ACC

10000/141/489

10000/141/489

PUBLIC HEALTH
SEPT. 1943 – OCT. 1944

HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394
Public Health Sub-Commission
Ref./Z90071-500

ACC/5005/PH

2 October 1945

SUBJECT: - Malaria Control Branch.

TO : - See Distribution Below.

1. Effective 1 October 1945, the Malaria Control Branch of the Public Health Sub-Commission is discontinued.

2. All Malaria Control activities heretofore coming under the supervision of the Malaria Control Branch are from today to be performed by the Public Health Branch of this Sub-Commission.

3. The Rockefeller Foundation Malaria Demonstration Unit will continue its functions as heretofore under the immediate supervision of Dr. Henry W. Kumm, within the Public Health Branch of this Sub-Commission.

G.S. ERSKINE, Brigadier.
Director,
Public Health Sub-Commission.

3854

Distribution "A"

3152

Interair

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1 SEP 1944

HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394
Public Health Sub-Commission
Tel.489081-500

PSS/jf

30 August 1944

ACC/3040/PH

SUBJECT: - Typhus Control Unit.

TO : - See Distribution Below.

1. Effective 25 August 1944 there is established within the Public Health Branch of this Sub-Commission, the Typhus Control Unit in lieu of the Typhus Control Branch which is discontinued as of this date.

2. Dr. Floyd S. Markham, Rockefeller Foudation, is named Officer in Charge of the Typhus Control Unit.

3. Under the direction of the Chief, Public Health Branch of this Sub-Commission, Dr. Markham will assume responsibility both technical and administrative for all operations of the Typhus Control Unit.

4. Correspondence relative to Typhus Control matters should be addressed to: Officer in Charge, Typhus Control Unit, Public Health Branch, Public Health Sub-Commission, Headquarters, Allied Control Commission, APO 394.

3893

For Brigadier G. S. PARKINSON:

Martin E. Griffin
MARTIN E. GRIFFIN,
Colonel MC,
Acting Deputy Director,
Public Health Sub-Commission ACC.

Distribution "A"

Interior Sub Com

(39)

1965.

HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394
Public Health Sub-Commission

6 AUG 1944

ACC/3008/PH

4 August 1944

SUBJECT: - Veterinary Branch of the Public Health Sub-Commission, ACC.

TO : - All Concerned.

1. For the information of all concerned the Chief of the Veterinary Branch of the Public Health Sub-Commission is Major ROWLAND W. RUSHMORE (A) Vet Corps 0380831.

2. The functions of the Veterinary Branch are:

a. Assist SCAOs and Regional Commissioners of ACC/AMG in the control of infectious diseases of civilian livestock, communicable and non-communicable to man, by giving advice and assistance in:

(1) The production, distribution and use of veterinary biologics.

(2) The development and enforcement of veterinary sanitary police measures.

(3) The procurement of veterinary supplies.

(4) The location and placement of civilian veterinarians.

(5) Meat inspection and the care of slaughterhouses.

b. Assist in coordinating civilian and military veterinary activities. 3892

noted
7 Aug 44

G S Parkinson
G. S. PARKINSON, Brigadier
Director, Public Health Sub-Commission

DISTRIBUTION "A"

1300

Equals British CONFIDENTIAL

ALLIED CONTROL COMMISSION INCOMING MESSAGE

/mer (38)

SVC/RELAY NO.

M/C NO :

CLASS: CONFIDENTIAL

REF NO: S-10912

PREC : ROUTINE

FILED : MAY 271631B

FROM : IBS FROM STUBEL BINE FROM Hand Lock

REC'D : MAY 281145B
ACC Courier

TO : ACC MAIN FOR INTERIOR SUBCOM AND PUBLIC HEALTH

Given necessity and urgency to insure continuity and stabilizing of important Public Health services may President Council Ministers be urged approved and give effect to reform of Public Health services and Regional Directorate for Sicily. Reform plan for sanction by Italian Govt including confirmation of Regional Directorate of Public Health for Sicily submitted to Solimena General Director Public Safety also in charge Public Health 2 May by Doctor Savoia, AMG Appointee Regional Director Public Health Sicily after consultation and agreement to proposals with Minister Aldisio.

NEW SUBJECT. May decision be solicited regarding appointment 27 March of Provincial Medical Officer Musumara for Catania where AMG appointed PMO Ciriminna already in office. Later eminently satisfactory and continuation in office recommended. Ambiguous position of Forner causing embarrasment.

3851

Main ACC Dist

Action Rear Hq
INFO ACC
CA Br
File
Float

Rear ACC Dist

1 File
1 DSG Info
1 P Health Info
1 Admin Sec Info
1 Interior ACTION-INFO

Public Health S C taking action 28/5 sa

ACTION INFO

Equals British CONFID

File 37

REAR HEADQUARTERS
ALLIED CONTROL COMMISSION
INTERIOR SUB COMMISSION
APO. 394.

1st May, 1944.

SUBJECT: Reform of Enti Comunale D'Assistenza.

TO : Director, Interior Sub Commission.

FROM : Captain C.G.R.Williams.

1. Nos. 35 A, B, C & D on file 3020/PH refer.

2. Captain Silveira has discussed this with me informally.

3. On the face of the draft decree for reforming E.C.A., the following points arise:-

(a) It is desirable the Sindaco continue to be ex-officio chairman of the E.C.A. so that he can ensure coordination in his commune.

(b) The new E.C.A. is to be appointed by the Giunta Comunale. But the Giunta itself has no legal existence as yet. Our decree will have to be promulgated first.

(c) The new E.C.As. will be larger than the Giunta as the following table shows:-

Population.	Size of G.C.	Size of E.C.A. under draft Decree.	Size of E.C.A. as proposed by Capt. S. (see #35A on file)
Up to 5,000.	2	5	5
Up to 30,000.	2	9	7
Up to 60,000	4	13	9
Up to 250,000.	8	13	9
Over 250,000.	10	13	9

3850

4. I consider that the fascist law of 1937 which established the E.C.A. should be carefully studied in this Sub-Commission before any comment is made to Public Health Sub-Commission.

C.G.R.WILLIAMS, Captain.
Assistant Executive Officer.

CCRW/pgw.

Please do so carefully together with suggested draft minute for reply

— memo on PH file 3051 deals with this situation — Capt Silveira will arrange conference with us. R R Temple Capt.

Interior 3403

36

1077

HEADQUARTERS
ALLIED CONTROL COMMISSION
R.C. & M.G. Section
APO 394

Ref/237/9/CA. 1. May 1944.

EXECUTIVE MEMORANDUM)
:
NUMBER 55)

CONTROL OF RABIES

1. This supersedes Executive Memorandum No.3, dated 7 February 1944.

2. There exists on the Italian Mainland a high incidence of Rabies in dogs. The immediate danger to both military and civilian personnel may be serious. The spread of this disease must, therefore, be arrested.

3. The Italian Minister of the Interior has issued an instructive to all Prefetti under the jurisdiction of the Italian Government as in Appendix "A" attached.

4. The Prefetti in AMG Provinces will be instructed to take immediate action regarding this most urgent problem.

5. All communes in AMG territory will be treated as infected areas. Stray dogs will be handled as follows :

(a) All dogs other than those on a leash or with muzzle, found circulating, will be impounded and destroyed.

(b) The provisions of the existing Italian decrees relating to the registration of dogs will be made effective.

(c) Veterinarians will be empowered and instructed to employ dog catchers and provide and supervise a suitable premises for impounding and destroying of dogs.

6. Regional Commissioners will insure that the authorities named act promptly and with diligence in this matter. Monthly progress reports will in the future include a report covering action taken on this Memorandum.

H. S. LUSH, Major General
for Brigadier,

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M. S. LUSH,
Brigadier,
Executive Commissioner.

Incl.
Appendix "A".

DISTRIBUTION: AFHQ, MGS.
HQ. P.B.S.
HQ. A.A.I.
AMG Fifth Army
AMG Eighth Army
Regions I - VII
Dist "C"

APPENDIX "A".

EXTRACT FROM DECREES DATED 10 MAY 1914.

(Plizio Veterinaria E Vigil anza Zooiatrica (1939) Par.4 Rabies 24)

Art.48 - In every community the following regulations are to be observed:

(a) Dogs must be registered by the owners at the municipal office.

(b) In the streets and in any other public place dogs, when not on a leash, must be muzzled.

(c) Watch dogs can be kept without being muzzled only within the limits of the places which they are to guard, and sheep dogs and hunting dogs, when they are respectively utilized for the guarding of herds and hunting.

Art. 49 - Stray dogs, found without muzzle, must be caught and placed in a proper place of detention. After six days, if their owners have not claimed them, the seized dogs, with the exception of those mentioned in Articles 50 and 53, must be killed or turned over to any scientific institution, which may request them.

Art.50 - Any animal to be found suffering from rabies will be killed immediately and the corpse disposed of in the manner prescribed, skinning being prohibited. The place where the animal was found will be disinfected. All animals, bitten by another animal known or suspected to be suffering from rabies, will be killed or isolated under terms of Art.51. Dogs and cats which have bitten persons will whenever possible, be caught and placed under observation under the supervision of the local authorities, for a period of time required to enable the veterinarian to establish whether or not they are suffering from rabies.

Art.51 - Dogs, cats and other animals suspected of rabies and those bitten by animals suspected of rabies, if they are not killed, must be isolated, in suitable premises, at the owners expense, and kept under observation under the supervision of the veterinarian and the sanitation officials. Observation periods must be not less than four months for dogs and cats and two months for bovines, equines, pigs, sheep and goats. During the period of observation equines and bovines may be put to work providing measures are taken to prevent persons from becoming infected. Bovines, equines, pigs, sheep and goats under observation will not be removed without permission which may only be granted where the need is acute. Sanitation authorities will ensure that the prescribed period of observation is undergone.

Art.52 - Where an animal suspected of rabies dies or is killed the prescribed examination will be carried out.

Art.53 - In communes where cases of rabies have been found or where an infected dog has run free the following additional measures must be taken:

(b) In the streets and in any other public place dogs, when not on a leash, must be muzzled.

(c) Watch dogs can be kept without being muzzled only within the limits of the places which they are to guard, and sheep dogs and hunting dogs, when they are respectively utilized for the guarding of herds and hunting.

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Art.52 - When an animal suspected of rabies dies or is killed the prescribed examination will be carried out.

Art.53 - In communes where cases of rabies have been found or where an infected dog has run free the following additional measures must be taken:

(a) During the six weeks following discovery dogs, even if muzzled, cannot circulate unless led on a leash.

(b) Seized dogs will not be returned to their owners unless a favourable result is obtained from the period of observation prescribed in Art.51.

RESTRICTED

REAR HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394

Lt. Col. Spicer

(35)

3 May 1944

SUBJECT: Malaria

TO: All Personnel.

The following is extracted and republished from 94th Sub Area Routine Orders, dated 26 April 1944 for the information and guidance of all personnel of this headquarters.

"1. Malaria is one of the most important health problems in the Mediterranean theater of war. During the 1943 malaria season the disease seriously reduced the efficiency of all units that failed to take adequate anti-malaria precautions. Owing to the slackness on the part of officers and men alike, the Sicilian campaign was gravely handicapped by a high rate of malaria casualties. It is estimated that this rate rose to ten time the figure that would have occurred had orders been obeyed.

2. The whole of the mainland of Italy may be regarded as malarious in some degree. This Sub Area is divided at present into malarious and one highly malarious area. The extent of the highly malarious area is set out below:

3. Boundaries of Highly Malarious Area in 94 Sub Area:

NORTH. Road S. [illegible], E[illegible] (?) CONTURSI (H)
EAST, Easting grid line 0,00
SOUTH. Northing grid line [illegible].00
West, Easting grid line [illegible].70

4. Commanding Officers are reminded that they are responsible for the health of their men and that they will incur a grave responsibility should they neglect to enforce orders on the subject of malaria.

5. Basic Personal Anti-Malarial Precautions:

The following precautions will be taken by all ranks throughout the Sub Area wef 7 May 44:

(a) All ranks will sleep under mosquito, or sand fly nets. 6867
(b) All ranks will wear, between sunset and sunrise, long trousers and shirts that fit at the wrists and neck.
(c) Guards, and sentries on night duty, will apply anti-mosquito repellent to exposed portions of the body every four hours between sunset and sunrise.

6. Extra Personal Anti-Malaria Precautions:

The following additional precautions in Highly Malarious

SUBJECT: Malaria

TO: All Personnel.

The following is extracted and republished from 9th Sub Area Routine Orders, dated 25 April 1944 for the information and guidance of all personnel of this Headquarters.

"1. Malaria is one of the most important health problems in the Mediterranean Theatre of War. During the 1943 Italian season the disease seriously reduced the efficiency of all units that failed to take adequate anti-malaria precautions. Owing to the slackness on the part of officers and non-office, the fighting troops were severely handicapped by a high rate of malaria admissions. It is estimated that this rate rose to ten time the figure that would have resulted had orders been obeyed.

2. The whole of the mainland of Italy may be regarded as malarious in some degree. This Sub Area is divided, for present into malarious and highly malarious areas. The extent of the highly malarious area is set out below:

3. Boundaries of Highly Malarious Area in 9th Sub Area:

NAPLES, Road SORRENTO, EBOLI (E) CAMPAGNA (E)
E.EBOLI, Bearing path line 0.00
SOUTH, Northern grid line 11.00
West, Southern grid line 11.70

4. Commanding Officers are reminded that they are responsible for the health of their men and that they will incur a grave responsibility should they neglect to enforce orders on the subject of malaria.

5. Basic Personal Anti-Malarial Precautions:

The following precautions will be taken by all ranks throughout the Sub Area wef 7 May 44:

(a) All ranks will sleep under mosquito, or semi fly nets.
(b) All ranks will wear, between sunset and sunrise, long trousers and shirts fast round the wrists and neck.
(c) Guards, and others on night duty, will apply anti-mosquito repellent to exposed portions of the body every four hours between sunset and sunrise.

