

**SOCIOLOGY AND THE FIELD
OF PUBLIC HEALTH**

EDWARD A. SUCHMAN

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The major health problems that have confronted men in pre-historic and historic times have derived from basic facts of community life. Foremost have been the provision of water and food in sufficient supply and of good quality, the prevention or control of disease, the provision of care to the sick and the disabled, the relief of destitution, and the control of the physical environment as it seemed to be linked to health conditions. The relative emphases given to these problems have varied from time to time, but they are related, and from them has developed public health as we know it today. C. E. A. Winslow in 1920 defined public health from this point of view as "the science and art of preventing disease, prolonging life, and promoting health and efficiency through organized community effort for the sanitation of the environment, the control of communicable infections, the education of the individual in personal hygiene, the organization of medical and nursing services for the early diagnosis and preventive treatment of disease, and the development of the social machinery to insure everyone a standard of living adequate for the maintenance of health, so organizing these benefits to enable every citizen to realize his birthright of health and longevity." With a few minor alterations, this definition is still valid: public health is community action in the interests of health.

Thus, public health is a significant functional system of the community. Evidences of activity related to community health have been found in the very earliest civilizations, and public health activity has been linked in one way or another with the political,

economic, social, and cultural conditions of particular groups of people. In earlier periods, these relationships were not subjected to investigation, a situation related in no small measure to the simple organizational patterns in which they were involved.

Although the medieval European community did not have an organized public health system in the present-day sense, it did have administrative machinery for disease prevention, sanitary supervision, and, in general, protection of community health. The character of this machinery was very intimately related to the administration of the medieval municipality. The city was run by a council that had charge of finances, organized the provisioning of the community, and ordered and supervised public works. Among its activities, the council also dealt with health and welfare problems. Physicians were not involved in the central administration, but were employed for specific duties, such as the provision of medical care to the indigent and to prisoners, the diagnosis of leprosy and similar conditions, and the giving of expert counsel in times of pestilence or in medicolegal matters. With minor modifications, the public health pattern created by the medieval urban community continued in use into the earlier part of the nineteenth century.

Only with the advent of the national state in the sixteenth and seventeenth centuries, and with the increasing impact of industrialism in the nineteenth century, were attempts made to develop concepts and theories of community action for health, e.g., medical police, social medicine, and sanitary reform. These accompanied the development of specific forms of organization and administration for health action. As an instance in point, the first modern health departments were a product of the Sanitary Reform movement. Our own time has seen an analogous development, the rise of medical sociology, or, more generally, the convergence of the social sciences with health research and practice. In all of these developments, new conditions led to endeavors to understand them and, consequently, to the emergence of new concepts and fields of study. Thus, medical police is one aspect of the attempt to work out, in terms of seventeenth and eighteenth-century political and social science, a systematic account of the rationale and operation of

various administrative services of enlightened absolutism as a basis for the training of public officials. Similarly, one may suggest that the increasing application of the social sciences to health problems in twentieth-century industrial America is a consequence of the growing rationalization and bureaucratization of health services.

The rapid expansion of interest in the application of the social sciences to health problems, institutions, personnel, and other related aspects has led to the publication of a considerable literature. One of the most recent additions is the bulletin prepared by Dr. Suchman under the joint sponsorship of the American Sociological Association and the Russell Sage Foundation. In this review the following questions are raised:

1. What are the current needs in public health that sociology is attempting to meet, and how did these develop?
2. What is the nature of the relationship of sociology to public health? What forces lead to convergence or divergence of the two fields?
3. What contribution does sociology have to make to public health in the study and control of health problems?
4. What contribution does sociology have to make to public health in the study and organization of public health structures and personnel?
5. What activities do sociologists in public health engage in? Where, how, and with what results?
6. What problems of collaboration exist between sociologists and public health workers, and how are these being met?

On the whole, Dr. Suchman has dealt admirably with the questions to which he addressed himself. His two chapters on the activities of sociologists in public health and on problems of collaboration between social scientists and public health workers perform an important service. His perceptive analysis owes much no doubt to his own experience in the New York City Department of Health; it probably also underlies the suggestions which are offered for more effective working relations between public health practitioners and social scientists. The core of the report is the chapters that cover the

role of social factors in health and disease, the sociology of public health practice in the community, and the sociological analysis of organizational and occupational problems in public health. These sections are based on selected research reports or reviews of problem areas. The material employed by Dr. Suchman is quite representative of the field. In fact, this book can be used as one element in a course on sociology and health for students in a school of public health, and will be so used by this reviewer.

Despite the generally favorable opinion that this book leaves with one—that it will provide rewarding reading for public health professionals of all kinds—it has its weak spots. The most obvious one is that of style. To approach some of the hottest problems of our society in a genteel, academic manner seems singularly inappropriate. One wishes that Dr. Suchman had applied some of what the late C. Wright Mills called “the sociological imagination.” After all, public health does not deal with bloodless categories, but with people of flesh and blood. These people are living in a time of extraordinarily rapid, dramatic change—it has already become a cliché to speak of the Twentieth-Century Revolution. Farm workers moving off the land into cities because of the mechanization of agriculture; the demands of the submerged colored population for its rights; the need to carry out drastic social changes among primitive “red necks”; the increasing need to control our environment, and to co-ordinate efficiently the services required by large numbers of people in dense concentrations—some of this comes through but it is so muted that one has to listen very closely.

This leads me to my last comment. Dr. Suchman is somewhat provincial even in his own field. The area of political sociology and the studies of political scientists on the organization of power as it relates to health and welfare might have received more attention. Yet, despite these shortcomings, this book can be recommended to social scientists and public health workers, all of whom will find perspective and insight in it.

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