

Collection #
M 0384,
OMB 0003

AMERICAN LUNG ASSOCIATION OF INDIANA RECORDS, 1904–1980

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COLLECTION INFORMATION

VOLUME OF
COLLECTION: 23 document cases, 1 oversize box, 4 boxes of black-and-white
photographs, 1 box of color photographs, 3 oversized folders of
photographs, 4 OVC graphics folders, 25 glass lantern slides; 3
boxes of 35 mm. slides

COLLECTION
DATES: 1904–1980

PROVENANCE: American Lung Association of Indiana, Indianapolis, Indiana,
May 1984

RESTRICTIONS: Slides may be viewed by appointment only.

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ALTERNATE
FORMATS:

RELATED HOLDINGS: Delaware County Tuberculosis Association (SC 2046); Wishard
Memorial Hospital (M 0430); Indianapolis Flower Mission (M
0071); Morgan County Tuberculosis Association Records (SC
2354); Marion County General Hospital (M 0430); *Hoosier
Health Herald*. Indianapolis : Indiana Tuberculosis and
Respiratory Disease Assn. (General Collection RA644.T7 H6)

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May 1994

HISTORICAL SKETCH

The American Lung Association of Indiana began as the Indiana Society for the Prevention of Tuberculosis in October 1904. It reorganized under the same name in November 1907, and was incorporated on 29 July 1914. On 8 March 1920, it became the Indiana Tuberculosis Association. Its next name change to the Indiana Tuberculosis and Respiratory Disease Association came in 1969, followed on 20 August 1973 by the name change to the Indiana Lung Association. Shortly afterward, on 28 October 1974, it became the American Lung Association of Indiana.

In the first decade of the century, tuberculosis was the leading cause of death in all age groups in the United States, and it was estimated that the TB bacillus infected 80 to 90 percent of the population. Doctors and lay people formed the National Tuberculosis Association in 1904 to fight the disease; the formation of state and local associations followed. The Indiana Society for the Prevention of Tuberculosis was organized in the same year. From the beginning it maintained close ties with national, county, and local TB organizations, and worked with other health organizations to realize its original goals of public education, case identification, treatment, rehabilitation, control, prevention, and eventual eradication of the disease.

Looking for sources of funding, the national association began an alliance with the Red Cross seal sale in 1910 to raise money. The first seal sale in Indiana took place the following year. In 1919, the alliance was severed, and the Christmas Seal became strictly a TB fund-raising device. Through the years, it has proved to be the largest source of funds for the national and state organizations.

The new Indiana society grew and became more active, holding its first annual meeting in 1912 with Dr. Henry Moore as the state organizer and executive. In 1914, the society incorporated and appointed a full-time executive secretary. In 1917, the society gave its first annual report and began publishing the *Hoosier Health Herald* as its official journal in 1919, reflecting the growth of the organization.

The society supported early TB legislation which led to the creation of sanatoria, TB hospitals and TB wards in local hospitals. It also supported the registration of all cases of TB in state hospitals, as well as a state law regulating the

prevention and control of the disease. Through its urgings, county health departments were begun, and the State Board of Health established an internal Department of Tuberculosis.

Open-air schools, originating in Europe, were established through the society's promotion. The society's Modern Health Crusade became a part of the elementary school curriculum, teaching children good health habits and how to fight tuberculosis. Also sponsored was a Short Course to aid the general practitioner in the diagnosis and treatment of TB.

On 8 March 1920, the Indiana Society for the Prevention of Tuberculosis changed its name to the Indiana Tuberculosis Association, a name it kept until 1969. Murray A. Auerbach became the executive secretary in September 1920, providing the leadership needed by the Association to increase its activity. He continued in this position until his death in 1950.

As a result of the work of the association, by 1930 the TB death rate had dropped to 65.9 persons out of every 100,000 people in the state. There were eight county sanatoria, fifty-two counties had clinics, and eighty-one had Child Health Education programs (formerly the Modern Health Crusade). Twenty-two counties provided hospitalization for the tuberculosis, and there were 88 county associations.

