

PSYCHOLOGY

Americans Working Abroad

Americans working abroad normally experience a certain amount of "separation anxiety" and anxiety about the unknown. These anxieties may interfere with efficiency.

By RICHARD LITELL

THE AMERICAN working abroad is more likely to encounter emotional problems that might interfere with the efficiency of his work than his countryman who remains at home.

However well-adjusted he may have been in his own land, he will develop, to a greater or lesser extent, two main anxieties upon reaching his foreign post. One is "separation anxiety" (anxiety about separation from home and the familiar); the other is anxiety about the unknown.

The degree to which he can overcome these anxieties represents the degree to which he can successfully adapt himself psychologically to his new environment and carry out his assignment.

Because of the rapidly growing number of Americans working overseas and the increasing importance of their work, study of their mental health, what endangers it and what enhances it, is vital as never before.

Overseas Influx

In 1938, there were only 1,218 Americans in the Foreign Service working abroad and another 1,079 working overseas for all other Federal agencies. By May, 1956, there were 34,052 Americans working abroad for Government agencies other than the military—about 15 times the 1938 total.

There were more than 100,000 American civilians working abroad on a full-time basis for international organizations in 1956, approximately divided as follows:

Government and	
Government Contracts	37,000
Missionary Work	28,000
Business	24,000
Students	10,000
Teachers and Scholars	1,500
International Groups	3,000
Miscellaneous	1,000

In addition, there were probably another 30,000 U. S. citizens who went abroad on short-term business, private or governmental. None of these figures includes the wives or dependents of personnel at work abroad.

Dr. Dana L. Farnsworth, president of the Group for the Advancement of Psychiatry, has said that "in these critical times, when the United States has committed itself to a policy of international responsibility, the mental health of the American working overseas appears to be of even more critical importance than it is at home."

This, he says, is because of its effect on the vital program the man is responsible for carrying out.

The GAP has recently issued a report on the special psychological problems of persons working in foreign lands, as well as recommendations on how these problems may be met. Entitled *Working Abroad: A Discussion of Psychological Attitudes and Adaptation in New Situations*, it was prepared by the organization's Committee on International Relations under the chairmanship of Dr. Bertram Schaffner, New York psychiatrist.

The primary concern of the GAP report is not with the relatively small group of Americans who fail to adjust to life and work abroad, but with the larger group of persons who, though frequently very competent in their special fields of work, cannot function well in special situations that arise when they live outside their accustomed environment.

Incentives to foreign work are many. It offers an opportunity for personal achievement, escape or variety. Some persons get satisfaction out of the particular work accomplished or its relation to special interests, such as foreign affairs, economics, history or language.

Others enter overseas employment out of humanitarian or patriotic motivations, while still others seek higher salaries or pensions, or rewards in the form of honor, status and prestige.

Since the majority of persons go abroad of their own free will to live and work, the rewards of working overseas are obvious and real to those who choose to go.

But despite the rewards and satisfactions, there are stresses too.

The foreign situation itself causes some of the difficulties. There are often conflicts with values, ideas and customs of peoples or co-workers of foreign lands; inequalities of privilege and opportunities, and more difficult and limited personal relationships with one's fellow countrymen while abroad.

Certain climatic and geographical locations may also be a source of stress.

Individual Adjustment

Lately there is more general recognition that the causes of difficulty in adjustment to overseas living may lie within the individual himself. Emotional difficulties may have troubled him to a certain degree at home, for example, but abroad they may become accentuated and harder to reconcile.

The GAP report incorporates a number of recommendations for coping with the growing problem of mental health among the expanding ranks of Americans employed abroad.

It points out that many of the problems of adaptation should be handled before the

individual is sent overseas, and that human relations involved in work abroad, long neglected, should be stressed. It also emphasizes the need for orienting not only the man but his wife and family as a single unit.

Employers should pay more attention to the mental health of the prospective employee, even though it may sometimes mean lowering the technical requirements for the job.

Recent experience suggests that sending the right kind of person is so vitally important that it is worthwhile to lower technical requirements on occasions, even better at times not to fill the job at all, than to send someone well-trained but likely to fail on a personal basis or cause embarrassment in his public relations.

The group also recommends the establishment of a foreign service training center to coordinate the research now being carried out by various Government agencies, universities, industries, religious and private welfare organizations.

Such a center could provide a setting for training, consultation and research. It should be accessible to all Governmental, industrial, public and private personnel, including foreign personnel working in the U. S. It should serve as a clearing house, enabling all the individuals working in this field to profit from each other's experience, instead of doing overlapping jobs.

