



## IN THIS ISSUE

A MAJOR objective of mental health organizations has been to increase public understanding of mental and emotional illness and to promote acceptance of treatment. Some of these organizations have provided a telephone referral service where persons may obtain advice and information about professional services in the community for treatment of these disorders. Such a telephone service was provided by the Brooklyn Mental Health Association. With its cooperation, a statistical study of the persons and problems served during an eleven-month period was made by the Milbank Memorial Fund. The findings of the study are reported by Melly Simon, Dorothy G. Wiehl, Katharine Berry, and Dr. Ernest M. Gruenberg in this issue of the *Quarterly* in an article entitled "Inquiries to a Mental Health Association Concerning Treatment Facilities."

Inquiries averaged about 110 per month and the service was used to find help for a wide range of complaints of persons of all ages, but the majority of the calls were concerned with children and adults under 40 years of age. Two-thirds of the callers described problems, such as disturbed behavior, excessive anxiety and fear, and sought advice about treatment resources; and one-third asked for referral to a facility giving a specific type of service. Thus, much judgment was required in making recommendations, and referrals were to many different types of resources.

A followup telephone call to a small sample of the cases (88 persons) made approximately one year or more after the initial inquiry indicated that about three-fourths of this group had applied for service at the referral resource, but 29 per cent of the applicants were not accepted. However, many not accepted by the suggested resource obtained treatment elsewhere and some

obtained treatment without having gone to the referral resource. Some treatment or service was reported for seven out of eight adults and for four out of five children. Five of the cases had been in a mental hospital and 62 had received out-patient psychiatric or guidance service.



Trends in mortality have been sharply downward in the United States for both the white and nonwhite population and, in recent years, the difference between age-adjusted rates for the two populations has been decreasing. Richard F. Tomasson of the Scripps Foundation for Research in Population Problems has compared the trends for sex-age specific groups of the white and nonwhite population in an article entitled "Patterns in Negro-White Differential Mortality, 1930-1957." The author finds that the decrease in the color differential has been proceeding far more rapidly among the male than among the female population, and that there are marked differences in the relative trends for specific age groups. Mortality rates for the leading causes of death among the Negro and white population also are examined. An increase in the differential for some organic diseases is noted, and the excess mortality among Negroes is found to be very great for hypertension, both with and without heart disease.



In this issue Leighton van Nort presents an interesting and provocative article "On Values in Population Theory." In the words of the author "It is the thesis of this paper that demographers have—on the whole—accepted the dominant values of our own Western Society in an uncritical fashion, and thus have felt little need for sociological perspectives on those values. To put the matter quite strongly, I allege that much of demographic theory is culture-bound. Its account of demographic reality rests in part on humanistic value-postulates derived from Western Culture." The author illustrates his case by reference to demographic transition theory and the approach of Western demographers to problems of underdeveloped areas.