Polio in Twentieth Century America: A “Children’s Disease” in a Child-Centered Culture

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Polio in Twentieth Century America:
A “Children’s Disease” in a Child-Centered Culture

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History 398
Dr. Bittel
From the beginning of polio’s lifespan in the United States, the disease was associated with children almost exclusively. Because the majority of cases seemed to be in the youth, poliomyelitis was coined “infantile paralysis,” despite evidence of numerous adult cases.¹ This characterization of polio as a “children’s disease” fits in line with greater trends in American society. As the twentieth century moved forward, American culture became increasingly child-centered, and the polio epidemics, starting with the outbreak of 1916 throughout Northeastern United States, and continuing into those of the 1950s, are framed by this increasingly child-centered culture. As I will demonstrate, with the rise of child-centeredness, the growth of scientific medicine, pediatrics in particular, the post World War II Baby Boom and the innovative campaigns of the March of Dimes, polio was fashioned into a ‘children’s disease.’ These changes in society changed the collective attitude toward polio. From 1916 until the late 1950s, the disease altered American life and was in turn influenced by external cultural forces. Therefore, this essay seeks to study the making of polio into a “children’s disease” and how that shaping mirrored societal transformation, reflecting a culture’s hopes, desires, and fears.

II. 1894-1930s: The Beginnings of Polio in America

On July 1, 1916 the New York Times featured an article entitled, “Infantile Paralysis Starts a Cleanup: City Departments Unite in Efforts to Impose Sanitation in Crowded Districts.” Describing the recent onslaught of polio cases (which would prove only the beginning of a much

¹ For more information on the evolving names of what we now know as polio, see John R. Paul, History of Poliomyelitis (Connecticut: Yale University Press, 1971), 4-9; Edmund J. Sass, Polio’s Legacy: An Oral History (Lanham, MD: University Press of America, 1996), 1-20; Jane S. Smith, Patenting the Sun: Polio and the Salk Vaccine (New York: W. Morrow, 1990), 34. As Paul notes, names ranged from the general descriptions “deformity of the lower extremities” of the late 18th century and “morning paralysis” of the mid-19th century to the more specific “Heine-Medine’s disease” and “poliomyelitis anterior acuta” to “infantile paralysis” and finally “poliomyelitis.” “Infantile paralysis” was commonly used until it became clear that adults contracted the disease in large numbers as well. He writes also, “The name infantile paralysis was strictly suitable for the 1916 epidemic.” Notable also, as Paul explores in length, is the high incidence of polio found in adult soldiers during World War II. See Paul, 346-56. “Polio” is a shortened version “poliomyelitis,” a term journalists in the 1940s considered awkward.
larger tragedy), the first paragraph concludes with the statement, “Italians living in crowded tenements have been the chief sufferers,” and later informs the reader that, “there was a report yesterday that the disease had been brought to America by Italian immigrants.” Although this article dates from early on in the 1916 epidemic, it proves very revealing about American society’s values and assumptions during this time. The association of polio with immigrants came to characterize the disease, as is displayed in this New York Times article, even despite evidence presenting a more complex situation.

Although this first major epidemic of polio occurred in 1916, it was not a new disease. Previously, in 1894 and 1907, there had been outbreaks, but not until 1916 did America truly feel affected on such a large-scale. Even prior to the twentieth century, the poliovirus had existed and infected many people; however, less than two percent of those developed noticeable or lasting symptoms. This was due to the fact that, before 1900, most Americans lived in rural areas or small towns and cities, under primitive sanitary conditions that left them most likely exposed to the virus at a very early age. Those who ultimately did not develop symptoms, who had been exposed to the virus as infants, still had the antibodies from their mothers present and fighting in their systems. These infants then built their own immunity. Not until the last years of the nineteenth century and into the early twentieth century were calls for cleanliness made. It was then, with the rise to prominence of doctors and, in particular, the revolutionary ‘germ theory of disease’ that Americans embarked on a crusade of cleanliness that would only intensify as the years went on. Ironically, it was the establishment of modern sanitation that left humans, who were no longer exposed to the virus in their early youth, susceptible to its crippling effects.