6. Extra Personal Anti-Malaria Precautions:

The following additional precautions in highly malarious areas in the Sub Area will be taken by all ranks wef 7 May 44:

(a) All ranks will take one tablet of Mepacrine daily.
(b) All ranks will wear, between sunset and sunrise, boots and anklets or puttees.
(c) All local habitations will be out of bounds between sunset and sunrise.

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7. Anti-Malarial Precautions in tents and Buildings

(a) All tents and occupied buildings will be sprayed with anti-mosquito spray once daily.
(b) In highly malarious areas, spraying of sleeping accommodation will take place twice daily, once in the morning and once in the evening, an hour before sunset.

8. Unit Orders:

OsC of all units will issue orders for carrying out the above precautions and will particularly ensure that the following items are properly covered in them;

(a) Nets. That regular and frequent inspections are carried out to see that nets are properly used and kept in good repair.
(b) Dress after dark. That the orders given are carried out AT ALL TIMES and no relaxation is permitted for any reason.
(c) Repellent lotion or ointment. That application of repellents is carried out under the supervision of an officer or NCO.
(d) Mepacrine. That a parade under an officer, or NCO, is held for taking mepacrine.
(e) Spraying of buildings and tents. That regular and frequent inspections are made to see that this is carried out.
(f) Officers. That anti-malaria orders are quite clearly made applicable to all officers, as well as other ranks.

9. Punishment:

OsC will treat disobedience of anti-malaria orders as a serious offence and will not hesitate to take disciplinary action against officers and other ranks in respect of any such disobedience."

By Command of Lieut General MASON MACFARLANE:

E. J. CHIOCCA
CWO, USA
Asst Adjutant

OFFICIAL:

E. J. Chiocca
E. J. CHIOCCA
CWO, USA
Asst Adjutant

DISTRIBUTION:

[illegible] examination will take place twice daily, once in the morning and once in the evening, an hour before sunset.

8. Unit Orders:

OC's of all units will issue orders for carrying out the above precautions and will more orderly ensure that the following items are properly covered in them:

(a) Nets: that regular and frequent inspections are carried out to see that nets are properly used and kept in good repair.

(b) Fatigue Parties: that the orders given are carried out at all times and no relaxation is permitted for any reason.

(c) Repellent Lotion or Ointment. That application of repellents is carried out under the supervision of an officer or NCO.

(d) Inspection. That a parade under an officer, or NCO, is held for taking inspection.

(e) Spraying of buildings and tents. That regular and frequent inspections are made to see that this is carried out.

(f) Officers. That anti-malaria orders are quite clearly made applicable to all officers, as well as other ranks.

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OsC will treat disobedience of anti-malaria orders as a serious offence and will not hesitate to take disciplinary action against officers and other ranks in respect of any such disobedience."

By Command of Lieut General M.SCOTT-MCNEILNE:

E. J. CHICCO.
CWO, RCL.
Asst Adjutant

OFFICIAL:

E. J. Chicco

E. J. CHICCO.
CWO, RCL.
Asst Adjutant

DISTRIBUTION:
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1/24

NEAR HEADQUARTERS
ALLIED CONTROL COMMISSION
INTERIOR SUB COMMISSION
APO 394

ACC/ 7/Int

30 April 1944

SUBJECT: Italian Doctors - Forward areas

TO : Public Health Sub-Commission

1. I have recently returned from a tour of 8th Army area in connection with work of this Sub-Commission.

2. During the course thereof, I attended a meeting of AMG Liaison officers, presided over by the DCAO.

3. One of the subjects discussed by LOs and the DCAO, referred to Italian doctors in forward areas. It was stated that an acute shortage existed and that certain of the areas and communes affected were suffering accordingly.

4. At the request of the CAO, I promised to convey these facts to you for your attention and to express the DCAO's hope that steps can be taken to improve the condition.

R. G. B. SPICER
Lt Colonel
Director
Interior Sub-Commission

3803

938

Copy to:
DCAO, AMG, HQ 8th Army
(through RC & MG Section)

Rare 6924

1012

HEADQUARTERS
ALLIED CONTROL COMMISSION
P.C. & M.G. Section
APO 394

Ref/251/35/CA. 25 April 1944.

EXECUTIVE MEMORANDUM)
:
NUMBER 54)

MALARIA CONTROL.

1. Prevention of Malaria in this theatre is of fundamental importance to Allied Forces. Experiences of 1943 in Sicily and the notorious history of areas now occupied or which lie immediately ahead, indicate clearly that the Armies will sustain serious loss of manpower if malaria is not effectively controlled. All signs point to a season of unusually high density of malaria mosquitoes and of civilian carriers of the parasite - the two main factors in the transmission of malaria.

2. Protection of armed forces from malaria involves both intra and extra-cantonment control programmes. Army regulations, whether British, French, or American, clearly make it the duty of commanding officers of units, great or small, to take adequate steps for protection against malaria. Within and immediately around a military installation malaria prophylaxis is definitely a command function. In many areas there are civil malaria control problems contiguous to military camps. Allied Control Commission will provide as much assistance as possible to all cases where civilian malaria or malariogenic conditions are a menace to Allied military encampments.

3. A Malaria Control Branch has been established in the Public Health Sub-Commission of Allied Control Commission. It has the following functions:

(a) To assist the Army Senior Civil Affairs Officers and Regional Commissioners of Allied Control Commission in restoring and implementing civilian malaria control agencies, and in directing their activities.

(b) To assist in coordinating civil and military malaria control activities.

(c) To carry out essential malaria control field tests in cooperation with the Allied Forces.

4. The Malaria Control Branch is located in Room 5, Regie Poste Building, Naples. Mail should be addressed to H.Q. Allied Control Commission, Public Health Sub-Commission, Malaria Control Branch, APO 394. The staff of the Branch is as follows :

3885

Chief Colonel Paul F. Russell, MC.

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Chief	Colonel Paul F. Russell, MC.
Medical Officer	Captain V.F. Tuzio, MC.
Malaria Engineer	Captain T.D. Anderson, Sn.C.
Entomologist	1st Lieut.M.A.Manzelli, Sn.C.

5. Direct communication on matters pertaining to malaria control is authorised between the Chief of the Malaria Control Branch, Regional Public Health Officers and Deputy Directors of Public Health, AMG 5th and 8th Armies.

6. Regional and Army Public Health Officers, Allied Control Commission will send to the Chief, Malaria Control Branch, on the first of each month, beginning 1 May 1944, a brief report listing location, type, and budget of local civilian malaria control work in progress, equipment, supply, labor, and transportation conditions, spleen or parasite surveys, malaria incidence figures; and any pertinent comments on the malaria situation. Sketch and spot maps should be included when feasible. The first report should list active Comitato Provinciale Antimalarico, giving names and official titles of the members.

7. In each province where there is a malaria problem there will usually be found a Comitato Provinciale Antimalarico. If this committee has been dispersed, it should be reconstituted as soon as possible. The malaria committee should be advised that, if it has not already done so, it should immediately prepare malaria control plans and budgets along the general lines of preceding years. In Regions I, II, VI and VII these malaria control budgets will be submitted (through High Commissioners Sicily and Sardinia in Regions I and VI respectively) to the finance office of the Provincial Government for approval. Thence the approved budgets should be forwarded to the Minister of the Interior of the Italian Government. When approved by the Minister of the Interior, funds will be remitted to the Provincial Office. In Regions III, IV and V approved budgets will be forwarded from the provincial finance office to the Regional Finance Officer, Allied Control Commission, who, if he approves will establish credits at the provincial Banca d'Italia. Since the malaria season has already begun, prompt consideration will be given to such plans and budget proposals.

8. So far as Allied Control Commission supplies are concerned, malaria control will be based on drainage, maintenance of drainage canals, canalizing of streams, regulation of water, filling, oiling, and the proper treatment of clinical cases. Excepting as civilian supplies are available from last year's stocks, no Paris Green is obtainable by Allied Control Commission for the control of civil malaria. Oil in reasonable amounts is available for larvicidding. Sprayers for oil are in limited supply but brush oiling may be substituted for spraying in most cases, if necessary. Considerable ingenuity will be required in regard to transport where motor vehicles are not available on requisition. Full use must be made of mules, horses, donkeys and oxen. In many cases workers will have to walk to and from their work. Where vehicles are available but there is lack of gasoline, applications for gasoline will be favourably considered. Where the work is directly associated with military installations it may be possible to obtain transport assistance from the Commanding Officer.

9. Upon approval of plans and budgets, it is possible to obtain oil from the nearest agency of the Comitato Italiano Petroli on requisitions approved by the Provincial Officer or C.A.C. Transport will have to be provided by the Comitato Provinciale Antimalarico or the local requisitioning agency. The Medical Supply Branch, Allied Control Commission will send to each Regional Headquarters the provincial quota of sprayers. These may be obtained by the local malaria control agency from Regional Headquarters, Allied Control Commission.

10. Quinine is not available to Allied Control Commission for distribution but supplies of atabrine/mepacrine for therapeutic use have been provided. Each Regional Public Health Officer, Allied Control Commission, will requisition from the Medical Supply Branch, Public Health Sub-Commission, Allied Control Commission, the amount of atabrine/mepacrine required by his regional provinces. The Supply Branch will send the desired amount to the Regional Headquarters from which provincial distribution will be made to the local malaria committee on requisition.

Due to the inadequate supply, suppressive prophylactic use of atabrine/ mepacrine can not be recommended for civilians. Every effort should be made (a) to facilitate distribution of atabrine/mepacrine to civil agencies for treat- [illegible] and (b) to check prophylactic use of atabrine/mepacrine among

be remitted to the Provincial Office. In Regions III, IV and V approved budgets will be forwarded from the provincial finance office to the Regional Finance Officer, Allied Control Commission, who, if he approves will establish credits at the provincial Banca d'Italia. Since the malaria season has already begun, prompt consideration will be given to such plans and budget proposals.

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9. Upon approval of plans and budgets, it is possible to obtain oil from the nearest agency of the Comitato Italiano Petroli on requisitions approved by the Provincial Officer or C.A.O. Transport will have to be provided by the Comitato Provinciale Antimalarico or the local requisitioning agency. The Medical Supply Branch, Allied Control Commission will send to each Regional Headquarters the provincial quota of sprayers. These may be obtained by the local malaria control agency from Regional Headquarters, Allied Control Commission.

10. Quinine is not available to Allied Control Commission for distribution but supplies of atabrine/mepacrine for therapeutic use have been provided. Each Regional Public Health Officer, Allied Control Commission, will requisition from the Medical Supply Branch, Public Health Sub-Commission, Allied Control Commission, the amount of atabrine/mepacrine required by his regional provinces. The Supply Branch will send the desired amount to the Regional Headquarters from which provincial distribution will be made to the local malaria committee on requisition.

Due to the inadequate supply, suppressive prophylactic use of atabrine/mepacrine can not be recommended for civilians. Every effort should be made (a) to facilitate distribution of atabrine/mepacrine to civil agencies for treatment of malaria, and (b) to check prophylactic use of atabrine/mepacrine among civilians unless they are engaged in operational war work or have been ordered by military authority to take it. In the latter case atabrine/mepacrine will be supplied from military sources.

11. Finally the importance of malaria control is again stressed. It is a general administrative problem in which every officer in the Region must play his part. Regional Commissioners, Provincial Commissioners, and all Allied Control Commission Health Officers must do everything in their power to stimulate and facilitate civilian malaria control programmes. The highest priority will be given to work in the vicinity of Allied military installations.

M S Lush

H. S. LUSH,

670

7/52

REAR HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394
Public Health Sub-Commission

ACC/3635/PH 26 March 1944

SUBJECT: - Civilians called up for Military Service.

TO : - Provincial Commissioner, Potenza.

Lt. Col. Spicer has passed your letter PP/A dated 16 March 1944 together with attached letter from Major Pollitt to this Sub-Commission.

For the past ten days or more, this office has urged Dr. Vezzoso, the Italian Director of Public Health, to make every effort to secure the release of Dr. Lapolla from military service.

Dr. Vezzoso, who is personally acquainted with Dr. Lapolla and is fully alive to his valuable services, has done everything in his power to retain Dr. Lapolla at Potenza.

This office is informed that despite Dr. Vezzoso's efforts, Dr. Lapolla is to report to the military authorities at Bari and that his release from or retention in the army rests entirely with them. It is understood that they are in possession of the facts as stated by Dr. Vezzoso.

Should Dr. Lapolla not be released, Dr. Vezzoso will make every effort to obtain a substitute.

G. S. Parkinson
Brig
G. S. PARKINSON, Brigadier
Director, Public Health Sub-Commission

PH/GSP/JD

Copy to: Interior Sub-Commission
" " : HQ. Region II.

3884

624

7/31

HEADQUARTERS
ALLIED CONTROL COMMISSION
R.C. & H.C. Section
APO 394

Ref/361/10/CA. 19 March 1944.

SUBJECT: British and American Red Cross.

TO : All Regional Commissioners & S.C.A.Os. 5 and 8 Armies.

1. For the guidance and direction of all officers of the Allied Control Commission, this directive sets forth the relationship between ACC and the American and British Red Cross Societies.

2. The assistance of the American and British Red Cross Societies is on a voluntary basis. Both groups are distributing clothing through indigenous welfare agencies, with the aid of the Italian Red Cross. The Red Cross Societies have accepted the responsibility of supervising distribution and performing such welfare activities among the needy populace as ACC may direct. Red Cross participation is of a temporary nature, since it is desired to have local agencies ready to assume the responsibility of caring for themselves in a very short time.

