in some circles, Parran’s educational measures were not enough. “The army fought a fairly successful battle against V.D. in World War II through the use of literature, pictures, movies and lectures,” wrote Robert Johnson of the *Waterloo Daily Courier of Iowa* in August 1949. But, he continues, “similar action should be taken on a large scale civilian-wise.” Despite the want for more civilian education, according to Johnson’s article, Iowa and his city of Waterloo are very active in the fight against venereal disease. The state of Iowa designated the first two weeks of August for venereal disease awareness and their local clinic has been active and growing since 1926.⁹⁵ While Waterloo, Iowa might have been underwhelmed with the educational campaign, Parran’s efforts overall did benefit the community.

⁹² “Parran Removal, Job Nature Linked: Ewing says public health post should be rotated – lauds Surgeon general’s work” *New York Times* February 14, 1948. *ProQuest Historical Newspapers* accessed December 10, 2016 <http://ezpro.cc.gettysburg.edu:2048/login?url=http://search.proquest.com/docview/108327004?accountid=2694>.

⁹³ Raymond Moley, “Politics in Government Medicine” *Los Angeles Times* February 20, 1948. *ProQuest Historical Newspapers*, accessed December 10, 2016, <http://ezpro.cc.gettysburg.edu:2048/login?url=http://search.proquest.com/docview/165809751?accountid=2694>.

⁹⁴ “*Syphilis Control by 1968 Predicted: Dr. Parran Hails Progress in War on Venereal Diseases, but Warns Against Let-Up*” *New York Times* February 5, 1948. *ProQuest Historical Newspapers* accessed December 10, 2016, <http://ezpro.cc.gettysburg.edu:2048/login?url=http://search.proquest.com/docview/108340827?accountid=2694>.

⁹⁵ Robert Johnson, “Public Clinic Aids in Fight Against Venereal Diseases” *Waterloo Daily Courier*, August 2, 1949. *Newspaper Archive* accessed December 10, 2016. access.newspaper.com/us/iowa/waterloo/waterloo-daily-courier/1949/08-02/page-5.

Numbers do not lie. The educational efforts pushed at the American public and military did not have the effect on venereal disease rates for which Surgeon General Parran had hoped. At the start of the war in 1941, “venereal disease was the greatest single cause of non-effectiveness in the U.S. Army”⁹⁶ and by 1943, the numbers had not improved. In fact, the rates of syphilis and gonorrhea peaked in 1943, nine years after Parran took office and began his fight.⁹⁷ In what was intended to be a complimentary statement, Captain George Carroll, a Venereal Disease Control Officer for the First Army, told the New York Times that “as of September 1947, the VD rates for troops located in the United States were the lowest since 1944.”⁹⁸ While any decline in disease rates is good news, this improvement is mostly likely due to the war’s end.

Diseases are an inevitable part of war and venereal diseases are no exception. After an infectious First World War, the United States made every effort to improve the health of its soldiers during World War II, in part through a heavy educational campaign. Despite the campaign starting well before the country began preparing for war, disease rates climbed well into 1943 among troops and the civilian population was largely ignored. The campaign was flawed through bias against minorities and women, who could have been less volatile in the spread of disease if they were provided with better access to educational and medical resources. Prophylaxis was underutilized because, while many publications promoted it, the process was complicated and painful. Only the end of the war and the mass production of Penicillin could substantially lower the rates of venereal disease.

⁹⁶ Heaton et al., *Preventative Medicine*, ix.

⁹⁷ Brandt, *No Magic Bullet*, 188.

⁹⁸ “Syphilis Control by 1968 Predicted by Dr. Parran”, *New York Times* February 5, 1948.

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Appendix: Images



Figure 1: “No home remedy or quack doctor ever cured syphilis or gonorrhea” was a poster made by the Public Health Service to combat the widespread reliance on cures that were ineffective and not medically sound.

“No home remedy or quack doctor ever cured syphilis or gonorrhea” United States Public Health Service, n.d. *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016, <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101450677-img>.