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The early 1900s saw the foundations of scientific medical research laid. At the dawn of the new century, America viewed itself as a nation of rapid progress much like England, yet it suffered comparably in the field of medicine where few opportunities for education or research existed. Wealthy businessmen such as John D. Rockefeller used their enormous wealth and influence to fund medical research. Rockefeller, who was particularly devoted to the cause of scientific medicine, opened the Rockefeller Center, an institution for funded, intensive research to be carried out in a clean, well-stocked laboratory setting, in 1902. Simon Flexner, the first director of The Rockefeller Institute for Medical Research, was able to parlay the privilege of funded laboratory research into the breakthrough discovery that polio was an infectious viral disease in 1909. Although Flexner was unable to fully unlock the secrets of the disease, he is significant as one of the first doctors in a new kind of medical field created in the twentieth century, drastically innovated based on the American desire for advancement. The new authority that scientific medicine wielded in American society, along with the field’s increasing specialization, birthing new fields like pediatrics, shaped the way polio was understood as a children’s disease for years to come.

The 1916 epidemic broke out in Pigtown, New York, a highly immigrant section of Brooklyn, and spread throughout the Northeast. People looked for a scapegoat for the outbreak and found it in the crowded, filthy immigrant ghettos of the city. On one hand, this early reaction to polio, the association of the disease with problems of the urban environment, reflects the Progressive Era mentality of cleanliness being near godliness and the ability of individual and societal transformation. On the other hand, it also reflects the commonplace, though perhaps

veiled, link between that mentality and nativism, class prejudice, and racism. Progressive reformers sought to rid America of the threats immigrant waste and moral vice specifically proved to middle class children and their families. Not only did there exist a desire to clean the cities but also a desire to save children through social and legislative reformation. Thus, cleaning the streets reflected more than a mere alteration of health and hygiene practices. It reflected also an ever more prevalent, child-centered mentality where ridding the streets of filth was in part seen as a way to rid the streets of the dangers posed to precious children.

Therefore, to combat polio, the usual methods of dealing with disease in a city were utilized: sewer control, water purification, pasteurization of milk, campaigns for educating people about quarantining the sick and cleaning their homes. Whatever the supposed impetus for carrying out these measures, embedded in this approach to handling polio was the assumption that immigrants carried the disease. The fear of immigrants, of dirt, and of disease, propelled middle and upper class parents in particular to pay even closer attention to children, serving to heighten the already growing child-centeredness.

As the disease spread, it began hitting rural and affluent areas to an even greater extent than it had immigrant slums, contradicting traditional associations. The epidemic lasted until October, affecting 27,000 Americans and killing 6,000. In New York, 80 percent of the 8,900 recorded cases, and 2,400 of the deaths, were children. These numbers proved devastating to a culture whose faith rested in the expertise of doctors and the advancements in scientific research.

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Americans turned their focus more firmly onto their beloved children, concerned that this time science could not solve all of their problems.

During the epidemic, mothers began taking their children to infant health stations, one of many advancements that came as a result of the growing prominence of scientific medicine and, more specifically, the growth of pediatrics as a separate field. Following the Civil War, Americans saw a rapid expansion of hospitals and public health programs funded by the government. Separate hospitals were even constructed specifically for children. Pediatrics emerged from a turn-of-the-century culture that had changed in its attitude toward children, where, for the middle and upper classes at least, children were seen as emotionally priceless and economically worthless. Americans believed that good health would make for good character and moral development and thus it was important that children receive medical attention catered to their bodies’ needs. Pediatrics addressed this need and, in turn, promoted this child-centeredness by providing children with specialized treatments. In the case of polio, these medical developments and the innovations they spawned meant children with the disease received closer attention than their adult counterparts, functioning to solidify polio as a “children’s disease” in popular culture.