3. Red Cross personnel, assigned to assist ACC in the discharge of their responsibilities are not to be placed in charge of any set program. Red Cross personnel are under the direction of the Allied officers to whom they are assigned and will take orders within the framework of Red Cross policy, reporting regularly to the officer responsible for their work as to the progress or completion of the assignment.

4. One member of the Red Cross staff in each Region will be designated by the Red Cross Director as Regional Supervisor. Through him submissions of reports to Red Cross office will be made. It is understood that the contents of such reports will have been discussed with ACC officers before the Supervisor submits them to Red Cross Headquarters. The Supervisor will also have the responsibility for clearing with ACC officers the details of service in his Region. A member of the Red Cross staff attached to the Italian Refugee Branch, or to the Displaced Persons Sub-Commission, will be designated by the Red Cross Director to undertake similar duties to those of the Regional Supervisors.

5. Red Cross workers will participate in the following : 3883

(a) Joint preliminary planning, for present and future relief operations, in cooperation with ACC.

(b) Surveys of relief needs in cooperation with divisions of ACC (particularly the Sub-Commissions of Public Health and Welfare and Displaced Persons, and the Italian Refugee Branch of R.C. & H.C.

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2. The assistance of the American and British Red Cross Societies is on a voluntary basis. Both groups are distributing clothing through indigenous welfare agencies, with the aid of the Italian Red Cross. The Red Cross Societies have accepted the responsibility of supervising distribution and performing such welfare activities among the needy populace as ACC may direct. Red Cross participation is of a temporary nature, since it is desired to have local agencies ready to assume the responsibility of caring for themselves in a very short time.

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5. Red Cross workers will participate in the following : 3833

(a) Joint preliminary planning, for present and future relief operations, in cooperation with ACC.

(b) Surveys of relief needs in cooperation with divisions of ACC (particularly the Sub-Commissions of Public Health and Welfare and Displaced Persons, and the Italian Refugee Branch of R.C. & M.G. Section).

(c) Assisting and advising with ACC on specialized relief projects, particularly with women and children and civilian hospital service, in cooperation with the other activities of ACC.

(d) Supplying advisory services to ACC on matters pertaining to relief and Red Cross activities which may be of value to the overal administration of the territory under occupation.

(e) Liaison with the Italian Red Cross and/or other indigenous local agencies in the planning for use of their personnel, facilities, and supplies in present and future operations.

6. For the Red Cross to exercise properly these functions, ACC accepts the responsibility for :

(a) Billeting and messing ARC and NRC War Relief Staff on assignment.

(b) Transportation and travel orders of Red Cross Staff, if necessary.

(c) Office space, clerical aid and other assistance as necessary for the proper prosecution of their duties to the extent it is possible for ACC to provide.

NORMAN E. FISKE
Colonel, Cavalry,
Deputy Executive
Commissioner.

DISTRIBUTION:
Distribution "A" (less Group 3)
British and American War Relief Board.

7/25

NEAR HEADQUARTERS
ALLIED CONTROL COMMISSION
INTERIOR SUB COMMISSION
APO 394

ACC/7/Int

1 March 1944

SUBJECT: Welfare Function of Public Health Sub-Commission

TO : Public Health Sub-Commission

1. Reference your letter ACC/3032/PH of 21 February. I append a note regarding the functions of this Sub-Commission which I think might usefully be incorporated in the Memorandum you propose to issue.

3802

R. B. SPICER
Lt Colonel
Acting Director
Interior Sub-Commission

Incl: as above

203

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INTERIOR SUB-COMMISSION

1. The principal function of this Sub-Commission concerns local government and to ensure that an efficient system of Provincial and Communal administration is conducted.

2. The above authorities have the duty of attending to the interests and well-being of the inhabitants of their respective areas and (if such duty is performed properly) their activities are bound to touch upon and include Public Health and welfare matters (an example appears in paragraph B 1, where the Sindaco heads the relief agency named).

3. Cases of inefficiency or lack of energetic support from the administration or its officials should be reported by Public Health Officers in the field to the PC, Provincial Commissioner or Officer.

[illegible]

203

7/23

REAR HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394
Public Health Sub-Commission

ACC/3082/PH 21 February 1944

SUBJECT: - Welfare Functions of the Sub-Commission of Public Health.

To : - Administrative Directorate.
Food Sub-Commission.
Labor Sub-Commission.
Displaced Persons Sub-Commission.
Refugees Sub-Commission.
Interior Sub-Commission.
Public Safety Sub-Commission.
Legal Sub-Commission.

1. This Sub-Commission proposes to issue a memorandum outlining the welfare functions for which it is responsible. The memorandum when complete, will be for the use of all other Sub-Commissions and for Regional Public Health and Welfare Officers and C.A.C.'s generally. The purpose of the memorandum is to clarify the lines of communication and responsibility and also to assist Regional Public Health and Welfare Officers in obtaining uniformity of action as between Regions.

2. As a number of other Sub-Commissions cover activities closely allied with Welfare, it is desired to include in the memorandum a description of those related functions and the Italian agencies performing them. It will be of assistance if the interested Sub-Commissions will themselves prepare these statements for inclusion in the memorandum.

3. There is inclosed a skeleton draft of the proposed memorandum. Such comments as may be included concerning your Sub-Commission are not considered to be either final or official. They are based on former understandings or preliminary discussions and are used only to indicate the type of information desired from your Sub-Commission. A complete description of your Sub-Commission is not necessary. What is needed is a statement of those matters which are allied to Welfare activities and a description of the existing Italian agencies performing them.

3880

4. We would appreciate a draft of the material to be inserted concerning your Sub-Commission, at your earliest convenience.

F. S. Parkinson
A.C.

B. S. PARKINSON, Brigadier
Director, Public Health Sub-Commission.

PH/JCH/Ja

1 Inclosure
Copy of Draft on Agencies Responsible for Welfare & Related Functions.

DRAFT

7/22

DRAFT

ALLIED CONTROL COMMISSION
AFO 394
Public Health Sub-Commission

SUBJECT: - Agencies Responsible for Welfare & Related Functions.

TO :

1. PUBLIC RELIEF:
(Generally - "that assistance given purely on the basis of need and not on the basis of prior contributions paid by the recipient or his employer to a fund for his benefit".)

A. - Food Sub-Commission:
(a) The obtaining and rationing of food for all the population is (with the assistance of certain other Sub-Commissions) under the jurisdiction of the Food Sub-Commission. This Sub-Commission - (request insert of the Food Sub-Commission a brief description of the responsibilities of the Sub-Commission concerning "food for all civilians", the description particularly designed to indicate to Regional Welfare and Public Health officers from what source they can obtain information on types and amounts of food to be available, prices, etc. and to whom they can give information if they find that in a given situation food is not reaching recipients of relief).

(b) The Food Sub-Commission also obtains limited amounts, such as cheese, milk, canned goods, etc., which are available to certain sections of the population - refugees camps, hospitals, institutions for the aged, children, etc. Regional Public Health and Welfare Officers will be informed of the stocks on hand by the Public Health Sub-Commission. Regional Public Health and Welfare Officers should at all times make known to Public Health Sub-Commission its needs and the evidence supporting those needs so that requests can be made by Public Health Sub-Commission to draw on the stocks of special foods and also in order that the Public Health Sub-Commission can give the Food Sub-Commission information on which to estimate future requirements.

B. - Public Health Sub-Commission:
(a) The Public Health Sub-Commission through its Welfare Sub-Commission works with those Italian agencies whose functions involve the assistance to civilians already established in a community (see para. 1.(c) on displaced persons Sub-Commission and para. 1.(d) on refugees Sub-Commission) who have no other means of support. For that portion of the population who are unable to obtain food because of lack of income even though food as such is available in the community, assistance is, where practicable, given in cash. This operation and the Italian agencies involved are in the/ primarily a responsibility of Public Health Sub-Commission. The larger Italian agencies involved in this work and to which the Public Health Sub-Commission responsibility extends are:

1. Ente Comunale di Assistenza.
A relief agency, operating in every commune. It is headed by the Sindaco, but receives its funds from the National Govern-

38 and

(a) The obtaining and retaining of food for all the population is (with the assistance of certain other Sub-Commissions) under the jurisdiction of the Food Sub-Commission. This Sub-Commission - (request insert of the Food Sub-Commission a brief description of the responsibilities of the Sub-Commission concerning "food for all civilians", the description particularly designed to indicate to regional welfare and public health officers from that source they can obtain information on types and amounts of food to be available, prices, etc. and to whom they can give information if they find that in a given situation food is not reaching recipients of relief).

(b) The Food Sub-Commission also obtains limited amounts, such as cheese, milk, canned goods, etc., which are available to certain sections of the population - refugee camps, hospitals, institutions for the aged, children, etc. Regional Public Health and Welfare Officers will be informed of the stocks on hand by the Public Health Sub-Commission. Regional Public Health and Welfare Officers should at all times make known to Public Health Sub-Commission its needs and the evidence supporting these needs so that requests can be made by Public Health Sub-Commission to draw on the stocks of special foods and also in order that the Public Health Sub-Commission can give the Food Sub-Commission information on which to estimate future requirements.

B. - Public Health Sub-Commission:

(a) The Public Health Sub-Commission through its Welfare Sub-Commission works with those Italian agencies whose functions involve the assistance to civilians already established in a community (see Para. 1 c) or Displaced Persons Sub-Commission and Para. 1 (f) on Refugee Sub-Commission) who have no other means of support. For that portion of the population who are unable to obtain food because of lack of income even though food as such is available in the community, as is the case in, where practicable, given in cash. This operation and the Italian agencies involved are in no/ no primarily a responsibility of Public Health Sub-Commission. The larger Italian agencies involved in this work and to whom the Public Health Sub-Commission responsibility extends are:

1. Ente Comunale di Assistenza.
   A relief agency, operating in every comune. It is headed by the Sindaco, but receives its funds from the National Government. The following are examples of the forms of aid usually extended by it:
   Orders on vendors for food, or the operation of soup kitchens.
   Aid in cash, either continuously, or subject to re-application each time aid is desired.
   Aid to refugees from other parts of Italy, or from Italian colonies.
   Aid is extended to persons established in Comune by the Italian Government branch of the A.C. and P.W. section.
   Aid to transients and the homeless.
   Aid to persons to received money from relatives in foreign countries.
   Advances to persons who are not to receive indemnification for destruction of personal property by enemy action.

2. Provincial Welfare Department.
   Organized in Sicily to supervise the operations of family welfare and child welfare activities in the communes, to establish standards of care, to inspect and make recommendations, and to

supervise the use of funds allotted to the communes for these purposes. The Provincial Welfare Department is responsible to the Prefect.

3. Soccorso Militare.

A communal agency, which certifies for payment persons in need who are entirely dependent upon men now serving in the Italian Army, exclusive of officers. Payment is usually made through the Post Office. It is understood funds come from the Italian Minister of the Interior. This agency is not operating in Sicily.

4. Distretto Militare.

Operates with funds from, and under the Italian Ministry of War, makes payments to the families of officers, "sotto-officiale" and prisoners of war. These payments are charges against the pay of the individual and are not paid on a "needs" basis. The activity of the Distretto Militare is in the nature of an allotment and not relief based on need.

5. Opera Nazionale fra Mutilati ed Invalidi di Guerra.

A national organization for incapacitated war veterans. Some specialized medical care and orthopedic appliances are made available, efforts are made to find employment for persons of limited employ ability, and small sums of money may be given. The National Italian Government supplied funds. Supervision is exercised through a national headquarters. Applications usually handled by unpaid workers in the communes.

6. Associazione Nazionale delle Famiglie dei Caduti in Guerra. 3813

A national organization serving chiefly the families of those killed in war. Aid is given families in the obtaining of pensions, and small cash contributions may be given. The Italian National Government normally supplies the funds.

7. Opera Nazionale per gli Orfani di Guerra.

A national association, providing scholarships and funds for the education of war orphans. It also renders social services arranging placement and sometimes contributing to the support of orphans in institutions. Funds are normally supplied by the National Italian Government.

(Request that Regional Public Health and Welfare Officers add any already available information regarding these agencies as to amount of benefits in the particular region and as to whether these agencies or any other major agencies, not listed, are functioning in the region.)

C. Displaced Persons Sub-Commission.

Request issued by Displaced Persons Sub-Commission of a description of the classes of people and methods of handling, including such housing, feeding, clothing, etc. as is performed by the Displaced Persons Sub-Commission and the Italian Agencies involved. Also statement of the point at which the Public Health Sub-Commission is expected to provide for these people, which as we understand it, has in the past been, that displaced persons living or legally established in communes

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D. Refugees Branch of A.C. and C.G. Section.
Request insert by Refugees Branch of A.C. and C.G. Section of a description of the classes of people and methods of handling, including such housing, feeding, clothing etc. as is performed by the Refugee Branch and the Italian agencies involved. Also include statement of the point at which, the Public Health Sub-Commission is expected to provide for these people, which as we understand it, has in the past been, that Italian Refugees living or finally established in the communes (not in camps or congregate shelters) are at that point assisted through the A.C.C. which in turn is in A.C.C./A.M.G. responsibility of Public Health Sub-Commission.

2. ASSISTANCE IN THE NATURE OF INSURANCE, WAGE SUBSTITUTES, ETC.

A. Labor sub-Commission.

The Labor Sub-Commission works with those Italian agencies where benefits or assistance arise out of prior contributions by the employee, employer or where the benefits are in the nature of a wage substitute. Generally, these agencies are under the jurisdiction of the Italian Ministry of Labor, Industry and Commerce. The larger Italian agencies involved in this work are:

1. Istituto Nazionale della Previdenza Sociale.
This institute administers some social insurances, supported by contributions from workers or employers.
Pensions for invalidity and old age.
Care of tuberculosis persons, including medical and institutional care, as well as limited assistance to the families of these persons.
Unemployment insurance.
Loans to those contemplating marriage.
Cash supplement to wages, based upon size of family.

