Franklin D. Roosevelt — "The Great Communicator" The Master Speech Files, 1898, 1910-1945

Series 1: Franklin D. Roosevelt's Political Ascension

File No. 328

1929 June 4

Warm Springs, GA - Bankers Club

Attendance & Reporting GEORGIA WARM SPRINGS

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MR. WOODIN: Governor Roosevelt and gentlemen: It was a very

kindly thought that impelled you gentlemen to leave your busy offices and come over here and spend a few minutes with us to hear about Warm Springs, Georgia. If I were going to make a speech -and I am not -- I would select today the subject of bravery. To see our Governor, handicapped as he is, bearing the burdens of this State, active and efficient, I think is one of the bravest things I have ever seen, and it is a source of inspiration to every man, woman and child in this State. (Applause.) He has found a panagea for his ailment, and large-hearted as he is, he desires to share it with others, and with our help he will be able to do so. Gentlemen. I have the honor to present to you one who needs no introduction -- Governor Roosevelt. (Applause.)

GOVERNOR ROOSEVELT: Gentlemen, my first thought on getting back to New York and seeing this large gathering of most of you, my old friends and business associates, is that judging by the color of your faces you all need to go to Warm Springs. (Laughter.) It seems a great bity that the affairs of business hold you here in New York, when the business director of the State has been able to go off for a six weeks holiday and get tanned, not only in his face but all over the rest of his body. It is susceptible of proof if you need proof.

I think it might interest you if I could visualize to you in a very few simple words the thing that came to me last autumn

when it was finally determined that I had to run the State of New York for two years, and began the suty of our State Government. You all have read in the papers about the conditions in the hospitals of the State of New York. The State of New York is taking care of about 40,000 unfortunate people who are the wards of the State, and for the last eighty years the State of New York has adopted the perfectly definite policy of taking care of the mentally deficient citizens. ** That has been a very large task, and of course with the growing copulation, it has meant more and more acceptance by the State in taking care of that class of our citizens who had to have special treatment. Now, going back a few years, I had discovered, after catching the germ of infantile paralysis in 19°1 and getting somewhat interested in the subject, that there are in the United States about 350,000 cripoled people. Every one of those ofippled people needs a certain amount of assistance or attendance from able-bodied persons -- probably 150,000 more at a very conservative estimate who have to spend most of their lives in taking care of the 350,000 cripples.

In other words, in the population of the United States there are somewhere around half a million people who are directly concerned, and taken out of active production -- I am talking now from the business point of view -- about half a million people who do nothing but lie around as cripples, or take care of those who lie around as cripples. Translated into terms of dollars and cents you have half a million people taken out of active production, which means, of course, a very serious economic drain to the community.

Way back, fifty years ago, nothing was done for the cripples. Fifty years ago very little was done for the mentally deficient. Gradually; impre and more has been done by medical science for both classes in the community. So that today, in almost every stage of mental deficiency, they have been taken care of by the state. But the problem of the cripple is not so easy.

It would be obviously impossible, unless we were to greatly increase our taxes and greatly increase the bonded indebtedness in the state, for us to embark as a government in the care of cripples. There are somewhere around fifty thousand cripples in our State of New York. I think that medical science -- the doctors -- will aggee with me when I say that probably out of the fifty thousand cripples, between forty thousand and forty-five thousand have never received adequate medical treatment.

Now, it is different from the question of hospitals. The hospital end of the care of sick people in this state is pretty well taken care of. Taking it by and large, I am talking now of the great city hospitals and the great private hospitals over the state.

The average prior is able to get hespital treatment in almost every community, and every year advances are being made in that part of the work. But these hospitals look essentially to the immediate sicknesses, to the accidents or the diseases during the crisis of the illness, and when the operation is over, or the disease has run its course, the patients are discharged and replaced by somebody else. Now in the case of cripples you can't operate on that line for the very good reason that the restoration of cripples to some useful activity takes not a few weeks or even a few months, but takes literally a period of years.

