

ANNOTATIONS

HEALTH AND HUMAN PROGRESS¹

WITHIN the 250 pages of this book the author has attempted to assemble the facts which portray the evolution of human progress insofar as health is an accompaniment of it. René Sand is at once philosopher, scientist, and internationally-known public health and social worker. His connections with the University of Brussels, with various health committees of the League of Nations, and his experience as organizer of international conferences of public health and of social work have served well to prepare the author for this undertaking. His activities in these fields have put him in touch with historical source material, with current reports, surveys, and scientific studies, and with the wide variety of administrative arrangements for carrying on public health activities in the countries of Europe and America. He has also had unusual opportunity to know personally those who, in recent years, have made the greatest contributions to both the science and the art of public health throughout the world.

The theme of his undertaking is well characterized by his quotation from the philosopher, Bergson, which he places conspicuously as a frontispiece to his book: "Man hardly realizes that he can shape his own destiny." M. Edouard Herriot, in a preface, interprets Dr. Sand's efforts as attempting "to make progress serve us instead of enslave us."

The first two chapters are devoted to an historical and philosophical statement of the evolution of socialized medicine. He points out that medicine, nourished as it was by physics and chemistry, and subsequently by physiology, bacteriology, and parasitology, "did not approach the social domain spontaneously, but was dragged into it by the development of hygiene, of public assistance, of social insurance, of labor

¹ Sand, René: HEALTH AND HUMAN PROGRESS. New York, The Macmillan Company, 1936. 250 pages.

legislation." The contributions of psychology and sociology added to the more rigid, scientific contributions of other sciences which earlier dominated medical advance tended to make medicine more social, more humane, more disposed "to recognize the whole nature of man, as shaped by his home, his surroundings, his work, his recreation, his struggles and aspirations." "We observe," says the author, "that nothing remains individual. Everyone borrows from the community. Production and sale, education and assistance, become collective functions calling for a rational organization. Henceforth can medicine be anything but a social service?"

Within the compass of a few pages the author traces the historical evolution of the concept of social medicine and illustrates the gradual working out of this concept in actual activities in the centuries preceding our own. He also refers to the evolution of science from "the abstract idea of the typical man," to the observation of actual differences in the same individual. This tended to break down rigid partitions, and to demonstrate increasingly the complexities and, at the same time, the complete interdependence of scientific factors in every personality, and that this interdependence extends to all the factors of the life of all. Our modern life is built on interdependence of individuals and of nations. To affect most helpfully the individual or the group then, "the priest, the physician, the teacher, the judge, the business man, the nurse, and the social worker cannot act in compartments, but must combine their efforts." In this part of his discussion, Dr. Sand gives us a helpful interpretation of the difference of national emphasis which has occurred in the evolution of sociological medicine in the leading countries of the world where medicine and public health have made most significant advances.

To help the reader appreciate the influence of various existing classifications of society upon public health and progress, he reviews the effects of the distribution of population between town and country, of the density of population, of the grouping of society into active and productive workers as distinguished from non-active, of the division of population on an economic basis as measured by amount of income, of occupational groupings, as well as other significant divisions of society into so-called classes.

This prepares the way for the discussion of one of the best chapters of the book, entitled "Balance Sheet of Sickness and Death." In broad

strokes in this chapter he compares the mortality and morbidity of the important countries of the world. He shows how these have changed in historical times. He reviews the facts with regard to duration of life comparatively by countries at the present time, and the differences in rates of change in longevity in these countries for such periods as there are reliable data. He brings together comparative facts with regard to the mortality at different ages in different countries. He analyzes deaths by their leading causes, and shows present facts with regard to these as well as the changes which have taken place in these factors. He assembles available statistics of morbidity, and reviews the relation of the rates of morbidity to the rates of mortality in different groups of diseases. He points out that physical and mental vigor, or general *fitness*, is much less general than commonly believed. He asserts that "the rapidity with which human material is wasted" is striking, and cites as illustrating this a study of 436,000 infants born in France in 1894. Only one-half of these reached the age of twenty in good health. "In 40 years, at the actual rate of mortality and morbidity in France, of 100 infants conceived within the year, 40 would be dead, 30 would be more or less unfit, and 30 only would enjoy good health." Progress is more than saving life, he says. It is related even more to the preservation and development of health and vitality with reference to productiveness and happiness. In the discussion of this balance sheet he brings together facts that tend to show that health efforts pay, and therefore should be supported on economic as well as other grounds. He also raises and discusses the objection frequently made that hygiene and social action tend to paralyze natural selection as a factor in progress, and after assembling facts relating to this concludes with the statement, "Selection by negligence and ignorance is not natural selection."