In the summer of 1921, the course of polio in America was changed when Franklin D. Roosevelt contracted the disease. Not yet president, Roosevelt already was an influential public figure from a wealthy, well-known family. During a vacation with his wife and children at their summer home on Campobello Island, Roosevelt lost the use of his lower body following a summer day filled with strenuous activity. The incident made front-page news with the nation

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12 See Luther Emmet Holt’s *The Care and Feeding of Children: A Catechism for the Use of Mother and Children’s Nurses* (New York: D. Appleton and Co, 1905) and John B. Watson’s *Psychological Care of Infant and Child* (London: George Allen and Unwin Ltd, 1928) for implications of the physical health’s correlation to the moral and emotional.
shocked yet comforted by assurances of his full recovery.\textsuperscript{13} Although Roosevelt never regained
the use of his legs and carefully shrouded the severity of his crippling, his rise to American
presidency despite even his perceived handicap made him a triumphant figure and helped
transform public opinion of polio.\textsuperscript{14} Largely to his credit, Americans after the 1920s had a
distinctively different, positive image of polio than those before them, and his charitable efforts
ultimately helped define polio as a “children’s disease.”

Something else occurred in the 1920s and 1930s to undermine the nativist assumptions
of 1916: more and more middle and upper class children and young adults contracted polio,
often with highly visible effects.\textsuperscript{15} In a matter of years, polio went from being viewed as a
disease of filth and impoverishment to a “disease of cleanliness,” and, importantly, of middle-
class concern.\textsuperscript{16} Roosevelt, the height of cleanliness and good breeding, epitomized this new
image. People became preoccupied, unlike ever before, by the prospect of putting the disease, a
menace to children everywhere, to rest. With this preoccupation came a set of images and
rhetoric for rallying the public that centered on children. This new polio vocabulary perpetuated
a sentimentalized image of the child polio victim in a culture ready to embrace such an icon.
Ironically, though the most famous polio victim was an adult, the disease’s association with
children only grew as the century moved forward, crafted in large part by Roosevelt’s own
philanthropic endeavors and inspiring role.

III. 1938-1950s: The Height of the Polio Scare in America

\textsuperscript{14} For more on Roosevelt and how he crafted his persona, taking sometimes extravagant measures to hide
his paralysis, see Hugh Gallagher, \textit{FDR’s Splendid Deception} (New York: Dodd, Mead, 1985); David
Houck and Amos Kiewe, \textit{FDR’s Body Politics: The Rhetoric of Disability} (College Station: Texas A&M
University Press, 2003); Geoffrey Ward, \textit{A First Class Temperament: The Emergence of Franklin
\textsuperscript{15} Naomi Rogers, “A Disease of Uncleanliness,” in \textit{Hives of Sickness}, ed. David Rosner (New Brunswick,
NJ: Rutgers University Press, 1995), 118.
\textsuperscript{16} Naomi Rogers, \textit{Dirt and Disease}, 166.
Roosevelt’s creation of the National Foundation of Infantile Paralysis in 1938 proved a pivotal moment in polio history. Led by Roosevelt’s former law partner Basil O’Connor, the foundation usurped the role of doctors as the primary crusaders against the disease and funded the research that led to groundbreaking discoveries by both Jonas Salk and Albert Sabin. While some consider Roosevelt an “ironic” or “ambiguous” hero, due to the great lengths he went to to hide the magnitude of his disability, there is no doubting the influence he had on the image of and attitude toward polio in America.\(^{17}\)

The National Foundation was not, however, Roosevelt’s first philanthropic venture. In 1926 he purchased Warm Springs resort, turning it into the non-profit organization Warm Springs Foundation, which specialized in after-care facility for polio victims like himself.\(^{18}\) To raise money for the organization during the desperate lows of the depression, Carl Byoir, a man well-known in public relations, along with controversial businessman Henry L. Doherty, Keith Morgan, and Basil O’Connor, promoted a new kind of philanthropy, at odds with traditional methods, but more in line with a nation recovering from a recession.\(^{19}\) They created the President’s Birthday Balls, where for one night, in commemoration of the president’s birthday, groups across the country would hold a lavish fundraising dance. The parties, matched with a slogan of “We dance so that others might walk,” were held by more cities than any of the men had imagined and, instead of depending on large donations from heavyweight philanthropists as in the past, they relied on small donations from thousands of concerned Americans. Drawing on Roosevelt’s initial popularity as president, the first Birthday Ball night was a sweeping success,

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\(^{19}\) Victor Cohn, *Four Billion Dimes*, (Minneapolis, 1961) 33.
redefining philanthropy while also greatly influencing the face of polio in American society. Roosevelt’s role as the polio hero was set in stone early on.