Now, during the last few years very great strides have been made in bringing cripples back to some kind of useful activity. It isn't a government function. As I have said before, the government, no state government, no national government, can afford to embark on a program that would look after the needs of 350,000 crippled persons in this country. It has got to be a development of private charity. Probably the great majority of cripples both in this state and all through the country who are helpless or unable to function as the doctors call it, one way or the other, could with the proper kind of treatment be restored to useful citizenship. The School of and other organ izations in this city are doing that kind of work and are allowing them, making it possible for them to lead useful lives.

Now, of course, this total of 350,000 cripples, there are two great causes for it. The first is infantile paralysis, and the second is industrial accidents. There are more victims of infantile paralysis in the United States than there are victims of industrial accidents, as permanent cripples. There are probably somewhere around 150,000 people who in the past, roughly, the past twelve or fourteen years, have had infantile paralysis. Infantile paralysis is a very old disease. It was known, I believe, to the Egyptians. They have found mummies that bore unmistakeable evidences of the disease in ancient Egypt. But as an epidemic in epidemic form, it is a comparatively new arrival in the United States. The first def nite epidemic occurred in this state in 1908, the serious epidemic that swept the whole eastern prt of the country and claimed somewhere around 66,000 victims occurred in 1916.

And on the average we have an epidemic every six or seven years. Infantile Paralysis in epidemic form is spreading throughout the country. Out in the Pacific Coast, it got down into Tennessee, and Kentucky — and Texas two years ago. And the only part of the country, curiously enough, which hasn't had an epidemic of it is down in Georgia, and South Carolina. As a result of my getting interested in it — I talked to all of these doctors, and discovered that the leading Orthopedic Surgeons had found that the treatment of Infantile Paralysis, giving exercises, would when they are carefully given under direction, gradually over a long period of time, would restore muscular activity, and enable people to get about.

Then in 1924, I got a letter from George Foster Peabody, who came originally from Columbus, Georgia, — as some of you know, — and was the owner — and had just bought, with the idea of making it a pleasure resort — a very old, "downat—the-heels" delapidated Southern Summer Resort, called Warm Springs, which had very little to commend, except a delightful locality, with an elevation of 1,000 feet, a good all the year climate, and a Spring, which is the largest warm spring East of the Rocky Mountains. Mr. Peabody wrote me to tell me of a case of a local boy who had gone there, who had Infantile Paralysis, and the Doctor had said he would never walk again. — There was no doctor at Warm Springs, and they put him into this bool. Without any particular assistance he kicked around in the bool. At the end of one summer, he was able to stand up with braces, on dry

land. At the end of the third Summer he got rid of his braces. At the end of the Fourth Summer, he came back to New York City, and took a job as an engineer, - draftsman, - and he is still here getting about, every day, to his business, and walking with only one came.

Well, I am a little ahead of my story. As a result of that letter, I got in touch with a number of Orthopedic Surgeons, and went down there myself, and tried the thing out, and found it did me an awful lot of good. The result was that next year, with the advice of a Committee of Orthopedic Surgeons, we conducted experimental periods. Twenty-five patients down there: we kept charts and records. And as a result of that, the following Spring, 1926, the Foundation was organized by a group of gentlemen from different parts of the U. S. They are now the present trustees. Gradually, the place has built up. --

From the beginnings of 25 patients to the present capacity of 81 or 82, which is full up at the present time, with a waiting list.

The interesting thing to me is two fold: First, that we are actually making, not what you would call cures, but making sufficient improvement in the patients that we have treated to enable them to function in life.

Just this coming week, there will leave Warm Springs a young man who was a guard on a famous Swarthmore Football Team, and included in one of the All-America Teams for the year — three years ago. Just after the Football Season — I think two or three months afterwards, he came down with Infantile Paraylis, — a perfectly magnificent fellow! For the first two or three

months he was completely paralyzed, - arms and legs. His arms came back quickly. His legs did not. He came to Warm Springs, - about a little over a year ago. He is leaving this Summer, perfectly able to get about.; to be sure, with crutches. And he is seeking a job, along the lines that he thinks he is fitted for, and that we think he is fitted for, end that is as a personnel officer of one of the larger companies employing large numbers of people. He is the kind of a fellow that has the personality. Down there in the community of Warm Springs, after we had been there a couple of months, he was elected the local Mayor of the Patients' Colony. That is one example, and we can give you a great many others.

