

behavioral sciences

Gathered at the 96th annual National Conference on Social Welfare in New York

HUNGER

Problem in the Southwest

A study of food intake patterns among low-income families with Spanish surnames in San Antonio, Tex., has shown that a large number of people there have inadequate food intake.

Dr. Francis J. Pierce of the Worden School of Social Service, Our Lady of the Lake College, San Antonio, reports that of 967 adults and 567 children in the income bracket below \$3,000 per year, only two percent of the children and four percent of the adults had an adequate overall food intake pattern.

The major cause of lack of money for food was not unemployment. "It must be recognized," Dr. Pierce says, "that underemployment—specifically low wages—is a problem of greater magnitude than unemployment."

Diet education programs as well as increased food stamp programs are measures suggested for improvement. A creation of a large number of jobs would also be extremely helpful, but "efforts must be made to develop a national income security program which will insure that no one in the great land should ever again go hungry," says Dr. Pierce.

POVERTY

Mother's wages

Prof. David G. Gil of Brandeis University feels that society should compensate the mother for her partly voluntary and partly forced withdrawal from the labor market.

His proposal, a salary for mothers as a solution to poverty, is based on the premise that "child bearing, child rearing and socialization of offspring are not merely private and familial function, but are essentially societal functions since they assure the continuity and survival of society."

The wages would vary in relation to the extent to which a mother chooses to participate in the labor market and should compensate for the fact that maternal child-rearing responsibilities are assumed 365 days a year.

All mothers or expectant mothers should qualify to receive the wage regardless of their legal and financial status, and the wages would be subject to income taxes and Social Security taxes, he says.

Prof. Gil believes that the proposed plan would result in considerable savings over the current public welfare program.

ALCOHOLISM

From drunkard to alcoholic

A Maryland law removing public intoxication from the criminal code and defining it as a public health responsibility has resulted in increased help and hope for alcoholics in that state, as well as a positive change in attitudes toward alcoholics.

Since the law became effective in July 1968, thirteen once-a-week groups were developed, alcoholic patients under care in clinics increased in 1968 from 821 to 1,056; alcoholic admissions to state mental hospitals have continued to mount; and more employed alcoholics have been motivated toward treatment by industrial policies, programs and procedures than ever before.

The law has given alcoholics new hope, but new services, in many cases, have failed to develop fast enough to make the hope reality. But, "There is no doubt in our minds," says Gertrude L. Nilsson, coordinator, Division of Alcoholics Control in Maryland, "that the single most effective means of changing attitudes toward the alcoholic is by transferring responsibility for him from law enforcement to health and social agencies."

DRUG ADDICTION

The female addict

A cycle of addiction, unwanted pregnancy, confinement and re-addiction has been seen in the female addict after seven years of work with addicts in New York.

Female addicts have three goals, says Stephen Chinlund, director of the Manhattan Rehabilitation Center.

One is that they seem to have a conscious desire to lose control so that they can explain their failures by the fact that drugs limit the control of their actions. Their second desire is to obliterate any sense of time; they want to blot out what is happening. The third factor is a strong rejection of a sense of cause and effect. This is evident when they refuse to see any relationship between sexual intercourse and pregnancy.

The best treatment, Chinlund reports, is group therapy. "Most important of all, perhaps, is the cumulative power of the voice of the group," especially the peer group.

SUICIDE

Problem with the aged

The need for comprehensive therapy for suicidal tendencies in the aged has been suggested by Dr. H. L. P. Resnik, chief of the Center for Studies of Suicide Prevention at the National Institute of Mental Health in Bethesda, Md.

Causes of suicide range from loneliness to loss of mate, job, physical health and mobility, mental health, life expectancy and status. But, in those over 65, loss is often unavoidable, and new relationships must constantly be substituted.

Older persons may want to die because they feel real or imaginary rejections from society and, research has found, they are less likely to call for help.

New techniques should be developed for the case-finding of suicidal persons in this age group, Dr. Resnik says. He suggests that suicide-prevention centers could employ senior citizens as telephone answerers and as speakers on suicide prevention.