What is important to note for the purposes of this project is that the Commission utilized advertising centered on children, a tactic the National Foundation would adopt and magnify. As Oshinsky notes, “from a public relations standpoint, Byoir had to connect an immensely popular president to a rare and mysterious ‘children’s disease.’” Byoir succeeded and, appealing to an increasingly child-centered America, the tactic both ensured participation on local and national levels, as well as aided in the reshaping of the disease that would only be intensified with the creation of the National Foundation. The heroism of Roosevelt was matched with the sentimental appeal of children, a pairing that would capture America’s collective dedication.

For political reasons, the National Foundation ultimately replaced the Warm Springs Foundation. While Roosevelt remained the source of inspiration, he shied away from active a role in the organization, focusing on his job as president and leaving the main decision-making to O’Connor. The National Foundation reinvigorated the cause, giving the polio crusade a second wind. And the label ‘March of Dimes,’ given to the National Foundation’s fundraising division by entertainer Eddie Cantor, became a household name, popularizing the cause more than ever before.

During the 1940s and 1950s, the height of the polio epidemics, polio reigned among other diseases as the most feared because of its mysterious nature, its highly visible symptoms, and its effects on childhood. Anyone could get it at any time and many did: 5,000 new cases were recorded in 1933; 25,000 in 1946; 27,000 in 1948; and 33,000 in 1950. Though these numbers seem high, there were other diseases at the time that affected many more Americans,

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yet polio managed, more than any other disease, to capture America’s collective imagination. And this hold polio had on Americans was largely because of the disease’s association with children.

Much of polio’s “special status” as most discussed and feared derived from the work of the March of Dimes, which used the most innovative marketing techniques of the time to gain support for fighting the epidemic. This turned polio into its own celebrity, capitalizing on the idea of it being a “children’s disease,” and setting that idea in stone. The organization took the interest and concern from the 1916 epidemic and magnified it and, as a result, not only affected the way polio was presented and perceived, but also left a lasting impact on American society.

As Oshinsky notes, the foundation, revolutionize[d] the way charities raised money, recruited volunteers, organized local chapters to care for local people, and penetrated the mysterious world of medical research…the foundation created a new model for giving in America, the concept of philanthropy as consumerism, with donors promised the ultimate personal reward: protection against the disease.22

Created during a time in America marked by the preeminence of scientific medicine and a relatively new cultural focus on children, the foundation in turn propelled these ideals while ushering in a new era of philanthropy that would forever associate children, specifically fair-skinned and adorable children, with the word ‘polio.’

The National Foundation shaped polio to cater to an American audience. Therefore, the exploitation of the disease’s association with children was not an arbitrary marketing decision. Polio prior to the Foundation’s creation had been crudely campaigned for, never effectively drawing on the interests of the majority; and while the fear that the 1916 epidemic incited did

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leave a powerful impact on society, the ways in which the disease had been dealt with did not. It was not until the National Foundation undertook the cause, under O’Connor’s shrewd leadership, that polio was manicured into a disease that could effectively appeal to the sensibilities of American citizens. Emerging technologies, the rising consumer economy, and the growth of the complementary world of advertising all functioned to insert the child polio victim into homes of families across the nation.

While early campaign strategies focused on the image of Roosevelt, sometimes surrounded by young girls dressed innocently in white, or boys sharing a moment with their hero at Warm Springs, the iconography changed in the 1940s and 1950s to appeal to Americans’ top priority, their children. As Victor Cohn describes, the new marketing tool was, “the annual ‘poster child,’ a youngster in braces who would make anyone turn his pockets inside out.”

Children easily filled Roosevelt’s shoes as the key selling point for the National Foundation, gracing the pages of print and poster advertisements across the nation.