With present capacity, we are taking care of somewhere around 300 different people in the course of each year, and our plan is, of course, to build up the number of people that can be treated at any one time, so that with the present plans we will be able to take care of 150 people at all times, which will mean somewhere between five and six hundred patients treated during the course of each year. But the second point is of equal interest, and that is the undoubted fact: that the medical profession, realizing that this is being run along strictly ethical medical lines, — and one has to, to retain the confidence of Doctors — they have supported us to the extent not merely of saying that they approved of the work, but are sending people down to Warm Springs from practically all over the U. S. to see what was being done; And to copy it. This year, we

know of 14 different hospitals in the U. S., mostly in the North, which have sent people to Warm Springs, and copied the Swimming Pool down there, and the various methods of Physio-Therapy, of giving these exercises under water. It is important to emphasize that there is the mental slant to this also. Down there, it is not an Institution. It is rather a series of cottage colonies. The idea being to instill in the minds of all the people who come down there, the fact that they are well people. They are essentially well people. They are not sick people, or invalids in the ordinary sense of the word. An arm, or a leg, or two legs, perhaps are not functioning, because the muscles aren't there. But mentally, they are probably more alert than any similar average number of young people.

And the spirit which has been inculcated into that community there through Dr. Hubbard, and the various Physic-Therapists down there, is such that the people not only swear by the place, but compete with each other, and cooperate with each other in the perfectly definite determination of getting well. Of course that means an awful lot.

Take 5-p.1. 10.

Of course, that means an awful lot. It is still a work that is in the experimental stage. It only goes back -- this treatment of infantile paralysis, roughly, ten years. Before that the average person with infantile paralysis was left a more or less hopeless and helpless individual in a back room and not spoken of by the family. You can go around this country today into the back districts and you will find any number of undiscovered cripples who are still in the farming districts, out of the way places, lost insofar as community care goes. I give you one example. Up in my home town xxxxx on the Hudson River I thought I knew every man, woman and child in the town. Evidently I did not. Most of the people in the township knew that I had been working on this thing down at Warm Springs and we had had a number of patients come down there from Dutchess County. A little over a year ago I was down there and got a letter from a man in Brooklyn whom I had never heard of. He said that he had spent the previous summer at a place called Quaker Lane in the back part of the town called Hyde Park, and that up there on a farm was a man totally and hopelessly crippled with infantile paralysis. He had not a chance in the world. was a small girl and there was a wife that went into Poughkeepsie to work every day. I went up and located him with a great deal of difficulty, when I got him and found that it was perfectly true. He had been in a wheel chair for seven and one-half years. He could not walk. He could barely use his hands, and every morning, when his wife left to go into her work in Poughkeepsie, she would tie the little girl to the porch pillar, and between the little girl tied to a rope to keep her out of mischief, and this unfortunate young man of 27 or 28 in a wheel chair, they spent the entire day without seeing Take 5-p.2

another human being. They fended for themselves and got some kind of a cold lunch because they were afraid to light the stove, lest some accident would happen. One of them tied, the other a cripple.

We got hold of the young man, and through the help of local people, got him down to Warm Springs. He has been there ever since. When he got there his hips were so contracted that he could not straighten out his knees, could not get into an upright position. He had been in a wheel chair for seven years. His knees were so contracted, he could not straighten out his logs, and there he was. The local doctors had looked him over and said, "We can't do anything for you." That young man is today walking down at Warm Springs, and has a natural aptitude for tinkering with clocks and watches and will go back to Hyde Park to his home this autumn, we hope, eertainly by next spring, able to navigate, getting in and out of a car, and go down to a job that is waiting for him in Poughkeepsie as a watch repairer.

Now, that particular instance can be multiplied a thousandfold all over the United States. When the State of New York started
to list its cripples, they sent one of their members up to Niagara
County. They went to the various doctors, to the health officer and
the local officials and dug out the names of sixty cripples in
Niagara County. They were satisfied that that was perhaps short of
the mark. Niagara County is a fairly large county and territory, not
so large in territory population. The City of Niagara Falls is the
only city in it. The doctor and his assistant went through that

only city in it. The doctor and his assistant went through that County house by house and road by road, and at the end of a two Months' survey, they dug up 360 cripples in Niagara County, 300 undisclosed cases.