2. Istituto Nazionale per l'Assicurazione contro gli Infortuni.
This institute provides assistance for employees injured in industrial accidents and occupational diseases. It is supported by employer contribution. Typical benefits provided are:
Cash indemnity and medical, surgical and hospital care to injured or diseased.
Cash grant to the family of a deceased to cover immediate funeral expenses.
A pension to the family of a deceased.
Pensions to the totally disable.
Financial aid and educational opportunities for orphans of covered workers.

3. Istituto Nazionale Assistenza Malattie ai Lavoratori.
This agency, supported by contributions of the employer and the employee provides:
Daily compensation during sickness.
Medical and surgical care to the insured.
Medical care to other members of the insured's family.
Aid to cover special situations, and funeral expenses.
Grants at child birth.

(Request Labor sub-Commission develop this list both as to description of function of agencies, amount of benefits, whether they operate in all provinces and suggested methods of clearance between public welfare agencies and these Labor agencies on individual cases. Also request any important agencies omitted in this list be added with appropriate descriptions.)

3. INSTITUTIONS FOR THE AGED, THE DESTITUTE AND OF CHILDREN.

A. Public Health sub-Commission.

The Public Health sub-Commission through its Welfare Sub- section covers institutions for the aged, the destitute and for children (except correctional or penal) when these institutions are supported in whole or in part by public funds. Due to the complexity and number of institutions of this character and to the fact that few of them are established on a national basis, no attempt at listing them by name or function is contemplated in this memorandum.

38 67

care, as well as limited assistance to the families of these persons.
Unemployment insurance.
Loans to those contemplating marriage.
Cash supplement to wages, based upon size of family.

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Financial aid and educational opportunities for orphans of covered workers.

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This agency, supported by contributions of the employer and the employee provides:
Daily compensation during sickness.
Medical and surgical care to the insured.
Medical care to other members of the insured's family.
Aid to cover special situations, and funeral expenses.
Grants at child birth.

(Request Labor Sub-Commission develop this list both as to description of functions of agencies, amount of benefits, whether they operate in all provinces and suggested methods of clearance between public welfare agencies and these labor agencies on individual cases. Also request any important agencies omitted in this list be added with appropriate descriptions.)

3. INSTITUTIONS FOR THE AGED, THE DEFECTIVE AND DEPENDENT CHILDREN.
A. Public Health Sub-Commission.
The Public Health Sub-Commission through its Welfare Sub-Section covers institutions for the aged, the destitute and for children (except correctional or penal) when those institutions are supported in whole or in part by public funds. Due to the complexity and number of institutions of this character and to the fact that few of them are established on a national basis, no attempt at listing them by name or function is contemplated in this memorandum.

Request Regional Public Health and Welfare Officers expression of opinion as to whether a listing of these institutions should be attempted and if it is desired, that be listed, such pertinent information as is available in the Region or desired from other Regions.

B. Public Safety Sub-Commission.
Correctional and penal institutions for children are under the jurisdiction of Public Safety Sub-Commission.
(Request Public Safety Sub-Commission insert description of the functions on this subject.)

4. PRIVATE WELFARE AGENCIES.
A. Allied Red Cross.
(Request insert of functions performed and services available to the civilian population by the Allied Red Cross).

B. Associazione San Vincenzo di Paola.
Public Health Sub-Commission is requesting an official statement from International Red Cross, Italian Red Cross and the Associazione San Vincenzo

di Paolo as to the functions these organizations feel they are able to fulfill. These states as when obtained will be incorporated in this case.

5. GUERRILLAS AND INTERNATIONAL REFUGEES.

A. Public Safety Sub-Commission.

Requests as to the whereabouts, safety and condition of civilians in Italy are handled by the Public Safety Sub-Commission through the Carabinieri. Such requests should be referred to Public Safety officers.

(Request Public Safety Sub-Commission comment on c is statement.)

B. POW and Internees and Italian Soldiers on Active Duty in Allied Occupied Territory.

(Public Health Sub-Commission has requested information from the Administrative Directorate on the agencies responsible for clearance of information on the above questions).

6. CHILD WELFARE.

A. Public Health Sub-Commission.

The majority of the children's and youth organizations in Italy had strong political objectives and are not now operating. The necessity for the establishment of some governmental agency to deal with welfare problems peculiar to children has been recognized in the establishment by Allied action of child welfare sections in the Provincial Welfare Departments in Sicily. The pre-occupation Italian children's organizations now in existence are:

Opera Nazionale per la Maternita ed Infancia.

Operates a general program of maternal and child health service which varies considerably in its emphasis between provinces. The following may be provided:

Consultation services to pregnant mothers.
Meals to pregnant women or nursing mothers, either in central locations or by means of orders for food.
Emergency care in maternity institutions.
For children, admission to pediatric clinics, provision of extra foods and milk, operation of day nurseries and nursery schools.

Supervision is through a national headquarters, nearly unsupplied by the national government.

3876

(Request information from Regional Public Health and Welfare Officers as to any other region-wide organization in this field.)

(Public Health Sub-Commission has requested information from the Administrative Directorate on the agencies responsible for clearance of information on the above questions).

6. CHILD WELFARE.

A. Public Health Sub-Commission.

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Operates a general program of maternal and child health service which varies considerably in its emphasis between provinces. The following may be provided:

Consultation services to pregnant mothers.

Meals to pregnant women or nursing mothers, either in central locations or by means of orders for food.

Temporary care in maternity institutions.

For children, admission to pediatric clinics, provision of extra foods and milk, operation of day nurseries and nursery schools.

Supervision is through a national headquarters, money issupplied by the national government.

3873

(Request information from Regional Public Health and Welfare Officers as to any other Region-wide organization in this field.)

150

Interior 1449

7/18

HEADQUARTERS
ALLIED CONTROL COMMISSION
APO 394

Ref/15/2/3A

7 February 1944.

EXECUTIVE MEMORANDUM)

NUMBER 3)

CONTROL OF RABIES

1. It has been reported that a comparatively high incidence of rabies exists in dogs and cats on the Italian mainland. The consequences to both the civil and military populations may be serious. The spread of this disease must therefore be arrested.

2. Immediate steps must be taken to make effective the provisions of the existing Italian decrees relating to the registration of dogs, and the measures to be taken in the case of an outbreak of rabies. The main provisions of the decrees are reproduced for information, (Schedule 'A').

3. It is the duty of the Veterinarie Provinciale, assisted by the communal veterinarians and the police agencies, to enforce the provisions of these decrees.

4. Regional Commissioners will ensure that the authorities named act promptly and with diligence in this matter. Veterinarians will be empowered to employ dog catchers to assist them in the same manner as they did under the Italian Government.

3873

5. Special attention will be given in the communes of:

Salerno	Cosenza	Catanzaro
Naples	Matera	Reggio

6. Monthly progress reports will in future include a report covering action taken on this memorandum.

By Command of LIEUT. GENERAL MACFARLANE:

M. S. LUSH,
Brigadier,
Executive Commissioner,
Allied Control Commission

DISTRIBUTION:

AFHQ, MGS
HQ ACMF
HQ AMG FIFTH ARMY
HQ AMG EIGHTH ARMY
HQ REGION I
HQ REGION II
HQ REGION III
HQ REGION IV
HQ REGION V
HQ REGION VI
and Dist. List "C"

SCHEDULE "A"

CONTROL OF RABIES

Extract from Decree dated 30 May 1934.

(Police Veterinaire & Vigilance Zootechnique (1939) Par. 2 Rabies 2b).

Art. 49 - In every community the following regulations are to be observed:-

(a) Dogs must be registered by the owners at the municipal office.

(b) In the streets and in any other public place dogs, when not on a leash must be muzzled.

(c) Watch dogs can be kept without being muzzled only within the limits of the places which they are to guard, and sheep dogs and hunting dogs, when they are respectively utilized for the guarding of herds and hunting.

Art. 50 - Stray dogs, found without a muzzle, must be caught and placed in a proper place of detendion. After 6 days, if their owners have not claimed them, the seized dogs, with the exception of those mentioned in Articles 52 & 53, must be killed or turned over to any scientific institution, which may request them.

Art. 51 - Any animal found to be suffering from rabies will be killed immediately and the corpse disposed of in the manner prescribed, skinning being prohibited. The place where the animal was found will be disinfected. All animals, bitten by another animal known or suspected to be suffering from rabies, will be killed or isolated under terms of Art. 53. Dogs and cats which have bitten persons will, whenever possible, be caught and placed under observation under the supervision of the local authorities, for a period of time considered to enable the veterinarian to establish whether or not they are suffering from rabies.

3874

Art. 52 - Dogs, cats and other animals suspected of rabies and which have been by officials suspected of rabies, if they are not killed, must be isolated, in suitable premises, at the owner's expense, and kept under observation under the supervision of the veterinarian and the sanitation official. Observation periods must be not less than four months for dogs and cats and two months for bovines, equines, pigs, sheep and goats. During the period of observation equines and bovines may be put to work providing measures are taken to prevent persons from contracting infection. Bovines, equines, pigs, sheep and goats under observation will not be removed without permission which may only be granted where the need is acute. Sanitation authorities will ensure that the prescribed period of observation is undergone.

Art. 53 - When an animal suspected of rabies dies or is killed the prescribed examination will be carried out.

Art. 53 - In community where cases of rabies have been found or where an infected dog has run free the following additional measures must be taken:-

(a) During the six weeks following discovery, dogs, even if muzzled, cannot circulate unless led on leash.

(b) Seized dogs will not be returned to their owners unless a favourable result is obtained from the period of observation prescribed in Art. 52.

HEADQUARTERS
ALLIED MILITARY GOVERNMENT
APO 512

7/17

AMG/440.

15 January 1944

SUBJECT: Central Medical Supply Depot and
Regional Medical Supply Depots

TO : Public Health Subcommission

1. Pursuant to directive from the Central Economic Committee, the Public Health Subcommission is authorized and directed to staff and operate a Central Medical Supply Depot and such Regional Medical Supply Depots as may be needed from time to time for the warehousing, accounting for and distribution of medical supplies for the civilian population in Italy.

2. Accordingly, the Public Health Subcommission will have the responsibility for the following functions:

a. The establishment and maintenance of a system to handle the receipt and proper warehousing of all medical supplies, including all items listed in the list of "Medical Supplies for Occupied Areas" and such other medical items as may be received in Italy for ultimate or immediate civilian use.

b. The accounting for all such supplies until delivered to Regional Depots and the supervision and control of the payment for the same.

c. Supervision, through such Regional or Provincial or other warehouses or control points as may from time to time be deemed by it as necessary of such medical supplies to the first Italian civilian users for whom they areintended.

3873

d. The preparation and maintenance of proper records and inventories of all such medical supplies on hand and awaiting distribution.

e. The maintenance of an appropriate control system in the various Regional warehouses and the Central warehouse.

f. Transportation of such medical supplies from the time they reach the Central Depot to the Regional Depots established.

g. Submission to the Central Economic Committee of proper requisitions for CAD Medical items for the several AMG/ACC areas in Italy.

h. Submission to the Central Economic Committee of recommendations for the allocations of medical supplies as between the various Regions or other areas in occupied Italy.

3. The Central Economic Committee will maintain responsibility for the final allocations of medical supplies in occupied Italy.

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3873

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h. Submission to the Central Economic Committee of recommendations for the allocations of medical supplies as between the various Regions or other areas in occupied Italy.

3. The Central Economic Committee will maintain responsibility for the final allocations of medical supplies in occupied Italy.

4. Responsibility for the safeguarding, distribution, and payment of medical supplies within established AMG/ACC Regions, will be in accordance with directives to be promulgated by the Public Health Subcommission and the Finance Subcommission.

5. Prices of medical items will be established by the Central Economic Committee.

CHARLES M. SPOFFORD
Colonel, G.S.C.
D.C.C.A.O., AMG HQ

DISTRIBUTION:
"C"
Plus: Heads all Subcommissions
Central Economic Committee - 5
Regions I and II - 5 each
AMG 15th Army Group - 5
AG Files - 2

7/16

HEADQUARTERS
ALLIED MILITARY GOVERNMENT
APO 512
Public Health Sub-Commission

AMG/3010/PH

13 January 1944

SUBJECT: - Report on Field Trip, 7-12 January 1944.

TO : - Brigadier Parkinson, Director, Public Health Sub-Commission.

Trip was planned for conferences with HQ., ACC, Brindisi, BCAO #2, Director of Public Health & Welfare, 15th Army and others. There was some delay in getting around because of weather and road conditions.

The RCAO of Region 2 agreed to release Major Johnwick (Medical) effective January 17 for special venereal disease control assignment. Major Craig is not available for re-assignment at this time. This information was transmitted to HQ. with request that orders be issued for Major Johnwick as above.

Conferences were held at Brindisi with officials as follows:

1. Col. Edo Rossi, Chief Liaison Officer (Italian) and his assistant, Major Cappello.
2. Provincial Medical Officers at Brindisi for Conference
   - Dr. Giuseppe Misumarra (Brindisi)
   - " Salvatore Messina (Lecce)
   - " Cancellera Ettore (Bari)
   - " Ferdinando Martorana (Taranto)

3845

Dr. Sicca, Acting Director of Public Health for the Italian Government was not available for conference although he was "met" during the stay at Brindisi.

Medical supplies, laboratory equipment and supplies and hospital facilities were discussed at some length with the group and arrangements made for visit by Colonel Griffin, Lt. Col. Shields and Lt. Col. Debos to contact Colonel Lawrence (ACC) at Brindisi who would arrange definite conference dates for the group with each of the above Provincial Medical Officers in their respective provinces. The Italian officials were advised to get data regarding local needs for consideration by the above group at an early date and that the list should be limited to basic essentials. This material will be available by the time the group can arrange travel.

Fifty (50) cc of typhus vaccine should be sent to Col. G.F.Lawrence HQ. ACC at Brindisi for transmittal to Med. Prov. of Lecce at once.