During the 1930s, the association broadened its fight against TB. In 1931, it voted to form a Trudeau Society for doctors interested in TB. Soon after, the association began publication of *TB Abstracts* for the general practitioner. Also available were newspaper articles released to local papers, and a library service offered books and other materials to schools and interested groups. The association also promoted education and testing in high schools and colleges as more teens and young adults began to suffer from TB, replacing children as the highest risk group.

In 1936, the Depression triggered a rise in deaths statewide, threatening a resurgence of the disease. Tuberculosis associations nationwide emphasized the need for public health support, and once again lowered TB statistics. At the end of the Depression officials considered Southern Indiana, along with parts of Kentucky and Tennessee, the worst pocket of TB in the country.

By the end of the 1930s, more funding for research and professional education, in part from the state and national associations, resulted in improved ways to diagnose and treat TB. Doctors used treatments, earlier considered experimental, with greater frequency, including artificial lung collapse and surgery. For detection of new cases, X-rays were used more as the machines became safer and more sophisticated and a new, stable form of tuberculin led to the mass testing of school children. The state association also funded scholarships, fellowships, and traineeships for medical and nursing students.

The association remained active, urging the passage of legislation regarding TB and general health legislation. It included: mandatory TB exams for teachers, school janitors, bus drivers, and food handlers; teachers for sanatorium patients as a first step in rehabilitation; the establishment of a TB Council; and the establishment of full-time county health departments.

World War II brought limited research funds and a lack of doctors and nurses. In spite of this, the TB rate in Indiana fell in 1943, and continued to do so due to the association's activities. Because tuberculosis was still the leading cause of death in young people, the association urged the screening of all draftees, resulting in the treatment of many cases of TB and lowering the postwar case rate. Protecting civilians and soldiers alike from tuberculosis was seen as a matter of national defense, and the association emphasized early diagnosis by x-ray and tuberculin.

In 1944, state and county associations in Indiana began purchasing mobile X-ray units. Use of these resulted in many more people tested from 1944 to 1968, when the program ceased.

In 1950, Indiana had ninety-three tuberculosis associations and eleven sanatoria. The death rate from TB, now less than 1,000 deaths per year, continued to fall. TB remained on the rise, however, among older people, and the number of new active cases in Indiana was still as high as it had been twenty-five years earlier. Accordingly, the association promoted new case identification and early diagnosis.

The first breakthroughs in drug therapy came as considerable money, much of it from TB associations, was spent for research after the war. Doctors gave less emphasis to rest alone, and frequently combined it with drug therapy, lung collapse or operative procedures to shorten hospital stays to as little as two or three months. With little hope of a vaccine on the horizon, prevention remained a major activity for the association, as well as examining legal ways to force recalcitrant patients to "take the cure."

By 1958, the national association was urging the Indiana association to take on more work with respiratory diseases in general. Because the TB problem in Indiana was not yet under full control, the state association was wary about extending its resources into the area of respiratory diseases. Indiana sanatoria were not full; this suggested a decline in the number of tubercular patients. The decline, however, was not real since the state was failing to hospitalize 75 to 80 percent of all active cases. The association recommended a more active case finding program to fill the beds and lower the active case rate.

In 1960, the Arden House Conference announced national goals for the control of TB, and Indiana launched an immediate and major campaign to eradicate tuberculosis through treatment. Also, the association sought stronger links with other health organizations to promote research and education in TB and respiratory diseases. These organizations included the Cancer Society, the State Board of Health, the Indiana State Medical Association and the Interagency Council. Concurrently, the association continued its legislative involvement in the areas of education, smoking, and air pollution.

In spite of the association's efforts, Indianapolis was among the fifteen large cities having the highest increase of new TB cases in 1964. Because of this, eradication and prevention programs emphasized the testing of school children, and of those who had close contact with them.