Thus, the March of Dimes capitalized on American culture’s child-centeredness and, in its effective marketing, enhanced it. One needs only to look at a New York Times feature on the foundation entitled “Polio Poster Children” for evidence. Using images of children suffering to various degrees from polio, the foundation played on the emotions of the American public. In one poster from 1946, two images of Donald Anderson, the first official poster boy, are juxtaposed: one of him in a brace and the other of him walking proudly forth under the heading, “Your dimes did this for me.” He is shown standing, smiling, with a pair of boxing gloves on. The caption explains that although he still wears a back brace, he is an aspiring boxer and looks forward to baseball season and riding his bike.24

23 Victor Cohn, *Four Billion Dimes*, 61.
24 Ibid.
In another poster in the same article, this time from 1947, Nancy Dury, no more than five years of age, holds tightly to the bars on her walker. Looking out from the poster, her face looks longingly, corresponding with the text, “Help me walk again…” Next to the reproduction of the poster, the newspaper displays a picture of the same girl from the poster, this time standing up, smiling brightly. A caption below explains that, because of the March of Dimes, she can walk, much to the delight of her mother who sees her crippling “like a bad dream” now that she and her husband can watch their daughter walk and play as well as her friends.25 Like the photograph accompanying the poster of Donald Anderson, this one of Nancy Dury portrays childhood triumphant, where the ability to run and play are the ultimate rewards of an ideal, precious childhood. As Cohn said, American’s were hard-pressed to refuse donations when faced with such adorable children.

The use of children as gimmicks in advertising is part of the greater phenomenon of child-centeredness, which intensified during the beginning years of the National Foundation. In his book *The Cute and the Cool*, Gary Cross examines the increasing importance of children in American culture in the twentieth century, a focus that he says created the idea of a child being ‘cute’. In the polio poster children images, the ‘cute’ that Cross describes is supposed to appeal to middle-class sensibilities and encourage participation by donation at the very least. Each polio poster child represents the traditional gendered ‘cute,’ with Nancy posed coquettishly, a ribbon in her hair, and Donald wearing boxing gloves, looking mischievously at the camera.26 They conveyed the ‘ideal’ childhood—all smiles and playing—that needed to be saved by way of curing polio.

In her essay “Seeing the Disabled,” Rosemarie Garland Thomson characterizes the visual

rhetoric of March of Dimes images as ‘the sentimental,’ a discourse of the “middle class noblesse oblige operating on a model of paternalism, often trafficking in children and alluding to the cute, the plucky, the long-suffering, and the courageous.”

What is important in Thomson’s statement is that the discourse, centered on children, had a message aimed at an intended audience and thus had an active role in creating the general understanding of the disease. Not only was the March of Dimes echoing a larger cultural sentiment of wanting to protect ‘cute’ children, but it also managed to effectively create the image of polio as a “children’s disease,” despite the fact that many adults—heroic Roosevelt himself—contracted the disease. With children central, finding a cure became an especially pressing concern.

Implicit in these posters also is the portrayal of an excessively hopeful attitude toward polio recovery, characteristic of the years between 1938 and the mid-1950s. Using children as the face of this hopeful attitude perpetuated the idea of polio as a “children’s disease” that could—and indeed needed to—be overcome in order to restore the ideal childhood. This optimistic attitude corresponded with the Roosevelt image of polio, of a champion able to triumph over the disease through sheer force of will, hard work, and determination. Children were encouraged to model their own rehabilitation after Roosevelt’s, utilizing their strength of mind in hopes of transferring that strength to the body. When that didn’t happen, children often felt that they had disappointed their parents or nurses.

The March of Dimes utilized such a triumphant image, resisting images of physical weakness, which could potentially be read as a weakness of the self, in favor of the faces of bright, smiling, cheerful, and healthy children. Even when the images chosen were ones showing braces, iron lungs, or wheelchairs, a current of

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impending triumph underlined the message.

The fair-skinned, smiling child in the polio’s new visual rhetoric affected how people interpreted the disease. Because that rhetoric had been propelled by advertising and boosted also by celebrity affiliation, it quickly and successfully permeated American consciousness. One can see this effect at play in an article in the *Greensboro Daily News* from North Carolina. In the piece, written about polio patients, it was reported that,

if your child is beautiful, lively, personable, active, vivacious, attractive, cute, a leader or above average in intelligence, then he or she [was] in greater danger of polio. There are but few dull, unattractive patients [here]…They have a more competitive attitude toward their playmates, and therefore will swim harder in the pool, run harder on the playground [and] become more exhausted…where fatigue goes, old man polio stalks pretty close behind.”