Assistance should be provided each Medico Provinciale in setting up maritime quarantine programs.

13 January 1944

Large numbers of refugees were observed in the Foggia area and a smaller number north of Bari. In view of the unsettled status of displaced persons and refugee programs nothing more than informal academic discussions of the problem were engaged in.

The report of a typhus case at Lecce was called to the attention of this HQ by telephone with a request that the Typhus Commission be notified and check made as requested by the Medico Provinciale.

The necessity for planning malaria control programs was stressed during the conference. Each Medico Provinciale was requested to have an estimate of larvicidal needs available for consideration by the medical supply representative.

The Public Health Director, 15th Army was not available for conference. It is probable that he can be seen in Naples shortly.

Lt. Col. Farinacci, public health officer attached to 8th Army, was seen and overall problems discussed. It is hoped that a short trip to his HQ. can be arranged in the near future, as per his suggestion.

Summary - Recommendations

1. Re-establishment of maritime quarantine needed.
2. Plan for current typhus investigations should be considered, including special instructions to all health officials regarding reporting and handling of cases, contacts, etc.
3. The refugee problem is quite serious both from standpoint of welfare and the general public.
4. The likelihood of concerted and effective public health planning does not appear any too good under existing conditions.
5. All hospital staffs and persons who may handle typhus cases (doctors, nurses, etc.) should have typhus vaccine. Similar consideration should be given attendants in all institutions.

WILSON C. WILLIAMS, Lt. Col., M.C.
Deputy Director, Public Health Sub-Commission.

PH/WCW/ja

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7/

7/15

Subject :- Typhus Control.

A.F.H.Q. Adv.Adm. Echelon,
C.M.F.

3095/A.1.

11 Jan.'44.

1. In order that Military and Civil Anti-Typhus measures may be co-ordinated and all available resources utilised to the best advantage, it has been decided to set up a Committee of Control. This will be called the Typhus Control Board.

The Board will be composed of members, each of whom has, and will retain, responsibility for Typhus control measures within his own sphere. Their responsibilities are defined below. As members of the Board each member is entitled to express his opinion on any aspect of Typhus control which might affect his present or future responsibilities.

The object of the Board is to ensure co-ordination between its members and to provide means for producing a unified policy.

2. The Board will consist of the following :-

Name.	Appointment.	Responsibility.
Brigadier R.W. Galloway.	DDMS, AFHQ Adv. Adm.Ech.	Chairman of the Board. Co-ordination of all matters affecting Allied Forces.
Brig.-Gen. Leon A. Fox (or his rep. Colonel H.A. Bishop)	Head of U.S. Typhus Commission	Technical advice to Military on anti-typhus measures and control. The initial organisation and direction of anti-typhus measures for the civilian population, with the exception of hospitalisation. These responsibilities will eventually be taken over by A.M.G. In carrying out his responsibilities for the control of anti-Typhus

3870

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Brig.-Gen. Leon.A. Fox (or Jnl rep. Colonel L.A. Bishop)	Head of U.S. Typhus Commission	Technical advice to Military on Anti-Typhus measures and control. The initial organisation and direction of Anti-Typhus measures for the civilian population, with the exception of hospitalisation. These responsibilities will eventually be taken over by A.M.G. In carrying out his responsibilities for the control of Anti-Typhus measures among the civil population, the Head of U.S. Typhus Commission will act through the normal machinery of A.M.G. for dealing with the Italian Civil Authorities.
Colonel D.C. Gregg (or his rep Colonel Public Health Crichton).	Director of A.M.G.	Co-operation with Typhus Commission and ultimate control as specified above. Responsibility for organisation and administration of Civil Hospitals and ancillary Services.

Cont/...Block 2...

3870

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15 Army Group (3)
FIFTH ARMY (2)
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A.M.L. 15 Army Group.
R.E., A.M.L.
A.F.H.Q. (5)
U.S.T.O.
XII Air Force.(2)
XV Air Force.(2)
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XV A.F.S.C. (2)
T.A.F.(2)
XII A.S.C.(2)
D.D.M.S., Adv.Adm. Echn. A.F.H.Q.
Brig. Patterson (for rear Allied Control Commission)(10)
Brig.-Gen. Fox, U.S. Typhus Control Commission,
Room 16, 2nd Floor, Ciodicum Building, NAPLES (4)
Regional Public Health Officer, A.M.L. Region III.
A.D.H. Adv.Adm. Echelon, A.F.H.Q.
Surgeon, FIFTH ARMY.
Surgeon, Peninsular Base Section.
A.D.M.S. 1st Cdn.Div.
A.D.M.S. 57 Area.
A.D.M.S. 56 Sub Area
Italian Typhus Research Team (Maj. Stuart Harris),
C/O A.D.M.S., 57 Area.
S.M.O., Naval Exchange, R.N. Barracks, NAPLES.
S.M.O. 3 Base Area, R.A.F. NAPLES.
Professor Maglilli)
Professor Sergent.) C/O A.D.M.S.
Professor Lombroso.) A.F.H.Q. ADV. 3869
Professor Nanni.) ADV.Echelon.
Professor Oreni.)
D.M.S., Office of the Surgeon, A.F.H.Q. (2)
Director of Public Health, A.M.L. 15 Army Group (4)
A.D.M.S. British Element, FIFTH ARMY.
Colonel Foote, Italian Army Medical Services, NAPLES.
Colonel La Terza, Italian Naval Medical Services, NAPLES.

2 District (2)
3 District (2)
Peninsular Base Section (2)
A.M.G. 15 Army Group.
H.Q., A.M.G.
A.F.H.Q. (3)
D.S.T.O.
XII Air Force. (2)
XV Air Force. (2)
XII A.F.S.C. (2)
XV A.F.S.C. (2)
T.A.F. (2)
XII A.S.C. (2)
D.D.M.S., Adv.Adm. Ech. A.F.H.Q.
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Brig.-Gen. Fox, U.S. Typhus Control Commission,
Room 15, 2nd Floor, Questura Building NAPLES (4)
Regional Public Health Officer, A.M.G. Region III.
A.D.H. Adv.Adm. Echelon, A.F.H.Q.
Surgeon, FIFTH ARMY.
Surgeon, Peninsular Base Section.
A.D.M.S. 1st Cdn.Ech.
A.D.M.S. 57 Area.
A.D.M.S. 94 Sub Area
British Typhus Research Team (Maj. Stuart Harris),
c/o A.D.M.S., 57 Area.
S.M.O., Naval Exchange, R.N. Barracks, NAPLES.
S.M.O. 3 Base Area, R.A.F. NAPLES.
Professor Marinelli }
Professor Borgami. } c/o D.D.M.S.
Professor Benducci. } A.F.H.Q. Adv.
Professor Mimmi. } Adm.Echelon.
Professor Orsi. }
D.M.S., Office of the Surgeon, A.F.H.Q. (2)
Director of Public Health, A.M.G., 15 Army Group (4)
A.D.M.S. British Increments, FIFTH ARMY.
Colonel Ferri, Italian Army Medical Services, NAPLES.
Colonel La Torre, Italian Naval Medical Services, NAPLES.

3869

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Ed. Health File 4

7/11

HEADQUARTERS
ALLIED MILITARY GOVERNMENT
INTERIOR SUB-COMMISSION

5 January 1944

SUBJECT: Director-General of Public Health.

TO : Director, Public Health Sub-Commission.

1. According to information received today from our Liaison Officer at Brindisi, the present Director-General of Public Health is Professor Mario Sica.

2. It is expected that he will be succeeded in this position on 7 January by Signor Manlio Morrica.

R. G. B. SPICER
Lt. Col.
Deputy Director
Interior Sub-Commission.

3868

File ~~Personnel~~

53

FARGO 71

7/13

Public Health File

FARGO

RESTRICTED

ROUTINE

4 JAN 44

10050 WADLEIGH

FATIMA (ACTION)

__________ THIS OFFICE REQUIRES INFORMATION PRESENT INCUMBENT DIRECTORATE GENERAL PUBLIC HEALTH PD HENCE PAREN FARGO PAREN TO FATIMA FOR MAY MOVEMENT FOR ACTION PD CITE FARGO SEVEN ONE PD SEND FULL PARTICULARS PD PAREN SIGNED PAREN LT COL SPICER

3867

J.P. NICKEL,
Lt. Col., AGD,
Adjutant [illegible] General

FARGO 71

7/12

4 JAN 71

FARGO

RESTRICTED

ROUTINE

RATIM FOR MAJ MCSWEENEY FOR ACTION

C Fais office requires information present incumbent Directorate General public health aemd full particulars. (Signed) Lt Col Spicer

3866

J.F. NICKEL.
Lt. Col., AGC
Adjutant General

7/16

JAPANESE SUB-COMMISSION

SUBJECT: Cable.

TO : Message Center

DATE : 3 January 1943

1. Request the following message be sent by cable;

To Major J. M. Sweeney ACC HQ Brandisi
This office requires information present incumbent
Directorate General public health send full particulars.
(Signed) Lt.Col.Spicer.

For the Director:

Richard R. Wadleigh
RICHARD R. WADLEIGH
2nd Lt. AUS

8

HEADQUARTERS
ALLIED MILITARY GOVERNMENT
APO 512

7/10

30 December 1943.

DAILY BULLETIN)
NUMBER 35)

O F F I C I A L

1. TYPHUS AND TYPHOID FEVER: Over 250 cases of typhus fever have occurred in Naples in the past few months and many cases exist at the present time. All HQ. AMG personnel will take adequate steps to protect themselves. Procedure to be followed with reference to prevention of typhus fever are:

a. Periodic examination of clothing for lice and nits and their destruction.
b. Frequent changing and washing of clothing.
c. Frequent bathing.
d. Dusting of clothing with issue powder every 3-4 days in accordance with directions on the can (available from Supply Office).
e. Immediate innoculation of all American and British Officers, EM/OR who have not been innoculated previously and the taking of a booster dose by all who had their last dose more than 4 months ago.

Typhoid fever occurs in Naples throughout the winter.
The local water supply is unfit for drinking.
Procedures to be followed with reference to prevention of typhoid fever are:

a. Avoidance of all water which has not been chlorinated or boiled.
b. Avoidance of local milk, ice cream, soft cheese, and pastries with whipped cream.
c. Avoidance of uncooked shellfish.
d. Taking of a booster dose of typhoid vaccine by all who had their last innoculation more than 6 months ago.

Innoculations mentioned above are being given at the HQ AMG Dispensary, No. 61 Via Medina.
Immunization registers should be taken to the Dispensary for endorsement.
(PH Sub-Commission)

2. RADIOGRAMS: Names of persons will not be included in the outside address (heading) of radios prepared for transmission. They may be included in the inside address for identification purposes.
Headings will consist only of the headquarters concerned, i.e. Fargo (Action) Freedom (Info) Pilpot (Info) Fable (Info).
Radios not prepared in this manner will be returned for correction. (AG)

3. OVERSEAS MARRIAGE OF MILITARY PERSONNEL: The following is extracted from War Department letter, AG 291.1 (11 Sept 43)OB-S-SPGAL-M, dated 24 November 1943, for information and guidance to all concerned.

"No military personnel on duty in the Panama Canal Zone or in any foreign country or possession may marry without the approval of the commanding officer of the United States Army forces stationed in the Panama Canal Zone or in such foreign country or possession.

Existing laws of the United States prohibit the admission into the United States of aliens ineligible to citizenship. This means that persons of Asiatic or East Indian descent, even though married to American citizens, cannot be admitted to the United States.

c. Frequent bathing.
d. Dusting of clothing with issue powder every 5-6 days in accordance with directions on the can (available from Supply Office).
e. Immediate innoculation of all American and British Officers, RM/CR who have not been innoculated previously and the taking of a booster dose by all who had their last dose more than 4 months ago.

Typhoid fever occurs in Naples throughout the winter.
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The laws of a number of States do not recognize as valid any marriage contracted between persons of certain races, regardless of whether the marriage was valid where contracted.

An alien who marries an American citizen does not thereby acquire American citizenship.

The alien wife of an American citizen will be denied admission to the United States if the American consular officer determines that she is likely to become a public charge. The consul's decision that the wife is likely to become a public charge is not subject to revision or appeal.

For the period of the present war and for 6 months thereafter transportation of dependents and household goods of military personnel from overseas theatres to the United States, or from one theatre to another, will not be furnished at Government expense.

Under existing law, dependency allowances authorized for the dependents of military personnel will cease to be paid 6 months immediately following the termination of the present war.

Daily Bulletin No. 35, 30 December 1943 (cont'd)

In general, all military personnel except those who entered the service outside the continental United States, will be returned to the United States prior to discharge. Facilities for the transportation of dependents of any such personnel from an overseas theater to the United States are not available and it is doubtful that such will be available for a long period of time after the cessation of hostilities.

So long as the war continues military personnel are subject to transfer and change of station in accordance with the exigencies of the service. It is manifest that family considerations cannot and will not be taken into account when transfers are made, either within a theater, or from one theater to another, or to the United States.

By order of Colonel SPOFFORD:

L. W. STEARNS
Capt, AGD
Asst Adj Gen

OFFICIAL:

L. W. STEARNS
Capt, AGD
Asst Adj Gen.

122

7/5 103

Report on Typhus Situation at Naples - Dec 1943. AMG/504/16
23.Dec.43.

The Director of Public Health AMG 15 Army Group proceeded to Naples on 17 Dec.

Conferences.

1. On arrival an opportunity was afforded to attend the weekly meeting on Preventative diseases held by Col. Crichton the recently appointed Regional Director of Public Health Region III. The proceedings of this meeting together with proceedings of the previous meeting will be found in appendices 1 and 2 of this report.

Hospitalisation.

2. It will be seen that emergency hospital arrangements are in hand. It was impressed on the Italian authorities that circumstances demanded the acceptance of conditions which naturally would be unacceptable in normal times. Speed is the essential.