In 1964, the Indiana Trudeau Society changed its name to the Indiana Thoracic Society. The society serves the TB Association in an advisory capacity as its medical section. In 1969, the Indiana Tuberculosis Association changed its name to the Indiana Tuberculosis and Respiratory Disease Association. Both name changes indicate the shift in focus from tuberculosis to include respiratory diseases in general.

In the early 1970s, the association announced its long-range goals: the eradication of tuberculosis; the control of other respiratory diseases; the elimination of cigarette smoking; air conservation; and the promotion of general health and welfare. These goals reflect the growth and diversification of the association since its inception as a society to control tuberculosis.

On 9 November 1971, the association's Board of Directors announced plans to reorganize the 92 county organizations into 8 regional affiliates; the task was completed by 1973. On 20 August 1973, the association changed its name to the Indiana Lung Association. On 28 October 1974, the association again changed its name to the American Lung Association of Indiana.

As of 1972, Indiana ranked 26th nationally for the lowest percentage of tuberculosis deaths, with 13.6 persons per 100,000 dying annually from the disease. A comparison with the 1907 rate of 171.3 persons per 100,000 demonstrates the effectiveness of the association. For more recent information, contact the American Lung Association of Indiana.

Sources:

Information in Collection.

Hoosier Health Herald (RA644.T7 H6).

SCOPE AND CONTENT NOTE

The American Lung Association of Indiana records are a composite of collections donated by the American Lung Association of Indiana, Indianapolis, and the American Lung Association of Indiana, Southwest Affiliate, Evansville. The collection contains materials from national, state, county, and local tuberculosis organizations. It consists of organizational records including minutes, financial statements, programs, newsletters, correspondence, reports, memos,

educational material, scrapbooks, and pamphlets. Other formats include books, slides, photographs, posters, Christmas Seal stamps, artifacts, and exhibit materials. Since the collection represents a large number of organizations, many which have gone through one or more name changes, the collection is arranged first by organizational type (state, county, and affiliate), then by organizational name.

Series one contains state association records, 1904–80. Since the association has undergone a number of name changes, materials have been further divided into 3 sections to reflect these changes: the Indiana Tuberculosis Association; the Indiana Tuberculosis and Respiratory Disease Association; and the Indiana Lung Association.

The Indiana Tuberculosis Association section mainly contains the minutes of the Executive Committee, Board of Directors and annual meetings, and financial statements and budgets, all dating from 1930 to ca. 1970. Other materials included general correspondence, educational information, business records, reports, and related items, 1912–80. The records also include Christmas Seal materials including stamps dating from 1904–80.

The records from the Indiana Tuberculosis and Respiratory Disease Association date from 1970–73 and deal with the Qualification and Contract Committee (1958–72) and the Medical Affairs and Research Committee (1964–71). The latter records include research grant proposals and fellowship awards.

Indiana Lung Association materials mostly concern the organization's 75th anniversary exhibit. The records date from 1913–37 and were used as part of a retrospective view of the association. Also included is the newsletter for 1971–74.

Series two contain the records from the forty Indiana county tuberculosis associations. Most county records cease in 1971 when the state association reorganized and combined the county associations into regional districts. The first section contains records from the associations of Grant, Howard, Madison, Miami, Spencer, Vanderburgh, Vigo, and Wayne counties. The second section contains smaller holdings from the thirty-one county associations, arranged in alphabetical order by county name. Following is information about the county associations.

The Grant County Tuberculosis Association materials are the most complete, and date from 1928–71. They include minute books, annual reports, and general business records. However, most of the items are newspaper clippings about the association (1936–71) and Christmas Seal sales materials (1936–70).

Materials from the Howard County association date from 1913–73, with the bulk dating from the 1950s and 60s. Included are financial records, correspondence, minutes, and a history of the organization.

The Madison County Tuberculosis Association records date from 1945–72 and are fairly complete from ca. 1950–72. Records include minutes, correspondence, reports, and financial records. The Miami county records are mostly minutes, 1939–73. Other materials dating from the 1960s include financial records and correspondence. The Spencer County association materials contain fairly complete minutes, financial records and correspondence from 1951–73.

