

\$6,636,673; and outstanding loans \$9,861,352. Of the total number of Jewish credit cooperatives, 477 were in Poland, 88 in Lithuania, 85 in Rumania, 23 in Latvia, 14 in Czechoslovakia, 3 in Turkey, 2 in Bulgaria, and 1 each in Austria and Esthonia.

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*Immigration to Palestine:* A total of 11,256 Jews and 1,003 non-Jews entered Palestine during the first six months of 1933, compared with 3,290 Jews and 642 non-Jews during the corresponding period of 1932. Of the 11,256 Jewish immigrants, 4,678 were men, 4,580 women, 1,052 boys and 946 girls under 16 years of age.

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*Emigration from Poland:* A total of 4,799 Polish Jews, 69.5% of a total of 6,899 received passports for emigration during the first quarter of 1933. Of the 4,799 Jewish emigrants, 3,035 were destined for Palestine. The other countries of immigration were in the order of their importance: Argentine, Brazil, United States, France, Belgium, Canada, Uruguay, Mexico and Germany.

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*Emigration to Biro-Bidjan:* During the period 1928 to the end of 1932 7,700 Jews migrated to Biro-Bidjan, in Siberia, and of these 4,500, or nearly 60% remained there.

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*Jewish Criminality in Hungary:* A total of 2,491 Jews were sentenced by the courts of Hungary during 1931. A total of 658 Jews were thus sentenced during the year for every 100,000 Jews 12 years and over in the country, compared with 665 for the total population of Hungary.

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*Jewish National Fund Income:* In spite of the continuing world-wide depression the Jewish National Fund received a total of 85,355 Palestine pounds during the six months ended March 1933, a sum larger by 1,376 pounds than the amount collected for the corresponding period of 1931-1932. The United States led in contributions in 1932, as it did in 1931, followed by Poland, Great Britain, Union of South Africa and Palestine.

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*Work of the Hilfsverein:* During 1932 the Hilfsverein der deutschen Juden (Welfare Association of German Jews) received a total of 152,944 marks. Expenditures for the same period amounted to 161,209 marks. Of the total amount expended, 77,908 marks were for relief to migrants and travellers' aid, and 10,679 for relief in Poland, Bessarabia, and Carpathia-Russia.

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*Jewish Students in Czech Universities:* Although the Jewish population of Czecho-Slovakia is only 400,000, constituting 2.72% of the total population, 5,239 Jewish students, 15% of the total of 34,112, were registered in the country's universities and in the other institutions for higher learning in the winter semester of the academic year ended in 1932. The high percentage of Jewish students in the Czech institutions of higher learning is due chiefly to the large number of foreign Jews attending Czech universities. Of the total of 5,239 as many as 2,249 were of foreign nationality. The vast majority of the Jewish students were registered in the departments of law, medicine and pharmacy.

## Book Review Department

MICHAEL FREUND

*CHRONIC ILLNESS IN NEW YORK CITY.* By Mary C. Jarrett. Published for the Welfare Council of New York City by the Columbia University Press, 1933. (\$5.00).

Vol. I: *The Problems of Chronic Illness.*

Vol. II: *The Care of the Chronic Sick by Different Types of Voluntary Agency.*

UNLIKE the medical man, the layman has been able thus far to plead ignorance when he was accused of a general lack of interest toward the problem of chronic disease in the community. When certain dramatic qualities have disappeared from the patient, his greatest single claim to the attention of the physician has been lost. One might, of course, argue that even in psychological circumstances like these there is a higher point of view which is based on the theory that the true humanitarian never becomes reconciled to suffering. While it is almost a definition of a chronic patient to say that he is one in whom the doctor has lost interest, other definitions will be discovered if we look into the medical dictionary. For these reasons any publication that has for its primary purpose the analysis of the chronic problem is welcome both from the medical and lay points of view.

The volumes under review confirm the fears and suspicions that most communal thinkers have had about the neglect of society to provide for patients suffering from chronic disease in its various phases. Few people like to be troubled about the uninteresting, the undramatic, the unprofitable and the so-called incurable type of clinical condition which is, unfortunately however, as these volumes point out, the chief cause of invalidity and death. Probably 1% of the population is disabled by chronic disease. The fact is that in New York State there is only one large voluntary hospital which successfully deals with the chronic patient in the spirit of the numerous acute general hospitals. Communal efforts on behalf of the chronic patient have been conspicuous by their absence, and we are indeed startled when some new writer undertakes to face us with the facts. This survey puts the problem squarely before us and wants to know what we propose to do about it.