Contacts.

3. Though the system of follow up of contacts has been slow in coming to fruition it definitely is a growing concern.

Rockefeller Foundation Personnel.

4. The assistance of the Rockefeller Foundation experts is much appreciated and long discussions and conferences were held at which Dr. Soper, Dr. Davies and Dr. Riche were present Brigadier Dowse was present for a part of one of these conferences.

The system of Dusting.

5. The system of dusting is roughly as follows:- 400lbs of D.D.T. concentrate have been obtained, 100,000 cans of D.Y.L. are being liberated. Talc as a diluent is available locally in adequate amounts. Pumps or guns are available but an improved type is desirable. A multiple type should be produced to enable large numbers to be dusted 500 pumps were expected by air. Transport for dusters is available in adequate amounts. There will be 40 dusters employed immediately 3865 men and women have been trained, 1500 people had been dusted in 2 days but this number will be greatly increased. I hope the figure will be up to 10,000 - 15,000 per day soon with the establishment of dusting centres.

Shelters.

6. The eviction of people from the so is being coordinated with the Public Health Dept. In the meanwhile an organisation of powdering the occupants is

Director of Public Health Region VII. The proceedings of this meeting together with proceedings of the previous meeting will be found in appendices 1 and 2 of this report.

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Railway Travel.

7. Trains are being run ex Naples at infrequent intervals arrangements for the dusting of all travellers were in hand.

Refugees.

8. The number of refugees coming down through Naples is small, a party of approx 200 was awaiting onward disposal at the time of my visit. Dusting was demonstrated.

Types of Powder.

9. It was noted that 400 lbs of D.D.T. are available. Dr. Soper has been requested to estimate quantities required for his dusting programme which comprises two main items (a) Contacts, (b) Mass disinfestations. It will be observed however that 100,000 cans of M.Y.L. are being released for use at Naples. While the situation is such that any or all form of reliable dusting powders are received with gratitude it is felt that with a situation as at Naples where we have Typhus as a real entity, supplies of D.D.T. might be issued as a priority issue for civil use and the Army might have its needs met with M.Y.L. with which at least a second dusting is essential. While this can be controlled in the army, control will be difficult if not impossible in the civil population. This will be further represented by General Fox on his return to A.F.H.Q.

Inoculation.

10. Arrangements are being made for the inoculation of certain additional classes of people. This will include Police, Prisoners in Jails - Warders - Welfare workers. Depending on the availability of vaccine so will this programme be extended to include all dock workers.

Visits to Naples.

11. A recommendation has been submitted to A.F.H.Q. that members of Allied Forces other than those who have business of military importance should for the present be excluded from Naples. The crowding in Naples is unbelievable and the presence of very large numbers of soldiers with little to do in Naples is highly undesirable in present circumstances. The association of Typhus, Lice, V.D. prostitution might well be brought home to troops by the appropriate authorities.

Propaganda.

12. Until the plan for mass disinfestation is completed and adequate supplies of powder are actually available on the spot, intensive propaganda would be inappropriate but when that stage in planning permits it is felt that great results could be anticipated from this agent properly employed.

Co-ordination.

13. It will be noted that practically every branch of the services American and British were represented at the meetings held. In addition a separate meeting of military authorities was called when every one was brought completely into the picture. I called on D.D.M.S., A.F.H.Q. and the A.D.M.S., 57 Sub Area.

Visit of General Fox.

14. Brigadier General Fox head of U.S. Typhus Commission Middle East visited Naples on 20 Dec and an opportunity of discussing the problems with him, Col. Hume, and Col. Crichton, arose. General Fox agreed on the absolute necessity of our contact follow up programme, suggested an extension of our inoculation plan and supported the recommendations on limiting access to Naples for members

return to A.F.H.Q.

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10. Arrangements are being made for the inoculation of certain additional classes of people. This will include Police, Prisoners in Jails - Warders - Welfare workers. Depending on the availability of vaccine so will this programme be extended to include all dock workers.

Visits to Naples.

11. A recommendation has been submitted to A.F.H.Q. that members of Allied Forces other than those who have business of military importance should for the present be excluded from Naples. The crowding in Naples is unbelievable and the presence of very large numbers of soldiers with little to do in Naples is highly undesirable in present circumstances. The association of Typhus, Lice, V.D. prostitution might well be brought home to troops by the appropriate authorities.

Propaganda.

12. Until the plan for mass disinfestation is completed and adequate supplies of powder are actually available on the spot, intensive propaganda would be inappropriate but when that stage in planning permits it is felt that great results could be anticipated from this agent properly employed.

Coordination.

13. It will be noted that practically every branch of the services American and British were represented at the meetings held. In addition a separate meeting of military authorities was called when every one was brought completely into the picture. I called on D.D.M.S., A.F.H.Q. and the A.D.M.S., 57 Sub Area.

Visit of General Fox.

14. Brigadier General Fox head of U.S. Typhus Commission Middle East visited Naples on 20 Dec and an opportunity of discussing the problems with him, Col. Hume, and Col. Crichton, arose. General Fox agreed on the absolute necessity of our contact follow up programme, suggested an extension of our inoculation plan and supported the recommendations on limiting access to Naples for members of the Forces. It is needless to add how much the visit of this outstanding authority on Typhus and its prevention was appreciated.

Refugees in General.

15. Already some 20,000 refugees have been evacuated through 8 Army back to Italian Controlled Territory. This on the whole has proceeded relatively smoothly. A sanitary screen is in course of preparation but is at present incomplete. Any hold up in the Army Areas would if it were allowed to occur be a serious matter but a hold up further back pending the organised disposal

and distribution/...

and distribution of the refugees seems highly possible and very probable. For that reason it is felt that some arrangement for this eventuality should be made now. A medical and sanitary screening could then be done much more thoroughly than is possible forward. A plea in the very strongest terms possible is made for such a camp and a disused P.O.W. or Internee Camp such as that at CAVINA would be highly desirable. It is felt that all measures must be tightened up now so that the occurance of Typhus can be limited with no opportunity to spread with disastrous results, such a camp would serve the whole Army Group Area.

16. The spread of this disease from Naples to Africa and other countries is highly possible unless port health authorities are warned and are on the watch fresh outbreaks may well occur.

17. Every assistance in every possible way is being given to Dr. Soper and his co workers.

18. The number of cases of Typhus for the first 3 weeks of Dec. is approximately 80. About 90 are under treatment. The mortality is 25%.

D. GORDON CHEYNE.
Colonel,
Chief Staff Officer.

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7/7

APPENDIX 1 to AMG/SAB/16
dated 23rd Dec. 43.

Minutes of a Special Meeting on Typhus held on December 17th, 1943, in the Offices of the Public Health Division, Region 3, Prefettura Building, Naples.

1. Those present were Colonel Crichton (in the Chair), Colonel G.Cheyne, Colonel Griffin, Lt.Colonel Shields, Major Gill (A.P.H.O. Naples City), Major Scheele, Major Frizelle, Captain Turner (Sanitation Officer, Naples City), Dr. Soper (Rockefeller Founiation - Typhus Control), Professor Marinelli (Director Ospedali Riuniti), Professor Orsi (Ufficiale Sanitario Communale, Naples), Professor Bergami (Commissario d'Igiene Publica, Naples), Professor Benedicc (Ufficiale Sanitario Provinciale), Professor Mini (Bacteriologist), Captain Snegireff (Assistant to R.P.H.O. Region III and A.P.H.O. Avellino).

2. The following attended on the following day (18th) as they were unable to be present at the main meeting. Major MacMhillan R.A.M.C, 10th Corps Representative, Lt.Col.Gillmore USMC, 5th Army Representative, Major Cherry USMC, P.H., A.C.C., Lt.Col. Sweeney U.S. San. Corps Representative, Metropolitan Area, Naples, Major McCollum U.S. Med. Corps Representative, Metropolitan Area, Major Stein USMC, representative PBS., Major McNeil (V.D. Control PBS).

3. Disinfestation Stations -

I. Pace Hospital - Steam disinfestation not operating owing to much more serious damage to the water system than was anticipated. Repairs estimated to take several days.

II. Albergo dei Poveri - Steam Disinfestation Centre now established and in operation. All inmates and staff of the Institution have been disinfested. By Tuesday the station will be available for public disinfestation on a large scale.

III. Powder Disinfestation - A beginning has been made by powdering 700 travellers leaving by the new bi-weekly Train Service to Bari; 666 patients and staff at the Incurabili Hospital; 250 patients and staff at the Pace Hospital.

Dr. Soper reported that it had not hitherto been possible for Case Contacts to be dealt with at their homes owing to lack of transport and trained personnel. Major Gill stated that 10 light cars with drivers could be placed immediately at the disposal of Dr. Soper and that he would guarantee that four would report to him the next day. Professor Bergami stated that he had procured one autobus which he intended to use for mass disinfestation at the Poveri and could procure another. He was requested to procure this for the use of Dr. Soper.

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Dr. Soper stated that in his experience the mere powdering of case contacts was not sufficient and that the entire population of large districts of the town would have to be dealt with. For this purpose it was his plan to establish several disinfestation (powder) stations in different parts of the town.

(Director Ospedali Riuniti), Professor Orsi (Ufficiale Sanitario Communale, Naples), Professor Bergami (Commissario d'Igiena Publica, Naples), Professor Benaduce (Ufficiale Sanitario Provinciale), Professor Nimi (Bacteriologist), Captain Snegireff (Assistant to R.P.H.O. Region III and A.P.H.O. Avellino).

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Colonel Cheyne, while agreeing that the general project of disinfestation of the population would doubtless have to be undertaken, insisted that the immediate problem to be dealt with was the house or Case Contact and that these would have to be dealt with at once.

IV. Availability of Powder - Beside the M.Y.L. tins obtained from U.S. QM stores locally, a supply of 200 lbs. D.D.T. Concentrate had been received by air from North Africa and the release of a further supply of 200 lbs. had been authorised from a consignment made to P.B.S. Suitable pumps had also been asked for from Africa.

Col. Cheyne/.....

Col. Cheyne requested Dr. Soper to estimate his supply needs for the entire programme envisaged by him.

Dr. Soper detailed the difficulties experienced in powdering the passengers at the Railway Station so as to ensure that all those travelling were dealt with. It was considered that these difficulties could be overcome. Dr. Soper also pointed out the further effectiveness of D.D.T. powder as compared with M.Y.L. powder now in use and recommended that, for this reason, priority for the release of powder for civilian purposes should be given over that for the Army where the population to be dealt with was subject to discipline and was accessible for frequent inspections and powderings if necessary.

Colonel Cheyne promised to represent this point to the appropriate authorities.

4. Ricoveri - It had been ascertained by a visit to the San Gaetano Ricovero that although hundreds of people sleep there at night, the ricovero is empty in the daytime. It was decided therefore that a night powdering squad should be organized to work in the Ricoveri when the people were present. Meanwhile the desirability of evicting habitual occupants from Ricoveri was stressed and application was again to be made to the appropriate authorities.

5. Cotugno Hospital - Now that this Hospital had been released by the Army and A.M.M. authorities, Professor Borgani was requested to see that it was put into order for the reception of patients, in part or in whole, within a week. It was pointed out that it was futile to wait for perfection in detail and that an emergency Hospital to deal with the epidemic threatening the town had to be established without delay.

6. Meeting of Physicians on Typhus - An unexpected difficulty in calling this meeting had been experienced by the disbanding of Medical Societies Professor Borgani was requested to circularise all physicians through the Press, inviting them all to a purely scientific meeting.

7. Incurabili Hospital - Repairs to this Hospital, to serve as an Air Raid Casualty Station, were still held up because of the tangle regarding the financial authority which is responsible. Professor Benedusce was requested to obtain the orders of the Prefect on the subject and to refer to AMG for any funds which may have to be advanced to the purpose.

8. Cesu and Maria Hospital - Professor Marinelli reported that this Hospital had only been slightly damaged and could be put in order in a short time. Professor Marinelli was required to take this matter in hand urgently in case it was required as an extension for the Cotugno.

(Signed) W. Christiton.
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2C.12.43.

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(Signed) W. Chrichton.
Col.

20.12.43.

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APPENDIX 2 to AMG/504/16
dated 23.Dec.43.

HEADQUARTERS
ALLIED MILITARY GOVERNMENT
DIVISION OF PUBLIC HEALTH & WELFARE

Minutes of Meeting on Preventable Diseases, held Dec.10,1943, in the Offices of Public Health & Welfare Division, Region 3, Prefettura Building.

1. The meeting was called to order at 1508 hours by Colonel Crichton, R.P.H.O., Region 3.

2. Those present were: Lt.Colonels Page and Shields; Majors Gill, Norman, Snyder and Stein; Lt. Commander Youens; Captains Snegiroff and Turner; Dr. Soper; Professors Bergami, Marinelli, Ninni and Orsi.

3. Colonel Crichton reviews the situation with Typhus cases reported to date; the plans under way and the accomplished facts since the previous meeting of December 3rd.

a. DISINFESTATION by STEAM and CLEANSING.

a. Pace Hospital, where 2 showers and 4 bath tubs are available, the local disinfestor, though not suitable for present purposes could be supplemented by one of the two portable, Italian Military type disinfestors, now located there for repair and adjustment, but as yet not in shape for immediate use.
Pace Hospital was discussed as a suitable Intermittant Center for contacts of Typhus cases.

b. Albero Poveri, where at present in the rear of the Institution is one room with 24 showers will be in condition for use on and after Monday, Dec.13.43, and additional shower space can be made available at a later date. Capt. Turner plans to install at this Institution one of the 2 portable, Italian Military type, disinfestors.
Colonel Crichton arranged for a visit with Professor Bergami to Albergo Poveri, scheduled for 8:30 a.m. Dec.11th instant.

c. Reniti Hospital, accommodation with 2 bath tubs and 2 showers, is to be examined by the hospital engineer who will report the results to,Professor Marinelli.

d. Port site, Via Cattaneo, Private Baths Institution for the public, though not equipped with showers has a number of bath tubs. The building was damaged in the bombing, and before further consideration as a Disinfestation Center, will be examined by Professor Bergami and/or his representative. This and other tentative disinfestation centers could supplement their facilities with portable, Italian Military type, disinfestors of which five (5) are located at the Italian Military Hospital (New Trinita) and one (1) in the Medical Stores of Region 3 (AMG) now under Major Gill's

R.P.M.G., Region 3.

