Sir Leonard Parsons in a chapter on "Child Health and the Universities" gives a fine account of how a university must train its graduates both in preventive paediatrics and in the care of sick children. Those whose task it is to build paediatric courses in new universities and those who must renovate old methods of teaching will both find knowledge and inspiration here.

The seventeenth chapter, by Dr. Hugh Paul, gives a fascinating panorama of the scope of modern day nurseries and the responsibilities of their medical staff.

In chapter eighteen Dr. Donald Stewart gives a brilliant statement of the role the doctor can play in promoting occupational health. All medical men who are considering entering the industrial field should not fail to read this. In it they will find an account not only of the duties and responsibilities of an industrial medical officer, but also of the wide variety of interesting problems which they are likely to meet.

Chapter nineteen on "Vital Statistics—Modern Developments" by Dr. Percy Stocks, and chapter twenty on "Health Education" by Dr. Robert Sutherland, are disappointing. Or was one surfeited by good things at this stage? Dr. Stocks can never be either dull or uninformative, but this chapter seems unnecessary, disorganized, and it is not clear what it is all about. Most readers of this book will be in agreement with Dr. Sutherland about the need for health education, and would probably have preferred more detailed discussion of the scope and technique, rather than generalizations about aims and objects.

In chapter twenty-one Dr. Norman Faltersass deals with "Tuberculosis—the Present Position." Statistics and epidemiology, B.C.G. vaccination, chemotherapy, radiology, tuberculosis services, rehabilitation, and the tuberculosis colony, these are all taken in order. The story is brilliantly told, and this is perhaps the most exciting chapter in the book.

Dr. H. C. M. Williams on the "Health Control at the Ports" and Dr. C. S. Wilson on the "New Organization of Public Health Laboratory Services" bring up the rear. Both give clear and workman-like accounts of these very important organizations.

If this review is so overloaded with superlatives that it makes bad reading, this cannot be helped. The superlatives must stand. It is hoped that they will convey that within the covers of this book is to be found an account of the ideas and institutions of modern preventive medicine in Great Britain. Many of the chapters are brilliant examples of hard thinking and clear writing: all are authoritative and informative. The reader will find here the basis on which public health teaching and services will develop not only in Great Britain, but probably throughout the world.

The production of the book is of the standard that we have been lead to expect from the house of Butterworth.

R. PASSMORE


This Bulletin traces the history of women's work in the United States of America during the past seventy years. The author describes in great detail the labour trends in about 450 different occupations. Between 1870 and 1940 the number of women at work increased from under two million to over 13 million and their ratio to all workers changed from 1 in 10 to 1 in 5. During the last war, from 1940 to 1945, the number rose to 20-6 million, but quickly dropped again after the end of hostilities to just over 16 million.

In 1940, out of 51 million women over the age of 14 in the United States, 11½ million, or 25 per cent., were in work, half a million were in public emergency work, and one million were seeking employment. At the same time, 80 per cent. of all adult men, or 40 million, were working. Miss Hooks rightly points out that the unpaid work of the housewife in her own home should be included in any survey of women's occupations, and states that, if those engaged in housework are included, over four-fifths of all women contributed "to the well being of the nation through either paid or unpaid work."

The sex ratio shows that only in domestic service do women account for more than half the workers, and in this occupation they reach 93 per cent. of the total. Only in the professions (47-4 per cent.), clerical, sales and kindred workers (42-0 per cent.), and service workers other than domestic (44-8 per cent.) do they account for more than a third, whereas in all others their proportion varies from 2 per cent. of all craftsmen and industrial supervisors to 25 per cent. of all industrial workers.

In America, as in this country, the textile and allied trades absorb a large number of working women, and in 1940 54-5 per cent. of all employed women were to be found in textile manufacture, and the making and wearing apparel and fabricated textile goods.

The first year in which occupational returns were made for women was 1870. In 1930 the group "home workers" (housewives) was included for the first time. The actual number of occupations reached a peak in 1920, when 572 separate jobs were listed. In the subsequent amalgamation many obsolete occupations were abandoned, so that today we find no mention in the labour returns of such persons as "mantua maker," "daguerreotypist," or "hoop skirt maker." Others have lost their identity as, for example, "curriers," "tanners," and "morocco dressers," who are now all lumped together as "operative in leather goods."

