sults of the first survey utilizing the questionnaire and some plans for future analysis.

Infant mortality for many years was accepted as a sensitive and useful index of socio-economic status of populations. With infant mortality in the United States reduced to about 26 per 1,000 live births in recent years, as a result of the large reduction in deaths from infectious diseases and other conditions associated with levels of living, the relationship between infant mortality and economic status has undergone a great change. An analysis of variations in neonatal and post-neonatal mortality among five socio-economic areas of Providence, Rhode Island is presented by Edward G. Stockwell in the article entitled "Infant Mortality and Socio-Economic Status: A Changing Relationship." The author finds no consistent association between total infant mortality and different segments of the population. For deaths after the first month of life, the traditional inverse correlation between "social rank" and mortality is shown, but these deaths accounted for only 20 per cent of the total infant mortality. Neonatal mortality, on the other hand, was higher in the areas of high social rank than in those classified as medium or low social rank.

ERRATUM

The editors wish to point out that in the article The English Open Mental Hospital: Implications for American Psychiatric Services, by the Honorable George R. Metcalf which appeared in the October, 1961 issue of the QUARTERLY, the following excerpt should be corrected:

"Such data as these have caused Britain's General Register Office to lower the official estimates on the future needs for mental hospital beds from the current ratio of 3.4 per 1,000 of population to 1.5 in 1976." (Should be 1.8 in 1976) p. 589