In the volumes under review we have at last a painstaking and courageous effort to face the subject. As source material for the period immediately preceding the economic

revolution of 1929 these volumes are of considerable value, although their worth would be increased if we could add, by way of commentary, the disastrous effects of the social changes on the general problem of the chronic sick, for chronic disease, as these volumes point out, is at least as great a social problem as it is a medical problem. A clear and detailed analysis of the facts and statistics involved in the problem in the City of Greater New York are presented. With the exception of the published work of Boas, and the sporadic contributions, some of them excellent, that one finds occasionally in hospital literature, little seems to have been written and less done about the problem, although every social worker is familiar with it from bitter experience. The medieval almshouse, the home for "incurables," the home for the aged and other institutional dumping grounds are still the only resort for patients who will not yield quickly to treatment. Any effort therefore to state the case should be encouraged.

Much might be added about mental disease as a subdivision of the chronic problem. We know, for example, that of approximately 800,000 patients that are found in the hospitals of the United States one-half are mental patients. One out of every twenty high school student will become an inmate of a hospital for nervous diseases, just as one out of every twenty will go to college. Then there is tuberculosis, which is most often a chronic disease, with 100,000 patients. Only 300,000 patients remain who spend time in hospitals for acute conditions. But for the statistical material that is presented here and for the authoritative way in which this is done (under the auspices of the Welfare Council of New York) we have much to be thankful.

One might be critical of the author who accepts the hospital for chronic disease as the final solution of the problem. There is another and a more advanced point of view these days which rejects isolation and segregation in any form as a cure for this social disease. In one of the voluntary hospitals for chronic disease in this country, the largest and most important one, a communal plan has been evolved to meet the problem once and for all by creating a "true medical center" where the natural history of disease could be studied from infancy to old age regardless of the acute or chronic phase of the illness. The chronic patient cannot be thought of as an institutional problem alone, for during the ambulatory and semi-ambulatory stages he is located in his

home. The social treatment of the chronic patient must be continuous and cannot be separated from the acute patient, who is so often in the beginning of a medical condition which may eventually become chronic. The method tried, with characteristic indifference, of integrating all hospital activities is a contribution of the public official working in the political sphere. The fact that it is not convincing in its present form should not blind us to the method of centralizing and integrating medical activities on a voluntary basis.

Whatever view one might take of the solution of the problem the facts are now before us and they constitute a challenge to the social worker, and the physician, as well as to the philanthropist. As source material these volumes will be used by students for many years to come, even though the facts were assembled so long ago, when one considers the speed with which social changes are now taking place throughout the world. This survey has rendered an important and humanitarian service for which the Welfare Council, the author and her collaborators are entitled to great credit.

E. M. BLUESTONE, M.D.  
*Director, Montefiore Hospital for  
Chronic Diseases, New York.*

#### CHILD DEPENDENCY IN THE UNITED STATES.

By Emma O. Lundberg. 149 pp. New York: Child Welfare League of America, Inc., 1933. (\$1.00).

ALTHOUGH voluminous data have been compiled relating to dependent children, relatively little has been accomplished thus far in the standardization of statistical procedure. It is evident that the reliability of child dependency statistics is largely dependent upon the degree of uniformity of record-keeping, analysis of data and method of reporting.

An attempt has been made by the author to demonstrate the need for comparable statistics as a basis for social planning. Cognizance is taken of the fact that the establishment of policies and procedure for the care of dependent children is dependent upon the centralization of statistical data of social significance. This book aims to determine: "First, the availability of facts needed by the State welfare departments, in order to interpret the extent and methods of treatment of child dependency and neglect; and second, the practicability of developing national social statistics through the co-operation of State welfare departments." The various systems employed by the states are carefully analyzed with respect to the method of collecting data, type of information available and the interpretation and validity of the facts obtained. Analysis is made of the material secured from the various states to determine the practicability of centraliza-

tion and periodic reporting of facts relating to child dependency.

Standard forms are presented for statistical reporting by institutions and agencies to the State welfare departments. An attempt is also made to standardize certain basic data which are deemed essential for correlation purposes.

An abundance of material is presented for 31 states and the District of Columbia, including incidence of child dependency and methods of care provided by public and private agencies. Interesting comparisons are drawn as regards the extent of child dependency in the various political units.

The author demonstrates quite clearly the importance and practicability of obtaining uniform statistical data from the various states, counties and cities. The factual data revealed in this book point most emphatically to the need of securing national statistics through the co-operation of State welfare departments as a means of stimulating and guiding the development of adequate child care programs in relation to the ever-changing social conditions.

