Social Sciences Notes

SOCIOLOGY

British Immigrants Return Home

Of some 200,000 British immigrants to Canada between the years 1956 and 1966, more than a fourth—56,000—went home again. Sociologist Anthony Richmond of York University in Ontario decided to find out why.

He discovered that the reimmigrants fell into three categories: the experimenters who only planned to stay a few years anyway, the settlers who became dissatisfied with Canada, and the drifters who were not ready to settle down anywhere.

The experimenters, for example, were mostly single women under 35 who liked their Canadian adventure and saw the standard of living as higher than England's. But two-thirds of them, accustomed to socialized medicine, criticized the health services.

The settler was usually a married man with children who had never adapted to Canadian life. A major complaint given was that he lost occupational and community status when he immigrated. He also singled out the health and welfare services for criticism.

But the survey revealed that 31 percent planned to cross the Atlantic again to settle in Canada. Half this group were young women.

MENTAL HEALTH

Patient Release Hits Peak

Despite population growth, the total number of patients in U.S. mental hospitals has declined for 11 straight years. In 1966, the number of resident patients in state and county hospitals dropped by 23,000, reports the National Institute of Mental Health. It was the largest annual reduction in all 11 years, from 475,000 in 1965 to 452,000 in 1966.

On the other hand, hospital admissions increased by 16,000 last year, a figure that reflects shorter hospital stays.

New tranquilizing drugs, particularly the phenothiazines called "anti-psychotic" agents, accounts for most of the decline. Introduced about 10 years ago, the drugs have allowed hospitals to release large numbers of chronic mental patients, some of whom had spent their lives in the wards.

NIMH director Stanley F. Yolles, however, also credits new community services where patients get treatment near home.

PSYCHOSOMATICS

Dream Scintillations

An unusual type of waking experience called "dream scintillations" seems to resemble epilepsy rather than nighttime dreaming, reports a San Francisco psychiatrist who unexpectedly experienced half-an-hour of persistent, flashing images while fully awake.

Dr. Mardi J. Horowitz of the Mount Zion Hospital reports the images had neither a story line nor emotional content, as do dreams. Rather they were random flashes of recognizable scenes, following one after another, which he could not block. "I was able to think around them . . . but only with effort and with a very short concentration span," Dr. Horowitz says.

He believes the experience was a minor attack of temporal-lobe epilespy, triggered by fatigue. Thought seemed to become derailed from the verbal to a primitive, pictorial level over which there is little intellectual control.

Experimentally induced seizures in epileptics stimulated the same type of hallucinatory experience, says the psychiatrist. It also seems to be characteristic of spontaneous seizures.

Dream scintillation mental states, however, are not reported among people deprived of sleep and night dreams, Dr. Horowitz declares in the current (May-June) PSYCHOSOMATIC MEDICINE.

Two other experiences with dream scintillations have been reported by psychiatric researchers, one in 1949, the other in 1965.

FACILITIES

House Committee Votes Funds

More than 140 "sick" hospitals in the United States may get a lift from emergency Federal grants and loans amounting to \$58 million if Congress goes along with the recommendation of the House Interstate and Foreign Commerce Committee.

Congressman Richard L. Ottinger (D-N.Y.) has proposed a plan in the form of an amendment to HR 6418 (the Administration's "partnership-for-health" bill) that has now been adopted by the committee. He hopes that both House and Senate will vote on the amendment this summer. The Senate Labor and Public Welfare Committee will act on it after the House votes.

A U.S. Public Health Service survey lists 97 communities that are deprived of adequate hospital care because "their hospitals are in worse condition than the patients they are trying to serve." The Ottinger plan would improve services for 150,000 patients annually.

ECONOMICS

Rhodesians Like Sanctions

Rhodesia seems to be adapting to international economic sanctions with good cheer, which leads Johan Galtung of the International Peace Research Institute in Oslo to question the value of sanctions.

The August issue of Trans-Action magazine reports his findings that many Rhodesians are actually enjoying the straitened circumstances, caused by United Nations sanctions imposed after Rhodesia declared its independence from England in 1965 in order to maintain white dominance.

One businessman told Galtung his life of garden parties had become somewhat boring. Then the "blessed sanctions" came along and "we had to use all our talents again. I have never had so much fun since I came here."

In addition, the Rhodesian economy is being restructured for greater self-sufficiency.

If economic boycott does not work in Rhodesia it is unlikely to work anywhere, since that country was particularly dependent on foreign trade, especially with Great Britain, Galtung says.

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