Vanderburgh County records are fairly incomplete, and consist of partial correspondence, newspaper clippings, programs, and minutes, 1909–73. Most helpful are the histories of the organization. The Vigo County Tuberculosis Society records are primarily financial records, 1945–73, with other types of records represented by one or two years. The Wayne County records are from 1969–72, and include annual reports, minutes, agendas, and financial records.

Thirty-one other county association records follow. These smaller holdings date from 1919–73, with the bulk dating from ca. 1950–73. Also included are three folders of county association materials. These records are all extremely sketchy in terms of types of records and dates represented.

Series three contains materials from the numerous organizations affiliated with the American Lung Association of Indiana. Groups represented with records in this series are the Indiana Conference of Tuberculosis Workers, the Mississippi Valley Conference on Tuberculosis, the Indiana Thoracic (Trudeau) Society, the Indiana Tuberculosis Council, the Indiana State Board of Health, the Indiana Public Health Association, the Indiana Health Council, the Indiana Advisory Health Council, the National Tuberculosis Association, the National Tuberculosis and Respiratory Disease Association, the National Conference of Tuberculosis Secretaries, and the World Health Organization. There also are publications concerning other states' tuberculosis associations and activities, and related materials.

The Indiana Conference of Tuberculosis Workers records date mostly from the 1950s and 1960s and contain minutes, correspondence, and reports. Mississippi Valley Conference on Tuberculosis records date from 1921–75, with most dating from ca. 1951–59. Records include programs, minutes, correspondence, financial statements, and a fairly complete history of the organization.

The records of the Indiana Thoracic Society include those of the Indiana Trudeau Society, the organization's name before April, 1961. Included are rosters, minutes, reports, correspondence, and financial records, mostly dating from the 1950s and 60s. Some earlier materials are included from the 1930s and 40s. The records are representative but incomplete. The Indiana Tuberculosis Council records contain a complete set of minutes dating from 1949–76. The only other records held for the organization are correspondence dating from 1949–53.

Smaller holdings include the records of the Indiana State Board of Health, 1941–70. They contain reports, educational information, correspondence, and statistical reports concerning tuberculosis. Records from the Indiana Health Council and the Indiana Advisory Health Council pertaining to tuberculosis date from 1947 to 1954, and contain minutes and correspondence.

The National Tuberculosis Association records (1928–65) include programs, publications, and annual reports. Materials from the National Tuberculosis and Respiratory Disease Association consist of newsletters and *L-Letters* from 1970.

The World Health Organization materials contain newsletters and correspondence about the organization dated 1948. Publications concerning other states' TB associations and activities date from 1917–66, and include the states of Delaware, Idaho, Illinois, Kentucky, Missouri, New York, North Carolina, Washington, and Wisconsin. Other items (1943–80) include journal articles, letters, cartoons, and publications.

Series four contains pamphlets and booklets too bulky or large to be stored with the papers. Smaller pamphlets and booklets may be found with the papers. Included are materials from state and local organizations dating from 1914–70, including the Indiana Tuberculosis Association, the Indiana State Board of Health, the St. Joseph County Tuberculosis League, William Ross Sanatorium, Marion County, and Sunnyside Sanatorium.

Pamphlets and booklets from national organizations date from ca. 1920–76. Organizations represented are the National Tuberculosis Association, the American Lung Association, and the American Public Health Association. Educational pamphlets make up most of the materials, along with a few handbooks and programs.

Series five comprises photographs and slides relating to the history and activities of the organization. Among the items are photographs of Indiana TB Association presidents, 1910s–50s; images apparently used for an overhead presentation about the organization's work, ca. 1915; and other images from the 1910s such as patients and fresh-air school illustrations for publications. Other visual material centers around local organizations and their activities. The largest amount of material is from the Vanderburgh County/Evansville area. Prominent activities include the Christmas Seal mobile X-ray unit, Boehne Hospital, and Huntington School. Other areas in the state represented by visual materials are Fort Wayne and Allen County, Fort Wayne and Grant County, Terre Haute and Vigo County, and Indianapolis and Marion County. Most of these images are from the 1950s and 1960s.