This book contains a fund of illuminating statistical material relating to child dependency, including variations in methodology, analysis and interpretation of data. As a contribution to social science, this work should prove of great value to the various types of social agencies and to those persons who are interested in the progress of human welfare.

ROBERT AXEL,  
*Assistant Director, Bureau of  
Research, New York State De-  
partment of Social Welfare.*

#### THE DYNAMICS OF THERAPY IN A CONTROLLED RELATIONSHIP. By Jessie Taft. New York: MacMillan & Co., 1933. (\$2.50).

TO read Dr. Taft's book is to enjoy an unusually stimulating experience. In part one and the conclusion she presents the theory underlying her approach which is derived from the Rankian school of psychoanalysis. In part two and three, which make up the bulk of the book, she gives us a verbatim record of her treatment of two children. Since treatment, as she conceives it, includes a constant evaluation of her reaction to the child as well as the child's reaction to her, the reader is allowed to live through with her the therapeutic process and to feel the development and resolution of the relationship through which therapy is affected. This presentation of case material conveys far more vividly than any amount of theoretical explanation the realization of the dynamic force of the therapist and his responsibility for recognizing and understanding his role in order that he may constructively utilize it. That there is no royal road to successful therapy, that the therapist must follow the route

indicated by the client's needs, and that his ability to clear the way depends largely upon his effective handling of that part of the relationship which lies within himself, become startlingly apparent.

The extent to which Dr. Taft's techniques can be utilized by case workers must of course be individually determined. Some may feel her method is too indirect, too passive, too lacking in interpretation, while others may consider her activity excessive and her use of transference over-emphasized. We may take exception to some of the interpretations she makes and question some of the techniques she employs. Yet whatever disagreement as to method there may be, most case workers will probably agree with the fundamental principle that the relationship between the worker and the client can create a "dynamic quality" which possesses great value as a means of therapy, and that "whatever takes place between the worker and the client of a therapeutic nature must be present in some degree in the single contact if it is ever to be there." If Dr. Taft's methods were applicable only to those few cases to which it is practical to give the intensive, long time therapy she describes, her book would have little significance for case workers. But if we agree with her that "therapy is potentially present wherever the therapeutic attitude is maintained, whether the contact be one or many" then we are indebted to her for suggesting an approach that has value in every case work situation.

Dr. Taft wisely calls attention to the necessity for the case worker's being aware of her therapeutic function whenever it exists and consciously accepting responsibility for her role. She believes the "next step for case work is not to become more psychological but rather to become responsible for therapy, for practicing it overtly or for refraining deliberately, but in any case, for knowing and bearing its strength as well as its weakness, in other words for accepting itself."

Some case workers would not go as far as Dr. Taft in disregarding environmental factors. While relationship can be the most important tool in therapy, it does not necessarily exclude all other forms of treatment.

Rarely do we find an author who presents his point of view and methods so frankly and honestly and undefensively.

Dr. Taft's self-criticism and her tentative, experimental attitude will be an inspiration to case workers who conceive of case work as an evolving process best fostered by self-critical experimentation.

ELIZABETH H. DEXTER  
*Director of Case Work, Jewish  
Board of Guardians, New York.*

#### SOCIAL WORK YEAR BOOK—1933. Second issue. Fred S. Hall, Editor. Russell Sage Foundation, New York, 1933. 680 pp. (\$4.00).

THE Social Work Year Book, of which this is the second issue, is an encyclopædia of the history, progress and present status of social work and related activities. Originally intended as an annual chronicling the events of the period between issues, most of the material deals with the more permanent organizations of social work. While the articles concern themselves only with those problems to the solution of which some agency addresses itself, the volume is comprehensive and serves as an authoritative reference book for social workers as well as for those in bordering fields.

The book is divided into two parts, the first 565 pages being devoted to topical articles and the rest of the volume containing descriptive directories of 387 national agencies, public and private, and 449 state public agencies in social work or closely related fields.

Authorities contribute signed articles dealing with the early background, recent developments and immediate status of the field with which each author is associated. The topical articles are self-indexed and a limited additional index combining in a simple alphabetical list the titles of topical articles and the names of all included national agencies also is provided, but, unfortunately, an index of the authors of topical articles is not part of the volume.

Among the articles of special interest are: Jewish Social Work, by Samuel A. Goldsmith; Jewish Community Centers, by Harry L. Glucksman; and Research in Social Work, by H. L. Lurie.

I. S.