

A moderately intensive study of fertility of rural women was made from a sample of registration records. The limitations of this study are pointed out both in the report and in the appendix following the report proper. Some of the possible biases inherent in the survey procedure are disturbing, but not enough detail regarding the survey is given to enable the reader to evaluate fully the study. In spite of this defect, the findings of the study are interesting. The author again concludes that the present rate of natural increase cannot long continue because resources are limited and opportunities for emigration are virtually nil. Thus, unless drastic action is taken by government officials to reduce the fertility rate—a step that is not likely to be taken soon—the mortality rate will, of necessity, rise appreciably in the not so distant future.

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### COMMUNITY CONDITIONS AND PSYCHOSES OF THE ELDERLY<sup>1</sup>

THIS report presented originally at the American Psychiatric Meeting in Los Angeles, California on May 5, 1953 shows the preliminary findings of the possible effects of social conditions upon persons with cerebral arteriosclerotic and senile psychoses. The investigation was conducted by a group in the research section of the New York State Mental Health Commission.

The group outlined several areas to be explored:

1. Do cerebral arteriosclerotic and senile psychoses hospital admission rates vary in different populations?
2. If so, what characteristics distinguish the populations with high rates from those with low rates?
3. Do such variations reflect disease incidence variations?
4. Are the characteristics of populations with high rates characteristic of patients, or only of their associates?
5. Do modifications in the related characteristics of high rate populations reduce the incidence of cases?
6. And/or of hospitalized cases?

Preliminary findings were obtained for the first two ques-

\* Bureau of the Census.

<sup>1</sup> Gruenberg, Ernest M., M.D.: Community Conditions and Psychoses of the Elderly. *American Journal of Psychiatry*, June, 1954, 110, pp. 888-896.

tions, and from the data it was indicated that there was a high incidence of first admissions to a mental hospital among persons with cerebral arteriosclerotic and senile psychoses from the heart of the City. Furthermore, the percentages of multiple family dwellings and of persons living alone were relatively high in this area.

In order to determine the characteristics distinguishing the population with a high rate of first admission to a mental hospital from the other populations in the City, several criteria had to be considered. These included the selection of a city which was:

- a. big enough,
- b. not unrepresentative of American cities in its size range,
- c. which has been census tracted by the United States Census Bureau with more or less socially homogeneous census tracts,
- d. with a climate of opinion favorably disposed towards co-operation with forward-looking community research.

The city of Syracuse, New York was chosen for study. Cerebral arteriosclerotic first admissions to a mental hospital were allocated to the census tract. Admissions from nursing homes, hospitals, and other institutions were omitted. Computation of census tract rates and computation of "expected" admission rates from each tract were made. Selection of census tracts which had high rates, and the determination of the characteristics which separate the high rate tracts from the rest of the census tracts, were considered.

It was found that ten of the fifty-two census tracts in Syracuse had high first admission rates to a mental hospital, and that they were located in or near the heart of the City. Furthermore, the investigating team discovered that there were twenty-five census tracts of low socio-economic status including the ten high rate tracts. Because it was revealed that some of these tracts did not have high first admission rates to a mental hospital, a study was made using a composite socio-economic index, comprised of six items, to determine the difference, if any, between the high rate tracts from the other lower socio-economic tracts. The index consisted of the following items:

1. Mean contracted or estimated rental.

2. Percentage of homes with mechanical refrigeration.
3. Percentage of homes which were detached, single-family homes.
4. Percentage of persons in certain occupations.
5. Percentage in the labor force looking for work.
6. Median school year completed.

In addition, a direct inspection of the area was made. It was of particular interest to note the high number of multiple family dwellings within this concentrated area. From examination of the data and the area, it was felt that other sociological factors were more important in the hospitalization of psychoses rather than the socio-economic score. Whenever the density of dwelling units per structure increased, the first admission rates to a mental hospital were correspondingly higher, and likewise, the percentage of persons living alone also seemed to be higher in the first admission rates of persons with cerebral arteriosclerotic and senile psychoses. It was shown, however, that all other psychoses combined had this same relationship, although individual types had not been explored.

This analysis pointed up the need for further study to resolve:

1. Determination of whether a disproportionate number of hospital patients tend to have been living alone prior to hospitalization.
2. Determination of whether the cases come disproportionately from multiple family dwellings.
3. Determination of whether those first admissions who were not living alone at the time of admission were undergoing a process of social isolation without physical isolation.
4. Determination of whether isolation is an early symptom of psychosis formation, is causative of psychosis, or both.
5. If physical or social isolation is found to be causative, determination of methods by which such isolations may be prevented and by which it can be arrested and reversed once begun.

This report has shed light on the community conditions surrounding the aged person, and it is hoped that if the amelioration of some of these conditions will alleviate the inevitability of psychoses, progress toward better health will be realized soon for these individuals.

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