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e. Old Cotugno Hospital, according to Major Gill, the R.A.F. unit is making preparations to vacate this Institution by Dec.13, instant. Professors Bergami and Orsi agreed to send a squad of Civil Police and workmen to commence the cleaning and the policing of the Institution. Colonel Crichton arranged with Professor Bergami to pay a field visit to this Institution on Dec. 11th.

B. DISINFESTATION by POWDER, MIL and DDT type.

Colonel Crichton and Doctor Soper discussed the powder disinfestation program for typhus patients and contacts. It was stated that Army authorities have released the requested MIL powder; the possibility of DDT powder becoming available at a later date was discussed.

Arrangements were made with Professors Bergami and Orsi to provide 12 men and several women from the Italian public health staff of Naples City for instruction at the Old Cotugno Hospital Disinfestation Station, on Dec.11th instant at 10 A.M. The working week of the Disinfestation Squad will be arranged for.

Ospedale Incurabile, was discussed as a Secondary Powdering Center.

C. TRANSPORT.

Professor Bergami stated that the Transport Company of Naples has already placed an autobus at the disposal of City Health Department, for the transport of Disinfestation personnel and equipment.

D. Professor Bergami suggested a general meeting of Physicians of the city for the discussion of general topics and of Typhus and it's Control. Colonel Crichton named Professor Frenza Director of Cotugno Hospital as visiting lecturer on the topic of Typhus and Professor Bergami on the topic of the Preventive Aspects of Typhus control. The meeting is to be held at the University at a later date and Professor Bergami is to make the necessary arrangements and report progress to Colonel Crichton.

E. AIR RAID SHELTERS, are still a problem in that adequate housing for refugee occupants is not as yet available. Dr. Soper suggested the powdering of all persons entering the air raid shelters by trained health department personnel, as the first step in the disinfestation program of occupants of air raid shelters.

F. RESTRICTION OF MASS - MOVEMENT out of Naples was discussed. It is realised that movement of individuals is an overwhelming problem with which the present police force is unable to cope.

4. HOSPITAL PROBLEMS.

The availability of the entire Pace Hospital for Venereal disease patients was discussed. Professor Bergami proposed the closing of the surgical unit at the Pace Hospital and the announcement to the public of the transfer of this unit to the nearby Ascalesi Hospital, when the latter is repaired from previous bomb damage.

The surgical patients from the Pace can be readily transported to the Regina Margherita Hospital. It was stated by Major Gill that there were only some forty (40) patients, most of whom are Ambulatory and should be moved by truck, while the five or so bad cases can be moved by Ambulance.

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Professor Marinelli commented that about 500,000 lire will be required to condition the Ascalesi Hospital. It was mentioned that there still was a legal tangle as to the directorship of the Ascalesi Hospital, the contestants are the Morvillo and Reuniti Hospital groups. Referral to the Prefetto was agreed upon to settle the Ascalesi Hospital. The importance of adequate bed space for infected prostitutes at the Pace was deemed essential, in the light of the serious Venereal Disease Problem in Naples.

SCHEME of ORGANISATION, of the Italian Provincial and City Health Services was discussed; Professor Bergami will produce the present chart of organization for reference purposes.

The meeting adjourned at 1650 hours.

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PLANNING STAFF AGA

3 September 43

MEMORANDUM

TO: Brig. G. S. Perkinson
Director, Division of Public Health, Reg. VII
FROM: Capt. Joel Earnest
Attached, Public Health Division, Reg. VII

1. School Lecturers returning from Sicily state that some of the most immediate and complicated problems facing a CAO are those of housing, providing for the destitute, the children, refugees from other areas, and those made homeless by bombing.

2. As the local CAO will himself have to handle the burden of these problems, it is recommended that to assist him, detailed directions be prepared on a number of welfare problems, these directions to be written in Italian and prepared in such a manner that the CAO can, if he finds it advisable to use one or more of them, address the Directive as an order to the Podesta or such other official as the CAO selects to carry out the operation. The Directive would be based on existing Italian procedures and records, etc, where available and where such procedures and records are not available or do not meet the necessity of the situation, the Directive would outline the procedure to be used and would be accompanied by the necessary forms and record-keeping devices.

3. For example, if the CAO is in an area that has been heavily bombed and he is faced with the problem of making a housing and building survey and no existing agency is already equipped to undertake the job, the CAO would have available a Directive already prepared and translated in Italian, setting forth the government organization to be set up, method of selection of workers to be used in the survey, the information required, the forms to be filled out, the method to be used in obtaining the information and the analysis to be made of the information attained. All the work to be the responsibility of existing governmental officials and with suggestions to the CAO how he can quickly and simply spot check the work done to insure its accuracy. The Directives would of course be written completely and simply enough so that the CAO would need to take little or no time in explaining to the official selected what he, the C.A.O, wants done.

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4. If the above suggestions are considered feasable, before the Directives can be put in draft form, it will be necessary for the planning staff to obtain a good deal of important information on the existing Italian welfare organizations, policies and procedures not now available at this post.

Some of the needed information is set forth in the following series of questions:

(a) What house and room occupancy information is available in existing Italian records, showing the number of people per room, condition of building, sanitary appliances, water, cooking facilities, heating and estimated repairs needed etc?

(b) If not available, what procedure is now being followed by CAO's?

(c) If such information is not available, would it be of assistance to CAO's on taking over in heavily bombed cities, to have a house and room registration procedure worked out in the Italian language that could be handed by the CAO to the Podesta or such official as the CAO may select to handle the problem of housing refugees?

(d) In cases already receiving relief, either the aged, relief for crippled persons, the unemployables, and the unemployed not covered by insurance programs, is there a case history showing family make-up, city of usual residence, work history and health conditions as they relate to employment etc?

(e) The amounts of money, commodities or services granted to these cases, and the basis for determination of eligibility to receive these grants.

(f) What are the follow-up procedures used by Italian agencies to investigate continued eligibility or a change in eligibility after relief is originally granted?

(g) What forms, office records etc are kept on the matters covered in Paragraphs d to f and also what forms, records etc are kept on medical care given these cases? If possible, give samples of all forms, records and procedures.

(h) What central index or clearance system is now used in the larger cities to insure against the duplication of relief and/or unemployment insurance and other insurance payments to individuals or families?

(i) What, if any, are existing procedures and agencies for returning to their native towns and cities those people who have fled from bombed or combat areas, and what method is used for clearing with the authorities of such towns or cities, the question of their ability to accept the return of these refugees?

(j) Can the above procedure and agencies be used for the similar problem of released prisoners of war, political prisoners and alien workers now unemployed?

(k) Are the records and methods of exchanging information between localities on these refugees etc simple and standard in form?

(l) What new programs exist to meet the problem of children who are orphaned through actions of war and what records are kept identifying these children?

(m) What are the existing agencies for returning lost children to their parents or relatives? What finding methods are used to locate parents and relatives and what records are kept?

(n) What medical examinations are made before refugees are permitted to return from a distant area to their homes?

(o) Would an already prepared stastistical reporting system be of help to CAO's in supervising institutions such as prisons, sanitariums, orphanages etc?

(p) Is it Possible to obtain copies of all forms of procedures used in various Italian social insurance programs?

5. It is requested that the above information be obtained in as much detail as possible and with copies of existing forms and procedures attached, either by correspondence with the Allied Welfare officials and also with comments from a number of CAO's in Sicily on what they are actually finding in their cities. Is it possible that some members of the Section VII Planning Staff, Division of Health be permitted to spend a few days in Sicily to discuss these questions with the officers who have been dealing with those problems?

Capt. Joel Earnest

CAPT. JOEL EARNEST

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DIVISION OF PUBLIC HEALTH AND WE FARE
ORGANI TION CHART: EXPLANATORY NOTES

1. It is contemplated that on all policies and procedure relating to Health and Welfare issued by Division Hq. which are to be executed by Italian officials, the lines of communication will be:

A. From Div.Hq to the appropriate Ministry of Dept., of the Italian Government.

B. From the Italian Gov ernment Hq. to its provincial and Communal officials.

C. Simultaneously with the issuance by the Div. Hq to the Italian Govt. and copies as required, full information on the policy or procedure will be sent from Div. Hq. to the Regional Hq. of A.C.A. accompanied by appropriate directions for action requested from Reg. A.C.A. Hq.

2. On policies, procedure and other contacts (Not directed to the Italian Government for its execution) between Div. Hq. and the Regions or Field Staff, A.C.A. the normal working relationships will be from Div Hq. to Regional Hq. In other words Div. Hq. Staff on field trips will work only with Regional Hq. and Region Staff. Contacts with echelons below the Regional level will normally be by Region personnel. Wherever it is planned that there may be exceptions to this policy and Div. Field Staff may work directly with Communal Staff, the exception is noted on the chart by the phrase "below region level."

3. Requests for repeal or changes in existing Italian laws, or for new legislation will be made by the Div. Director to A.C.A. Hq. Each Dept. Chief, in Div. of Health and Welfare, is expected at all times to keep the Director or his Deputy informed of the need for changed legislation.

4. Paper 5 of 19 July 43 as amended by MCS paper 7 of 21 Aug 43, provides a total of 36 Officers for Hq. of Health and Welfare under A.C.A. The organization therefore is predicated on this number of officers. It is important to note however, no allocation of rank has been made for these position as the work is frequently so specialised the assignment must be made on the basis of training or experience of the men available rat er than on the basis of ranks.

5. The scope of the Division's responsibility for feeding and relief is considered to be:

A - Supervision of the programs of Cash assistance to the indigent.
B - Actual Feeding programs only in emergencies or in camps or institutions.
destitute

The questions of the amount of food available for all the people (~~destitute~~ or not), the methods of making it available, i.e. distribution, and the amounts available per person, are not planned for in the scope of the work of the Div of Public Health and Welfare. The scope of the Divs responsibility for the broader question of Welfare are set forth in some detail in the attached chart.

On the question of the Financing of Relief and Welfare, the Div. of P.H. takes responsibility only for estimating the financial requirements of the destitute.

It is agreed by the Finance Division that it is their responsibility to provide the

Italian Govt. and copies as required, full information on the policy of procedure will be sent from Div. Hq. to the Regional Hq. of A.C.A. accompanied by appropriate directions for action requested from Reg. A.C.A. Hq.

2. On policies, procedure and other contacts (Not directed to the Italian Government for its execution) between Div. Hq. and the Regions or Field Staff, A.C.A. the normal working relationships will be from Div Hq. to Regional Hq. In other words Div. Hq. staff on field trips will work only with Regional Hq. and Region Staff. Contacts with echelons below the Regional level will normally be by Region personnel. Wherever it is planned that there may be exceptions to this policy and Div. Field Staff may work directly with Communal Staff, the exception is noted on the chart by the phrase "below region level."

3. Requests for repeal or changes in existing Italian laws, or for new legislation will be made by the Div. Director to A.C.A. Hq. Each Dept. Chief, in Div. of Health and Welfare, is expected at all times to keep the Director or his Deputy informed of the need for changed legislation.

4. Paper 5 of 18 July 43 as amended by MGS paper 7 of 21 Aug 43, provides a total of 76 Officers for Hq. of Health and Welfare under A.C.A. The organization therefore is predicated on this number of officers. It is important to note however, no allocation of rank has been made for these position as the work is frequently so specialised the assignment must be made on the basis of training or experience of the men available rat er than on the basis of ranks.

5. The scope of the Division's responsibility for feeding and relief is considered to be:

A - Supervision of the programs of Cash assistance to the indigent.
B - Actual Feeding programs only in emergencies or in camps or institutions.

The questions of the amount of food available for all the people (destitute or not), the methods of making it available, i.e. distribution, and the amounts available per person, are not planned for in the scope of the work of the Div of Public Health and Welfare. The scope of the Divs responsibility for the broader question of Welfare are set forth in some detail in the attached chart.

On the question of the Financing of Relief and Welfare, the Div. of P.H. takes responsibility only for estimating the financial requirements of the destitute.

It is agreed by the Finance Division that it is their responsibility to provide the funds necessary to permit the Communes, Provinces and other pertinent bodies to meet the needs of the destitute. The Finance Div will rely upon the advice of the Div. of Public Health and Welfare as to what is required, but it will not feel bound to make the advances if for financial or other reasons such requested advances appear to be unwise or excessive, unless, of course, it is instructed by Higher Authority to do so.

A. C. A.

- Director Pub. Health & Welfare.
  Responsible for :-
  1. Overall direction & policy of Div.
  2. Contacts with A.C.A. H.Q.
  3. Contacts with High Government -al & Civilian personnel.
  4. Personal field visits.

  1 - C.
  - EM.

- Public Health Nurse Consultant.
  Responsible for :
  1. Consultation on Maternal & Child Health & Welfare problems.
  2. Midwives & Nurses.

- Public Relat
  Public Healt
  Education.

- Deputy Director P.H. & W.
  Responsible for :-
  1. Co-ordinates for Director work of Depts.
  2. Is actual operating man for field as all new policies & procedure must clear thro' his office.
  3. Responsible for new laws & legislation.

