and inadequate diet. Inadequate assistance at delivery also is a factor. Alabama does not have a statewide program that provides hospitalization for expectant mothers who cannot afford such costs. As a consequence, many indigent mothers have their babies at home, with only a midwife's assistance. Dr. Myers testified that there are about 700 midwives in Alabama at the present time. The Department of Public Health issues premits for the practice of midwifery and conducts periodic courses for midwives. In 1966, one out of every 10 deliveries was by a midwife.

Eight of the counties in the hearing area have school health programs financed under Title I of the Elementary and Secondary Education Act. Under this program school children are examined for medical and dental defects by nurses hired with Title I funds. Federal money is provided for treatment of any defects found in needy children, but it is up to the child's parents to find a doctor who will treat the child.

For general medical treatment indigent families must rely on the good will of local doctors who must provide their services free if necessary treatment is to be rendered. Local service organizations must be petitioned for funds for necessary drugs and other corrective items. Home health care services are generally unavailable—the ill must either be able to travel to the county health clinic or go without even the limited public health services theoretically available to them.

Alabama does not have a Medicaid program which would provide medical services and drugs to public assistance recipients and other needy persons.

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