From this description, one can see that the ideal child had been elided with polio. In stark contrast with the bleak associations between the disease and immigrants, tenement buildings, and filth that had once prevailed, this image of the polio patient reflects what Americans perceived as the best America had to offer: bright, youthful, energetic, and ambitious children, future citizens of a triumphant nation.

Polio hit at the very soul of American culture and self-identity. As David Wilson writes, “The polio experience in the mid-twentieth century is deeply embedded in American culture and society. Paralytic polio struck hard at the American Dream of post-WWII America, which envisioned healthy, happy children growing up to be successful adults through hard work and individual achievement.” Since parents saw polio as “killing the American Dream,” it was the

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job of the National Foundation to reinforce, through images and text, that polio victims could still achieve relative normalcy in their lives, that all was not lost.\textsuperscript{30} Therefore, the polio language developed during these years encapsulated the projected ideals of Americans, of what they thought was most dear, most worth fighting for.

Americans did not respond to the National Foundation in droves merely because of the optimism the organization pushed forth. Rather, the Foundation was careful to also promote an imagery of fear to coexist with that triumphant attitude. American generosity, then, stemmed from the unique combination of dread of the disease’s ravages and optimism in the power of American goodwill (and dollars) in eventually undermining the disease. The widespread panic felt primarily by parents for their children propelled much of the most drastic measures taken during the late 1930s and into the 1950s. Parents kept their children from public places and sometimes even public pools, parks, and movie theatres were closed for fear of contamination. Nothing was too great of a measure to protect children from the disease.

The National Foundation recognized the effectiveness of drawing on people’s fears, most poignantly their fear of not seeing the perfect American dream life manifest. Fred Davis, in his book \textit{Passage Through Crisis}, writes that “another key assumption in the American value system” was that “misfortune rarely touches those who take the proper precautionary measures.”\textsuperscript{31} Thus, because of such a value system as Davis describes, parents of polio victims often blamed themselves, feeling guilty that they hadn’t kept a clean enough house or kept their children away from pools or other public places well enough. Parents, in an age where parenthood became increasingly important, felt guilty when they saw their child’s childhood robbed from them by the disease. All of the dreams they harbored for their children during this

\textsuperscript{30} David Wilson, \textit{Living With Polio}, 252-3.
period of national prosperity were challenged, if not vanished. Seeing others go through such an ordeal, the American family feared the same fate.

In a 1950 New York Times article entitled, “Let’s Avoid the Polio Panic,” Victor Cohn discusses the “polio hysteria” of the late 1940s and questions the unmeasured psychological effects it has on children. He writes that, “Thousands of parents and children suffer from ‘polio jitters.’ These jitters may be causing a wholesale change in America’s pattern of summertime living…but without affecting polio one way or another.” In response to the panic, Cohn sites the “safe and sane rules” set down by eighteen health experts in June 1949 at a conference held by the National Foundation. The rules focused on keeping business as usual within the lives of American children, disturbing normalcy only as a last result. Cohn concludes, “We as parents cannot abolish poliomyelitis. But we can ask the question: Does hysteria help?” This rhetorical question is answered in the article and in the dos and don’ts set down by the health experts with an overwhelming no.32 Interestingly, the lack of any mention of the effect the hysteria might have on adult polio victims, already ostracized by a disease entitled “infantile paralysis,” reflects how intrinsically connected polio was with children in American discourse and imagery.

Although Cohn’s focus on hysteria’s effect on American family leisure time and children’s routines may seem superficial to modern eyes, his words summarize a very real concern of the time, a concern centered around children. The late 1940s and 1950s were characterized by the post-World War II economic boom, and the greater purchasing power Americans enjoyed in this time of economic prosperity gave them the confidence and incentive to marry and start a family. Thus, the ‘Baby Boom’ commenced and children became an even larger force in American culture. Cohn’s article then reflects the growing suburban culture, where children defined leisure time. Family outings, such as the swimming trip Cohn describes,

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centered on the belief in children’s responsibility to play, to be children. While polio presented a devastating fear for parents because it limited children’s movements, and therefore their abilities to play, Cohn suggests that the fear can be equally detrimental to the child-centered family life. His article represents the values of a culture with an intensifying child-centeredness, while at the same time it highlights the image of polio as a children’s disease, making the overall concern for children more important and visible.