In another interesting discussion, Dr. Sand presents and criticizes data which tend to show physical and mental inequality among individuals of different social classes and groups. He presents evidence that tends to show that in size and weight there are little differences between economic and social classes at the very beginning of life, but that important physical changes are observable soon after. The evidence of these differences, both physical and mental, is brought together from a wide variety of sources and discussed critically and interestingly. He summarizes this with the statement that "For physical vigor as for intelligence, as well as for disease and death, inequality is patent between

the social classes. Except in extreme destitution this inequality does not exist at birth; it appears during the first weeks of life, becomes accentuated during childhood, diminishes later, but never disappears. These differences are reduced by the progress of hygiene and welfare."

An important part of the volume is occupied with a review of the more significant factors affecting health and human progress—heredity and environment, occupational factors, domestic factors, economic factors, sanitary factors, and educational factors.

In the concluding chapter, entitled "Human Economics," Dr. Sand points out that "Each country, within certain limits, decides its own mortality." He points out that mortality in the first two-thirds of the Nineteenth Century exceeded 30 in all countries, whereas at the present time it is 8 in New Zealand, 8.6 in Australia, 9 in Holland, 9.9 in Canada and South Africa, 10.8 in Germany, 10.9 in the United States, 12 in England and Wales, and in other countries varies all the way from the low of 8 in New Zealand to the high of 28.8 in Egypt. He cites the fact that the average duration of life, which in ancient times appears to have been about 25 years, although not exceeding this greatly today in India, China, and Egypt, has risen to more than 60 in the United States, Australia, Denmark, Sweden, Holland, and New Zealand. Two centuries ago, he reminds us, one infant out of three died before it was a year old. In China and equatorial Africa this record is still not much better; but in twenty-six countries out of fifty-five possessing vital statistics only one infant in ten or even lower now dies in the first year, and in New Zealand, only one in thirty-one. The history of civilization has been a correlated improvement of both health and economic status of individuals and families. Poverty is less as health increases, and lack of health and poverty have historically been united in a vicious circle. Sociological medicine, closely allied to hygiene and social policy, aims at the full protection and development of human personality, including its physical, economic, and spiritual values.

Such are some of the facts and conclusions presented in Dr. Sand's interesting volume. It is interesting and readable in spite of the fact that it assembles so many summaries of facts that it also makes a handy reference volume. Although published in America, its facts and conclusions are drawn from such wide international sources that it should appeal to readers of many countries, particularly those most concerned with developing still further through public hygiene and social action

the health, vigor, economic productivity, and happiness of their fellow citizens. It is more than a treatise on public health. It is a discussion of the history and possibility of social well being with special reference to health.

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SURGEON GENERAL'S REPORT ON HEALTH AND DEPRESSION STUDY

IN the Annual Report of the Surgeon General of the United States Public Health Service to Congress, for the fiscal year 1935, an account is given of various studies conducted by the Office of Statistical Investigations on health and the depression. Most of these studies were conducted in collaboration with the technical staff of the Milbank Memorial Fund and the results of these particular studies have already appeared in the *Quarterly*. That section of the Surgeon General's Report which deals with this subject was prepared by Senior Statistician Selwyn D. Collins and gives a succinct summary of the results of the various inquiries. It may be interesting to readers of the *Quarterly* to quote from the official report as follows:

Studies of various phases of the relation of sickness to the depression have been continued throughout the year. Three papers in a series which is to constitute a final report on the subject were sub-

Incidence of disabling illness in the early spring of 1933 in 11,511 canvassed white wage-earning families classified according to employment status of the wage-earners during 1932, in ten localities.

EMPLOYMENT STATUS OF THE FAMILY'S WAGE EARNERS	ILLNESSES PER 1,000 PERSONS FOR THREE- MONTH PERIOD (Adjusted for Age)			NUMBER OF PERSONS OBSERVED
	Total	Onset Within Survey Period	Onset Prior to But Sick During Sur- vey Period	
Full-time workers (with or with- out part-time workers)	123	91	32	21,022
Part-time workers (1 or more; no full-time)	160	112	48	21,224
No employed workers	182	121	61	4,935