Training Center Needed

The center should also introduce into the entire range of overseas activities, concepts bearing upon individual and social psychology. It should teach principles of mental health and cover such matters of agency policy as selection, pre-departure orientation, life overseas and the employee's return home.

When separation anxieties and other emotional problems become so great that ordinary environmental support and understanding human contacts are insufficient, it is necessary to seek other sources of help, the report states.

At this point it is desirable to have a competent psychiatrist clarify the problem for both the individual and the administrator, and to determine methods of treatment or whether the individual can stay on the job.

A certain degree of separation anxiety and fear of the unknown is a natural, expectable occurrence in persons going into overseas work. Although it presents an emotional problem that can cause much trouble if not understood or well handled, it can be assuaged by non-judging understanding and ease of communications between all persons concerned. This does not imply coddling, but rather correct remedial measures in specific situations.

Those who have worked well and happily overseas are generally possessed of

flexibility, personal ability, social maturity and "social inventiveness."

Maintenance of these characteristics together with sound mental health is essential for the overseas worker to perform efficiently.

Science News Letter, May 30, 1959

BACTERIOLOGY

Double Dose Antibiotics Kill Bacteria in Cells

ANTIBIOTICS can be used successfully against bacteria growing within living body cells.

Research reported by a Michigan State University scientist supports the theory that bacteria growing in cells in a laboratory tissue culture and bacteria growing in cells in the body are similarly affected by drugs.

A tissue culture technique for determining how great an effect drugs have on undulant fever (brucellosis) bacteria when they are growing within the cell was described to the Tissue Culture Association meeting in Atlantic City, N. J., by Dr. Marvis A. Richardson. The same technique, she said, can be applied to other diseases caused by organisms which grow within the cell, such as tuberculosis, leprosy, typhoid fever, malaria and many fungal diseases.

Undulant fever is characterized by an initial rise in temperature which falls as bacteria in the blood are killed and then rises as those within cells reproduce and their "offspring" enter the blood.

The M.S.U. microbiologist grew cells from various organs of the cow in test tubes and then exposed them to brucellosis bacteria.

As they do in humans and animals, these bacteria grew within the cell. This makes them hard to kill. Normal body defenses or antibiotics will readily inhibit brucella in the blood but not those within cells. However, Dr. Richardson found that very high concentrations of either penicillin or streptomycin kill some of the bacteria within the cells.

But a much greater kill, she also found, occurs when the two antibiotics were given together even though the dosage of each one was too small to have any appreciable effect by itself. Such a combination of drugs is known to be effective against many diseases.

This test is believed to be the first to show the degree of effectiveness of antibiotics against organisms growing within cells. One other test indicates if an antibiotic is effective against tuberculosis infection but does not reveal the degree of effectiveness.

Science News Letter, May 30, 1959

Do You Know

Practically all cotton imported into the Philippines is from the U.S.

Each year more than 12,000,000 anesthetics are administered in the U. S.

Copper enzymes in the body speed up oxidation of oxygen from the air.

MEDICINE

Treating Snake Bites

SUMMER is the season for increased outdoor activities, and snake bites.

The number of such victims may increase as outdoor activities such as camping become more popular, two Philadelphia physicians warn.

Most cases of snake bite occur in the southern and southwestern states where there are more snakes and the conditions favor greater exposure. However, all states except Maine and Alaska harbor poisonous snakes.

Therefore, all physicians must be prepared to treat poisonous snake bites, Drs. Thomas McCreary and Harold Wurzel of the Hospital of the University of Pennsylvania, remind colleagues in the *Journal of the American Medical Association* (May 16).

As many as 3,000 snake bites per year have been estimated for the United States alone. Only 10 to 20 of these prove fatal, however.

There are at least 35 species or subspecies of poisonous snakes in this country, the doctors point out. Most of these are pit vipers or Crotalidae, which include the

many species of rattlers, the copperhead and the cottonmouth or water moccasin. The coral snake, found in southern states, is a relative of the cobra and is not a pit viper.

The Crotalidae are generally nocturnal in their habits and are dangerous on land or in water. Yet, they are not aggressive and only strike for food or in self defense when endangered or attacked.

The doctors listed a number of factors that affect the seriousness of a snake bite. They include:

1. age; the young and old are more susceptible to serious aftermath.

2. site of the bite; snake bites are less dangerous on an extremity than near a vital organ.

3. early treatment; the earlier, the better.

Their advice for the victim that is bitten far from a doctor's office includes the application of a tourniquet (to close off the superficial lymphatics to lessen the spread of the venom), incision and suction at the site of the bite, and a dose of antivenin from a physician when available.

Science News Letter, May 30, 1959

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