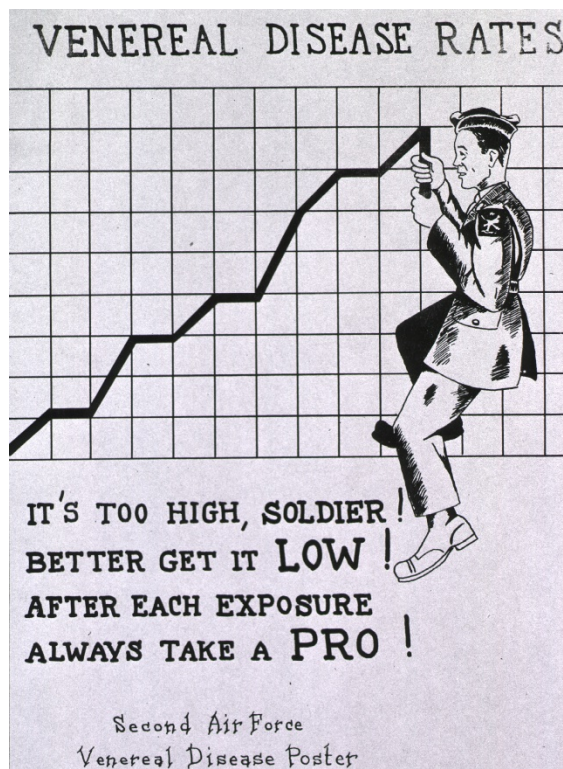


Figure 2: The Second Air Force printed this poster, “Venereal Disease Rates” to encourage the airmen to use prophylaxis as a way to lower rates of venereal disease. The military assumed that any sexual contact could lead to an infection.

“Venereal Disease Rates,” Second Air Force, n.d. *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016 <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101439085-img>.



Figure 3: “Venereal Disease Covers the Earth” is a poster printed in 1940. The visual connects women with venereal disease. It also alludes to soldiers’ susceptibility to disease whether they are at home, the European Theater, or Pacific Theater.

“Venereal Disease Covers the Earth. Learn to protect yourself now” 1940. *NIH National Library of Medicine Digital Collections*, accessed November 8, 2016, <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101439085-img>.



Figure 4: “Joint Juke Sniper” is one example of how posters associated women with venereal disease. In the background is a dance hall, “Shorty’s Place,” which is the kind of establishment where soldiers and women would often meet.

“Joint Juke Sniper” 1942. *NIH National Library of Medicine: Profiles in Science: Visual Culture and Health Posters*, accessed November 8, 2016, <https://profiles.nlm.nih.gov/ps/retrieve/ResourceMetadata/CBBBZ>.



Figure 5: “She May Look Clean - But”, printed in 1940, not only tells the soldier who to be wary of – women – but also tells them why. The text on the bottom reads, “You Can’t Beat the Axis if you get VD.” The poster lists colloquial terms used to describe women who could be infected.

“She may look clean – but” 1940. *NIH National Library of Medicine: Profiles in Science: Visual Culture and Health Posters*, accessed November 8, 2016, <https://profiles.nlm.nih.gov/ps/retrieve/ResourceMetadata/a/VCBBCE>.

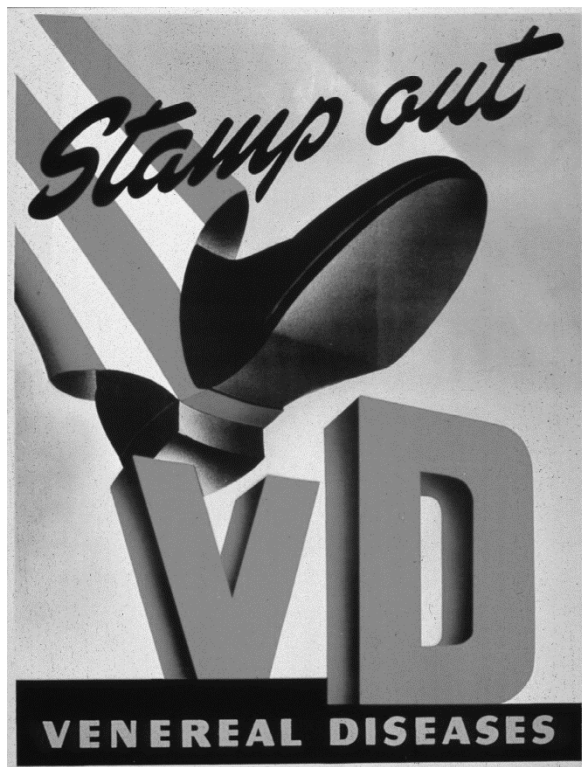


Figure 6: “Stamp out VD” is a generic poster, whose message would be appreciated by soldiers and civilians alike, as it simply is calling for the end of the epidemic.

“Stamp out VD” NIH National Library of Medicine Digital Collections, accessed November 8, 2016 <https://collections.nlm.nih.gov/catalog/nlm:nlmuid-101438704-img>.