- Sec. of Co-or
  Responsible fo
  Committee of
  except emerge
  policies for
  field are dir

Dept for the Supervision of Institutions.	Dept for the Supervision of Public ~~Works~~ HEALTH	Dept for the Supervision of General Medical Care.	Department for the Supervision of Welfare.
Responsible for :- A. Hospitals (a) General. (b) T.B. (c) Mental. (d) Children. (e) Contagious. B. Prisons & Correctional institutions (For	Responsible for :- A. Communicable Diseases (a) Special emphasis on Malaria, Typhus & V.D. Control. (b) Immunization - Typhoid, Diphtheria Small Pox. (c) Pest control	Responsible for :- A. Medical Supplies. (a) Requirements - Procurments - Storage - Distribution. B. (a) Control of Italian Drs, Midwives & Nurses.	Responsible for :- A. Matters involving private charity, Red Cross, Church Agencies etc. B. Existing Public Welfare Agencies. (a) aged, crippled, unemployed not covered by insurance, - Financial
Health & Human conditions - Legal - to handle questions of who should be in & who out). Personnel 4 - C. - E.M. 1. Dept. Chief. A. General supervision of Depts. B. Contacts with It. State Officials for institutions.	mosquitoes, flies, rats; lice - disinfection & disinfestation (Entomological control) (d) Port control & Air control B. Sanitary engineering. (a) Water, sewage, river polution. (b) Burials. (c) Public Baths. (d) Street cleaning & disposal of Garbage	(a) Qualification, conduct, location. C. Medical Care to the indigent (Co-ord; with Welfare Dept.) D. Consultant to Welfare on Health Insurance programs & type & quality of care given by them. E. Factory & Industrial Health conditions &	ence for Food, Medical Care Clothing, Rent, Fuel, etc. (b) Study of cost of living to establish Relief Standards (c) Co-operation with Labour Division of A.C.A. - to encourage employement and prevent unnecessary relief payments to those actually employed. C. War destitute. (New Italian agencies may need to be

A. C. A.

Total Personnel,
36 - O.
1 - P.H. Nurse Consulta
- E.M.

Consult-

Maternal Welfare

Director Pub. Health & Welfare.
Responsible for :-
1. Overall direction & policy of Div.
2. Contacts with A.C.A. H.Q.
3. Contacts with High Governmental & Civilian personnel.
4. Personal field visits.
1 - O.
- EM.

Public Relations & Public Health Education.
1 - O
- EM.

Deputy Director P.H. & W.
Responsible for :-
1. Co-ordinates for Director work of Depts.
2. Is actual operating man for field as all new policies & procedure must clear thro' his office.
3. Responsible for new laws & legislation.

Sec. of Co-ordinating Committee.
Responsible for :-
Committee of Dept. Heads. All except emergency procedure & policies for Italian Govt. or field are discussed here.
1 - O.
- E.M.

the Supervision of Communicable Diseases. HEALTH	Dept for the Supervision of General Medical Care.	Department for the Supervision of Welfare.	Dept of Office Management.	Dept of Statistics Budgets.
Responsible for :- Special emphasis - Malaria, Typhus V.D. Control. Immunization - Cold, Diphtheria Small Pox. Pest control	Responsible for :- A. Medical Supplies. (a) Requirements - Procurments - Storage - Distribution. B. Control of Italian Drs, Midwives & Nurses.	Responsible for :- A. Matters involving private charity, Red Cross, Church Agencies etc. B. Existing Public Welfare Agencies. (a) aged, crippled, unemployed not covered by insurance. - Financial	Responsible for :- A. Central correspondance files. B. Typists Pool C. Personal files D. Transportation and allocation of cars. E. Mileage & other charges F. Office Supplies. Personnel, 2 - O. - E.M.	Responsible for :- A. Operating statistics all Depts & Regions. B. Control Statistics. All Depts & Regions C. Budgets; preparations & control all Depts & Regions D. Vital & epidemiological statistics. Personnel, 1 - O. 1 Chief Statistician. (May be necessary to add an epidemiologist if no good one available in Italian

Flies, rats, disinfection & infestation (Entomological control) Rat control & Water control Sanitary engineering. Water, sewage, water polution. Canals. Public Baths. Street cleaning & disposal of garbage

(a) Qualification, conduct, location.
C. Medical Care to the indigent (Co-ord; with Welfare Dept.)
D. Consultant to Welfare on Health Insurance programs & type & quality of care given by them.
E. Factory & Industrial Health conditions & medical

ance for Wood, Medical Care Clothing, Rent, Fuel, etc.
(b) Study of cost of living to establish Relief Standards
(c) Co-operation with Labour Division of A.C.A. - to encourage employement and prevent unnecessary relief payments to those actually employed.
C. War destitute. (New Italian agencies may need to be

Health & Human conditions-Legal - to handle questions of who should be in & who out). Personnel 4 - O. - E.M. 1. Dept. Chief. A. General supervision of Depts. B. Contacts with It. State Officials for institutions. C. Suggests needed legislation to Deputy Director. D. Member of Co-Ordinating Committee. 1 - Senior Field Inspector 2. Junior Field Inspectors. (The field inspt force works at Region level, and also below Region level. Those men must know institutional management & inspt. the larger institutions	mosquitoes, flies, rats, lice - disinfection & disinfestation (Entomological control) (d) Port control & Air control B. Sanitary engineering. (a) Water, sewage, river polution. (b) Burials. (c) Public Baths. (d) Street cleaning & disposal of garbage (e) Restaurants, Barbers Shops (f) Air raid shelters, (in co-op with ARP) C. Maternal & Child Health. (a) General. (b) Schools. (c) Dental. (d) Nutrition. (e) Delivery & Pre Natal care. (f) Crippled Children. (g) Close co-operation with children aged in welfare. D. Laboratories. E. Diseases of animals contagious to man. F. Inspt. of slaughter houses - dairies - meat - food - milk. Personnel, 11 - O. - EM.	(a) Qualification, conduct, location. C. Medical Care to the Indigent (Co-ord; with Welfare Dept.) D. Consultant to Welfare on Health Insurance progress & type & quality of care given by them. E. Factory & Industrial Health conditions & medical programs. Personnel 3 - O. - E.M. 1. Dept. Chief. (Some general functions as Inst Chief) 1. Medical Supply Officer 1. Medical Officer (Supervision of Medical care to indigents & consultant to Welfare. Any field work needed by this Dept. to be done by Dept of Public Health.	ance for Food, Medical Care Clothing, Rent, Fuel, etc. (b) Study of cost of living to establish Relief Standard (c) Co-operation with Labour Division of A.C.A. - to encourage employment and prevent unnecessary relief payments to those actually employed. C. War destitute. (New Italian agencies may need to be established) (a) Housing. (b) Refugees; camps, repatriation. (c) Released war & political prisoners, both Italian nationals taken prisoner by our forces & subsequently released and Greek & Yougoslavian prisoners of war held by the Italians. (d) Separated children & families. Location identification & bringing together. (e) Co-op with A.F.H.Q. services on disasters and enemy bombing during occupation D. Children; (a) Day nurseries, orphans, illegitimate children. (b) Co-operation with Dept. of General Medical care on children.

1 Dept. Chief. (Same general function as Inst. Chief, & special responsibility to notify Dir. on outbreak of disease). 1 Deputy Chief: co-ordinates & supervises work of specialists. Specialists & Assts. 1 V.D. 1 Malaria 1 Typhus	(c) Milk for children, rest camps & Health camps. (d) Leisure time and recreation in co-operation with Div. of Education. (e) Juvinal diliquents not in institutions. Co-op with Legal Div. E. Social Insurance programs-their supervision and intigration with relief work. On eligibility & benefits - accident - health - unemployed - aged

itoes, flies, rats;	(a) Qualification, con-:	ance for Food, Medical Care :	ation and all-:	D. Vital & epidem-
- disinfection & :	duct, location. :	Clothing, Rent, Fuel, etc. :	ocation of :	iological statist-
festation (Ent- :	C. Medical Care to the :	(b) Study of cost of living :	cars. :	ics.
ical control) :	indigent (Co-ord: with:	to establish Relief Standards:	S. Mileage & :	
ort control & :	Welfare Dept.) :	(c) Co-operation with Labour:	other charges:	Personnel, 1 - C.
ir control :	D. Consultant to Welfare :	Division of A.C.A. - to :	F. Office :	1 Chief Statisti-
ary engineering. :	on Health Insurance :	encourage employment and :	Supplies. :	cian.
ter, sewage, :	programs & type & :	prevent unnecessary relief :	:	(May be necessary
ver polution. :	quality of care given :	payments to those actually :	Personnel, :	to add an epid-
rials. :	by them. :	employed. :	2 - C. :	emologist if no
blic Baths. :	E. Factory & Industrial :	C. War destitute. (New Italian :	- E.M. :	good one avail-
rect cleaning & :	Health conditions & :	agencies may need to be :	:	able in Italian
posal of garbage :	medical programs. :	established) :	1 Dept. Chief. :	Government)
staurants, :	:	(a) Housing. :	1 Asst. Chief. :	
rbers Shops :	Personnel 3 - C. :	(b) Refugees; camps, re- :	:	
r raid shelters, :	- E.M. :	patriation. :	:	
n co-op with ARP) :	:	(c) Released war & political :	:	
nal & Child :	1. Dept. Chief. :	prisoners, both Italian :	:	
h. :	(Same general funct- :	nationals taken prisoner :	:	
neral. :	ions as Inst Chief) :	by our forces & subsequ- :	:	
boola. :	:	ently released andGreek :	:	
ntal. :	1. Medical Supply Officer:	& Yougoslavian prisoners :	:	
trition. :	:	of war held by the Ital- :	:	
livery & Pre Natal:	1. Medical Officer (Sup- :	ians. :	:	
re. :	ervision of Medical :	(d) Separated children & :	:	
pplied-Children. :	care to indigents & :	families. Location indent- :	:	
ee co-operation :	consultant to Welfare. :	-ification & bringing :	:	
th children see :	:	together. :	:	
Welfare. :	Any field work needed :	(e) Co-op with A.R.P. services :	:	
atories. :	by this Dept. to be :	on disasters and enemy :	:	
ses of animals :	done by Dept of Public:	bombing during occupation:	:	
tious to man. :	Health. :	D. Children; :	:	
of slaughter :	:	(a) Day nurseries, orphans, :	:	
- dairies - meat:	:	neglected children & :	:	
- milk. :	:	illegitimate children. :	:	
:	:	(b) Co-operation with Dept. :	:	
l, 11 - C. :	:	of General Medical care :	:	
- EM. :	:	on children :	:	

Chief. :	(c) Milk for children, rest :	:	:
general function :	camps & Health camps. :	:	:
Inst. Chief, & :	(d) Leisure time and recreat- :	:	:
inal responsibility:	ion in co-operation with :	:	:
notify Dir. on :	Div. of Education. :	:	:
reak of disease). :	(e) Juvinal diliquents not in :	:	:
y Chief: co-ordin-:	institutions. Co-op with :	:	:
& supervises work :	Legal Div. :	:	:
ecialists. :	E. Social Insurance programs- :	:	:
:	their supervision and :	:	:
ists & Assts. :	intigration with relief :	:	:
:	work. On eligibility & :	:	:
ria :	benefits - accident - :	:	:
ns :	health - unemployed - aged :	:	:

Personnel, 11 - O. - EM.		(b) Co-operation with Dept. of General Medical care on children.

1 Dept. Chief.
(Same general function as Inst. Chief, & special responsibility to notify Dir. on outbreak of disease).
1 Deputy Chief: co-ordinates & supervises work of specialists.

Specialists & Assts.

1 V.D. ∅
1 Malaria ∅
1 Typhus ∅
2 Field Health Consultants (General).
1 Sanitary Engineer ∅
2 Field Consultants on Sanitary Engineering.
1 Veterinarian ∅

∅ These specialists work at H.Q. with specialists in Instit Depts and also go out as Field advisors in danger areas where they may work below region level.

(c) Milk for children, rest camps & Health camps.
(d) Leisure time and recreation in co-operation with Div. of Education.
(e) Juvinal diliquents not in institutions. Co-op with Legal Div.

E. Social Insurance programme- their supervision and intigration with relief work. On eligibility & benefits - accident - health - unemployed - aged etc.- insurance.

Personnel 11 - O
- E.M.

1 Dept. Chief.
(Same general functions as Inst. Chief.)
1 Deputy Chief.
Co-ordinates & supervises work of Welfare section.
1 Private Charity.
2 Ins. specialists.
1 Food - Clothing - Fuel (works with civilian supply)
1 Child welfare specialist.
4 Public Relief & destitute. - Field & H.Q.
(May need to work below Region Level).

ol, 11 - O.		(b) Co-operation with Dept.
- EM.		of General Medical care
		on children.

. Chief.		(c) Milk for children, rest
e general function		camps & Health camps.
Inst. Chief, &		(d) Leisure time and recreat-
cial responsibility		ion in co-operation with
notify Dir. on		Div. of Education.
break of disease).		(e) Juvinal diliquents not in
ty Chief: co-ordin-		institutions. Co-op with
& supervises work		Legal Div.
pecialists.		E. Social Insurance programs-
		their supervision and
lists & Assts.		intigration with relief
.		work. On eligibility &
aria ∅		benefits - accident -
hus ∅		health - unemployed - aged
ld Health Consult-		etc.- insurance.
s (General).		
itary Engineer ∅		Personnel 11 - O
ld Consultants		- E.M.
Sanitary Engineer-		1 Dept. Chief.
.		(Same general functions as
erinarian ∅		Inst. Chief.)
o specialists work		1 Deputy Chief.
.Q. with specialists		Co-ordinates & supervises
Depts and also		work of Welfare section.
ut as Field advis-		1 Private Charity.
in danger areas		2 Ins. specialists.
e they may work		1 Food - Clothing - Fuel
w region level.		(works with civilian supply)
		1 Child welfare specialist.
		4 Public Relief &/destitute.
		- Field & H.Q.
		(May need to work below
		Region Level).

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