Take 6

Now the problem is two-fold. First they got to find the cripples, and probably the present known number of cripples in the United States is only about half the actual number. We have got to dig them out; and this coming summer and fall the State of New York is starting a second process of combing to find out where the cripples are in this State. We are doing it in cooperation with this city, and with every possible agency to find out who the people are that ought to be treated. Having discovered the state as not being in the business, and being impossible to take care of this number, all we can do is to send them to clinics, through our own State Health Departments, and through the various city health departments, look them over, see what is necessary to be done for them, and see whether according to medical judgment it is worth while and it is a possible thing to treat them and put them back on their feet.

We believe that the very great majority can, with proper help be put back. How is that putting back process going to be worked from the state and national point of view. It has got to be done largely through private enterprises, largely by building up a new series of agencies. One very excellent and very efficient agency has already been started, and for a number of years has been doing excellent work. The shriners in the United States have, I think, eleven or twelve different orthopedic hospitals running with two or three hundred beds where the operating work is done on cripples. Their work ends with the hospital, in other words, they have not been able to go on to the second and equally needed step of following up these cases and giving them this long period of after-care,

Take 6

and of seeing to it even after the patients get home into their own own families that they are receiving the proper kind of treatment, proper kind of care, so as to finish up the restorative processes.

In this state also we are doing one other thing. You doubtless know *** what is undoubtedly a fact, and that is that Europe
is years and years, half a century shead of the United States in
the use of natural mineral springs for therapeutic curposes. You
know the work that has been done in Germany, of the work that has
been done in France, andof the work that is now being done in Italy
under the very intelligent leadership of our friend Mussollini,
thating extremely valueble natural waters and using them for therapeutic purposes. We know that over there on the other side these
various Spas, health resorts — cures, as they call them there —
are handled on a scientific basis, and that the medical profession
recognizes hydro-therapy as a very definite adjunct to their work

Here we have done nothing. In the days of our grandwarents people used to go to Sharon Springs and Saratoga Springs, and places like that and drink the waters. It was the faworite past-time of the fiftys and sixtyes, and before that, when the people used to go yachting on the Eric Canal. Those days were unscientific. People drank the water, and it was largely a mental thought that suggested itself to them —— that it did them good, and the social end of it was more important.

Nevertheless, we have a great many springs in this state, like Saratoga Springs which has a large wealth of different kinds of mineral water, more than any other place in the world. A lot of doctors from Neuheim and Carlsbamd that have visited Saratoga Springs just threw up their hands in wonder at the different qual-

Take 6

ities of water which we have there. Those springs, largely through the offices of Mr. George Peabody and others, have been bought by the State of New York. We have owned them for a number of years and the state has done practically nothing to develop them an along scientific lines. You people who go there for the races know that the racing is very different from the bathing end. The water has very remarkable potentialities for medical use, and we are undertaking a scientific investigation of how that ought to be developed for the benefit of the people of the state, and the committee, some of which has been announced, is going to be composed of Bernard M. Baruch as Chairman, and of Robert Goelet and Thomas Cochran, the other two members appointed by the governor, Those three gentlemen, plus two or three -- four actual members of the legislature, are going to try towork out the development of Saratoga Springs.from the health point of view. They are usin g the best medical brains that we have got in this country, and the best medical brains that we can bring over from the other side. Next to Saratoga Springs, no scientific development is being conducted in this country with the exception of Warm Springs, Georgia. And down there we have confined our efforts largely to the treatment of infantile paralysis. It is a very remarkable region down there, on the slove of this very wonderful iron mountain that is the last tag end of the lowest sour of the Appalachian system. 1500 feet high, and the sorings are 1000 feet high. There it has a cpacity of 2000 gallons of water a minute, the temperature is 89 throughout the year. There are very remarkable sulphur springs just a few miles away and iron springs a few miles away in the other direction. In other words, it is highly mineralized, and

needs only scientific development to make it one of the famous spars of this country.