Strangely, at least to modern eyes, the plea to stop the polio hysteria for the sake of children is juxtaposed with another plea added at the end of the article: “And let’s avoid another kind of panic, too! Despite the fighting in Korea, there are no shortages—no immediate prospect of any. Don’t hoard.” The centrality of the polio epidemic in the lives of Americans in 1950 and the years just before and after can be witnessed in this association with the social politics of war. In the PBS video *Polio: a Paralyzing Fear*, the attitude toward polio during the 1940s is shown in the disease being considered the “war on the Home Front,” analogous to World War II being fought overseas. This domestic war would be fought for the nation’s children, demanding that women be at the front line, serving as nurses, campaigners, and, within the domestic sphere, as mothers working to protect their children and champion the cause in their communities.

No image embodies “war for children” rhetoric than the March of Dimes Poster, “This Fight is Yours,” designed by the *Saturday Evening Post* illustrator John Falter. In the poster, a young, fair-skinned boy in a cowboy hat, smiling brightly while standing with the help of arm braces, is superimposed in front of a much larger image of a somber soldier, one arm reaching out while the other holds a gun. In contrast to the young boy who wears popping colors—blues jeans and yellow shirt with green pockets—and whose face shines forth in warm peach tones, the

33 Ibid.
soldier is shaded in with grey and black, against a red background. The text above the ubiquitous “Join the March of Dimes,” reads, “This Fight Is Yours.” Whereas the war overseas was one fought by men in the military, this war, for the children of America, could be fought in every household, by every person across the nation.\textsuperscript{35} The war rhetoric and imagery utilized ultimately framed polio in a unique way that altered public perception of the disease. Not only was polio a disease no longer associated with immigrant slums, but it was also specifically associated with children and took on the epic proportions of war.

Cohn’s article reflects the degree of child-centeredness American culture had reached by 1950. And indeed, in his book \textit{The Disappearance of Childhood}, Neil Postman argues that 1950 was the watershed year in the history of childhood, the high point in American culture’s embrace of “childhood” as a period in life when humans are sheltered from certain things only adults are privy to.\textsuperscript{36} This idea is reflected in Cohn’s concern for the well-being of children. His article, written during the watershed year of 1950, focuses not only on how children can be harmed psychologically by the polio hysteria, but also that, if adults don’t mind themselves, a child’s ability to be a “child”—to play, to go to school, to \textit{enjoy} life—might also be compromised.

A significant part of the National Foundation’s mission was to fund scientific research. The organization’s emphasis on research reflected the greater national trust and reliance on science to one day solve all things. The rise of medical science to a position of authority in the first half of the twentieth century infused the fight for children with an intense passion, facilitating the molding of the disease into one specifically associated with children. Science would provide the weapons to fight the war on the home front, to defend the nation’s children. In

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\item[]\textsuperscript{36} Neil Postman, \textit{The Disappearance of Childhood} (Vintage, 1994).
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a 1953 article written about the prospects of the Salk vaccine, Leonard Engel writes,

The impending triumph over the disease that, more than any other, strikes fear into the hearts of parents, caps a story that could only have been written in America. The new means of fighting polio, as well as much of our knowledge of the disease itself, are a joint product of the unique American wealth of scientific and technical skills, and our national willingness to contribute dimes and pennies for a worthwhile cause.

This passage embraces the conversion Americans went through during the late 1800s and into the mid-1900s, from a reliance on religious doctrine to a feverish adherence to scientific medicine, a conversion which, since it included the development of pediatrics, fostered the idea of polio as a “children’s disease”.37 In the post-World War II era, Americans believed they could conquer polio, a conviction that ultimately came true with Jonas Salk’s killed-virus vaccine, released for general use in 1955 and Albert Sabin’s live-virus vaccine, released for use in 1961.

