

THE RELATION OF THE SOCIAL SURVEY TO PUBLIC HEALTH AUTHORITIES

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The relations between the social survey and the public health authorities represent to a considerable degree the relations between sociology and public health. These relations arise from the fact that sociology and public health are both interested in the same things—people; and have the same ultimate object—the promotion of human welfare. Sociology, to be sure, is interested in people from a wider point of view—studying such matters as their economic relations, their amusements and recreations, their education, and the causes of their poverty; while public health is interested solely in those conditions which affect their physical well-being.

Sociology and Public Health.

So far, the affair seems simple: the sociologist will apply himself to the study of people in their many and complex interrelations; while the public health worker will confine his attention to the study and application of those parts of science which have to do with the prevention of disease. But the first attempts at practical solutions of the problems of both sociology and public health show the entire fallaciousness of any such easy and clear-cut distinction, and demonstrate that the relations of the social worker and the public health worker must be in many respects of the greatest intimacy. Hardly any of the sociologist's interests—such as hours of labor, wages, housing, and recreation, but have a distinct influence on health, and so an interest for the health official; while the sociologist discovers that preventable disease is often the fundamental cause of poverty and its implied chain of problems. The discovery of these mutual interests has

led to considerable misunderstanding and confusion, partly through undue enthusiasm over the new ideas—such as prompts some persons to maintain that tuberculosis is purely a matter of wages, partly through undue adherence to old teachings, such as leads others to maintain that tuberculosis is purely a matter of restricting infection. Casting aside these misunderstandings, it becomes evident that the discoveries and methods of the social worker are now being fused with those of the sanitarian, and that a new public health is emerging.

The New Public Health.

As it is especially important that the health official realize the opportunities which this new public health offers him, and that the social worker realize its true scope, we may attempt here a brief exposition of the matter. Two striking characteristics differentiate the new public health from the old: on the one hand, the emphasis has been broadened from mere sanitation of the inanimate environment to include the discovery and supervision of all infected individuals; on the other hand, the new work not only aims to prevent disease, but has become aggressive, and seeks to increase health in a positive manner. The new public health not only inspects and supervises water supplies, milk supplies, and privy vaults, and placards contagious diseases—as of old; but also instructs and otherwise aids mothers in the care of the new born; examines school children with a view to remedying physical defects; maintains free dispensaries, or other similar medical service, for the indigent; protects workers from occupational diseases; regulates housing; exercises the closest super-

vision over all cases of communicable disease; and carries on campaigns of education in health matters. The new public health recognizes the sick individual, and the disinfection of his discharges, as the strategic point of attack in the campaign against communicable diseases, and directs its efforts accordingly; but it does not restrict itself to the communicable diseases, being eager rather to grasp every demonstrated opportunity to improve the general health.

The Social Survey.

So much for the relations of social and public health workers, and the relation of both to the new public health: what now of the social survey? What special opportunities does it offer, and what special services can it perform?

The social survey is, of course, a stock-taking of facts regarding the problems of the sociologist and social worker: from another viewpoint it is a sinking of test-holes into the community's existing social strata. As it aims to discover the status of all factors affecting living conditions, one of its most important investigations is that of health conditions. The latter investigation may have a dual aspect: on the one hand, the study of sanitary conditions in the city—conditions which it is the business of health authorities to keep under routine supervision; on the other hand, the study of the health department itself, and the adequacy of its programme. In all this health work the social surveyor may obtain much valuable assistance from the local social and public health workers; they know local conditions, and can usually cast interesting light on each other's work.

Survey's Special Service.

The special advantages offered by the social survey are those which accompany any public summing up of community con-

ditions: it defines and expresses local situations; and focuses public attention on them. If the health department has no adequate programme and receives but niggardly support, the surveyor will not be long in discovering this state of affairs, and will bring it forcibly to public attention. The detached position of the surveyor is here of value, not only in detecting flaws in the local situation, but in carrying a note of authority which often will not be allowed persons working continually with local conditions. The social survey should be, thus, of very real service to public health authorities in securing adequate support for their endeavors.

Another service which the social survey can perform is to advise as to the distribution of functions between the several parts of the municipal government. The intricate and difficult problems concerned in the organization and correlation of public health and charity work is an example. The detached point of view of the surveyor, and his familiarity with the solution of such problems in other cities should be again of much real value in deciding such matters to best advantage.

Sympathetic and Helpful.

To sum up the situation, the special usefulness of the social survey to public health authorities is of a three-fold nature: first, it brings the full teachings and opportunities of the new public health—often overlooked by the busy routine worker; second, it foresees public opinion on the importance of supporting adequately the local work; and, third, it is peculiarly fitted to advise in the organization and administration of work whose proper position is often difficult to determine. Certainly the relations of the surveyor and the public health worker must be intimate, and surely there are strong reasons why they should be sympathetic and mutually helpful.