One other point that I would like to emphasize. In the very beginning the trustees of the Foundation made up their mind that this was going to be conducted not as a charitable enterprise in the sense that the treatment is given free, but will be conducted at cost. We found that the average cost per patient per week in New York City hospitals -- I mean private hospitals -- ran anywhere from \$40.00 to \$65.00 a week, including even the ward patients. Down there, because of the cheaper labor and wages, we have been able to set the cost at \$42.00 a week, and come out a little ehad on actual operating figures.

Last-1

We suppose that \$42.00 a week would be within the reach of the average family in this country. Well, it isn't: \$42.00 a week is a whole lot too high, and that is one reason why it becomes quite ssential that the numbers down there and the facilities should be increased, because if we can get up to the proposed capacity of 150 within the near future, it means that the weekly cost afxina per patient, to the patient, will be materially reduced from that \$42.00 a week figure. In order to help the very large number of people who can't afford \$42.00 a week for everything, that is, mcdical, board, lodging, swimming, physiotherapy, everything included, no other living expenses outside of the \$2.00 a week except an occasional ice dream soda and some coco cola, it being in Georgia, in order to help those people during the past few years, and in the future who can afford it, we established a Patient's Aid Fund, which gives a certain amount towards this \$42.00 a week, but in no case provides absolutely free treatment. In other words, we require every patient or their family to contribute as much as they properly can towards the treatment.

I wish you could come down there some time and see the work. It is interesting because it is so now. It is interesting because it is exerting a very strong effect, not merely on the increasing of facilities all over the United States, but also in the interestance that the public has in the question of the cripple. There are in the final analysis in infantile paralysis four steps. The first is the research step, the effort that is being today to find the germs of infantile paralysis. Some splendid gifts have been given to this and great strides have been made. A serum has been discovered which is partially effective at the immediate enset of the disease. It is not 100% effective yet. In other words, the germ has not been

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isolated, and the leading research doctors of the United States are working on that problem at the present time. The second step is the ordinary course of the disease. In other words, the first month or two immediately following the attack. That is purely a matter of proper nursing. The third step is the building up of the muscles over a period of two years or three or four, or even ten years, so that the individual may become functionally able to get about. The final step which is necessary in of course a very large number of cases, is the giving, the teaching of some kind of an occupation for these people to follow when they are able to pass that third step and get about.

Down at Warm Springs we are concentrating on that third step, and that is about the only Foundation in this country which is concentrating on that third step. Splendid work is being done in the occupational therapy end of it, both in this city and in other places. Much remains yet to be done. The hospital end of the second step is being pretty well taken care of and we hope that through the reasearch on the first step, and great deal will be accomplished in the prevention or at least the localizing of the epidemic form of infantile paralysis.

Some day when you are traveling south, if you will come down by way of Atlanta instead of the Goast Line on your way to Florida, you will find an excellent country road from Atlanta, or a railroad that will take you 75 miles south to Warm Springs, and it makes very little difference what time of the year you come, because once you are there, whether it be in the winter or in summer you will find a delightful climate, and more than that, you will find a spirit of a very remarkable kind, something that you can't visualize until and unless you have been there -- 80, 120, 15\$ poople, all living together as perfectly normal human beings, all striving toward a definite end

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and all perfectly confident that they are going to reach that end. It is something that we need the cooperation of the people all over the United States, not just for the sake of Warm Springs and the individual good that can be done at that one point to a few hundred people a year, but we need the help of people so that the general problem of the cripple in our midst -- half a million people involved, half of one percent, nearly, of our entire population, so that we can not only for the sake of humanity, but also for the sake of a more presperous, a more useful body of Americans, put them back on their feet.

In closing let me tell you how very happy I am, how very proud I am that you in your busy days have been willing to come hore to luncheon with us. I want to tell you how much I appreciate it. If there are any questions anybody would like to ask me I would be only too glad to answer them if I can. (Applause.)

THE CHARMAN: Gentlemen, you have heard the story of Warm Springs as it could only be portrayed by Governor Roosevelt. In return for your graciousness in coming to lunch with us, and hearing this story, we are going to make it a point to mall upon each one of you personally and ask you to help us. I hope that we will be hospitably received. The meeting is adjourned.