The passage also reflects a second part to this story. This story, Engel says, “could only have been written in America.” Thus, the story of a “children’s disease” is also the story of a particularly American disease, reflecting the interests and concerns of a people. The National Foundation’s efforts, innovative advertising techniques and technology, the newfound authority of scientific medicine, and the prosperity of the years during and after World War II all cultivated a society-wide focus on children. Polio became the conduit, by which Americans could channel their energy—their fears and hopes and desires—and ensure a prosperous future for their children and for the nation.

IV. Conclusion

Concurrent with the historical developments were, of course, the individual experiences. One shortcoming of writing history is that one can never encompass every nuance of a subject, and the polio experience is laced with such nuances, making it a difficult journey to track faithfully. Rather than present what has just come before as the whole story it is crucial to acknowledge the diversity of the experience behind it. While many polio victims enjoyed partial or almost full recovery, many did not and suffered serious paralysis their whole lives. Despite the March of Dimes iconography, not all polio victims were children, white, or cheerily optimistic. Although the focus of this project does not extend into a true analysis of the polio experience, it is crucial simply to acknowledge that there exists a disparity between the polio “celebrity” created by the National Foundation and the polio patient’s conception of the disease. What one finds when reading memoirs is that connections can be made between cases, and generalizations may be made, but the reported experiences often delineate from the triumphant Roosevelt model, revealing an array of coping skills, reactions by others, and dynamics within society.

Before Roosevelt, polio had negative connotations, of immigrants, slums, filth, poverty, ignorance, and thus, a polio victim viewed his or her own experience as one of shame. Hidden away from the public eye, polio victims lived a life of isolation. Roosevelt undermined this image and experience of polio, providing a respectable success story for victims to look to. Although he provided an adult model for the disease, polio ironically continued to be considered an almost exclusively “children’s disease” until its virtual eradication. Only years later could adults speak out about having had the disease as a child, living with it still as an adult, or the less common experience of contracting the disease as an adult.

In her article “The Polio Narratives: Dialogues with FDR”, Amy Fairchild investigates

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how, from the mid 1950s on, polio narratives, which had once championed the Roosevelt image of the polio victim, began to tell a different story. No longer were the stories of full recovery based on the will and determination of the polio patient, but instead they wrote more explicitly about the challenges they faced, more often reflecting on experiences where only partial success over crippling was possible. Fairchild points to the social and cultural changes partly responsible for these changed attitudes and finds that this second wave of narratives was created during the period of McCarthyism and the Civil Rights movement, a period of increased dissatisfaction and openness to expressing unhappiness, restlessness, and resentment. They contrast with the narratives written earlier, in the prosperous wake of World War II, when Americans were generally content or, if they were not, did not express such sentiments. Although the images of polio changed over time, ultimately becoming ones of victory, many polio victims did not experience such success but could only express those feelings of failure and alienation much later.

In the PBS documentary, A Paralyzing Fear, adults who contracted polio as children express a range of sentiments regarding their childhoods, from excitement over visiting Roosevelt’s Warm Springs treatment center to frustration over being stuck in an iron lung for decades to anger at having been called “crip” or “polio.” These memories betray the March of Dimes’ simplified and straightforward representations of children. It seems that both the adults writing the narratives after the mid-1950s and the adults interviewed for the PBS documentary not only felt more freedom to be candid in their recollection of childhood experiences due to their political and social climate, but also because of elapsed time. Particularly those interviewed for the documentary conveyed a sense that their reflection on childhood had evolved over time as

they could better cope with the memory of their unique circumstances, aided by the increasing acceptance of disabilities within American culture. The overwhelming focus of such discussions of polio experiences remain on childhood, even when the subject is an adult still suffering from symptoms of the disease, reflecting the pervasive identification of polio as a “child’s disease” that lasts even today.⁴⁰

Today, polio is still remembered as a “children’s disease,” not only because it inflicted so many American youths but also because of the influential expansion of scientific medicine and pediatrics, the post-World War II prosperity and ‘Baby Boom,’ and the National Foundation’s revolutionary marketing and fundraising tactics. The child-centered imagery and discourse of the time reflected the concern and interests of the American public and, thus, the desired face of polio. That fair-skinned, adorable children embodied what was at stake in the fight against polio, and is a testament to the power children had in society. To trace the history of polio, therefore, is to also trace the growing role of the child in the family and in American cultural development.

Works Cited