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Lederle Exhibit, Tine Mantoux X-Ray, 1960–62	Visual Collections: 35 mm. Slides, Box 1, Bin 1
Tine-Mantoux X-Ray Study, 1960–61 Charts (July 1962)	Visual Collections: 35 mm. Slides, Box 1, Bin 2
Typical Mobile Unit Set-up Locations, 1960s (1 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 3
Typical Mobile Unit Set-up Locations, 1960s (2 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 4
Tuberculin Test Reaction, 1963–65 (1 of 3)	Visual Collections: 35 mm. Slides, Box 1, Bin 5
Tuberculin Test Reaction, 1963–65 (2 of 3)	Visual Collections: 35 mm. Slides, Box 1, Bin 6
Tuberculin Test Reaction, 1963–65 (3 of 3)	Visual Collections: 35 mm. Slides, Box 1, Bin 7
NTA Meeting Shots, 1963–65 (1 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 8
NTA Meeting Shots, 1963–65 (2 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 9
TB Posters, 1964 (1 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 10
TB Posters, 1964 (2 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 11
Christmas Seals, 1964–65	Visual Collections: 35 mm. Slides, Box 1, Bin 12

Respiratory System Drawings, 1964	Visual Collections: 35 mm. Slides, Box 1, Bin 13
Slide Presentation, 1964 (1 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 14
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TB Statistics, Indiana and Counties, 1964	Visual Collections: 35 mm. Slides, Box 1, Bin 16
Exhibit, June 1965 (1 of 2)	Visual Collections: 35 mm. Slides, Box 1, Bin 17
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Atypical Mycobacteria, 1965	Visual Collections: 35 mm. Slides, Box 1, Bin 19
X-Rays and Photo Fluorograms, 1965	Visual Collections: 35 mm. Slides, Box 1, Bin 20
Testing, Dec. 1965–Feb. 1966 (1 of 2)	Visual Collections: 35 mm. Slides, Box 2, Bin 1
Testing, Dec. 1965–Feb. 1966 (2 of 2)	Visual Collections: 35 mm. Slides, Box 2, Bin 2
NTRDA Reorganizations, 1969	Visual Collections: 35 mm. Slides, Box 2, Bin 3
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General Slides, June 1969–Aug. 1971	Visual Collections: 35 mm. Slides, Box 2, Bin 5
Indiana Maps (Mixed), 1969–71	Visual Collections: 35 mm. Slides, Box 2,

	Bin 6
Mobile X-Ray Unit Procedure, 1960s (1 of 3)	Visual Collections: 35 mm. Slides, Box 2, Bin 7
Mobile X-Ray Unit Procedure, 1960s (2 of 3)	Visual Collections: 35 mm. Slides, Box 2, Bin 8
Mobile X-Ray Unit Procedure, 1960s (3 of 3)	Visual Collections: 35 mm. Slides, Box 2, Bin 9
Slide Presentation, Sept. 1970	Visual Collections: 35 mm. Slides, Box 2, Bin 10
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Meeting, May 1971	Visual Collections: 35 mm. Slides, Box 2, Bin 13
Facilities, Sept. 1971	Visual Collections: 35 mm. Slides, Box 2, Bin 14
ITRDA Reorganization Manual, 1971	Visual Collections: 35 mm. Slides, Box 2, Bin 15
Numbered Slide Presentation, Oct. 1975 (Nos. 27– 54)	Visual Collections: 35 mm. Slides, Box 2, Bin 16
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Policy (ATS) on Skin Testing, n.d.	Visual Collections: mm. Slides, Bin	35 Box 3,
S.W. Indiana Area REORE and ITRDA REORE, Manual, n.d.	Visual Collections: mm. Slides, Bin 6	35 Box 3,
TB Association Office Staff, n.d.	Visual Collections: mm. Slides, Bin 7	35 Box 3,

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