The group of "clerical, sales and kindred workers," who numbered only 13,000 in 1870, by 1940 had reached the staggering total of 34 million, including over a million stenographers, typists, and secretaries. Women still account for only 54 per cent. of all "office workers," which indicates that they have not replaced men in offices as much as grasped new opportunities. The high social status enjoyed by the "white-collar" occupations has made them especially attractive to women. A meteoric rise has also been observed among the group of "beauticians and manicurists," who increased by 240 per cent. between 1920 and 1930. This, with the expansion of the amusement industries, is a reflection of the American post-war boom which continued throughout the 'twenties.

The census definition of a "professional" worker has been adopted as one who performs advisory, administrative or research work, which is based upon the established principle of a profession or science, and which requires professional, scientific or technical training equivalent to that represented by graduation from a college or university of recognized standing. Semi-professional workers are those in "a restricted field of science or art, qualified by training or experience or both." In 1940 there were 14 million workers in these groups, of whom 7 per cent. of the total were in professions of teaching and nursing absorbed 75 per cent. Law, medicine, and theology accounted for less than 1 per cent. of this group, whereas they included nearly a quarter of all professional men. "Teaching has always been the outstanding
professional occupation for women," and in 1940 72 per cent. of all teachers were women. Between 1870 and 1940 the number of women employed in this field increased tenfold, due, it is suggested, to the widespread replacement of men by women during the Civil War, which placed teaching "overwhelmingly in the hands of women." The number of nurses returned rose from 1,154 in 1870 to over 360,000 in 1940.

The first American woman doctor qualified exactly a hundred years ago, and by 1870 there were 544 women physicians and surgeons. In the 1940 census the number returned was 20,671, which included "physicians, surgeons, osteopaths, chiropractors and healers and medical workers (not elsewhere classified)". The report points out that in the medical and quasi-medical occupations there has been an increasing domination of the field by the semi-professional workers such as physiotherapists, masseurs, and chiropractors, and a relative decline in the professional physicians group. In the legal profession, although a good many women take their qualifying examinations, a large number do not practice or else use their legal training as auxiliary in some other profession. Hence census returns are unreliable and always an underestimate. An amusing note relates to the profession of "aviator". In 1910 they were classed as "showmen," and as late as 1940 only 51 women followed this profession—a reflection on the small demand for their services as paid pilots.

Many more married women go out to work now than formerly—15 per cent. in 1940 compared with only 6 per cent. in 1900. They are chiefly to be found in the occupations of domestic service, saleswomen, laundry hands, boarding-house keepers, waitresses, and textile workers.

Almost every conceivable occupation is listed, analysed, and related to all the others, and the history of the more important industries in terms of labour force is traced from the late nineteenth century to the present day. The author shows considerable insight into the reciprocal influences of occupation and living habits.

It is a matter for regret for the non-American reader that so little information is given about the non-white or negro worker. Barely a page is allotted to this subject. Only 14-4 per cent. of women in all occupations in the experienced labour force were non-white, of which two-thirds were found in public and private housekeeping, in which occupations they constituted nearly 40 per cent. of all those employed.

There is a good, selected bibliography on the employment of women, and statistical tables showing decennial employment figures for every occupation or group of occupations from 1870 to 1940. A useful list of current publications of the Women's Bureau is appended. As a work of reference this bulletin is valuable provided its limited scope is appreciated. We have nothing comparable to it for women workers in Great Britain.

Catherine Swanston.


The complex interrelationship of the occupational milieu with community health is illuminated by this Report. It was during the industrial depression of the 1930s that the Scottish Industrial Estate at Hillington came into being. It was a non-profit-making company set up on a Treasury grant, the tenants working under ordinary competitive industrial conditions whilst availing themselves of the services and amenities provided by the Estate Company at an economic rent. On this Estate in 1945 the Haven Products set up a sheltered workshop which became the laboratory for a socio-medical experiment in collaboration with industry.

The problem of employment of the severely disabled had long vexed the minds of medical and social service staffs at Glasgow, and it was recognized that there were many categories of disablement which must prevent resettlement in purposeful, satisfying, remunerative occupations unless a special environment were created. It was decided, therefore, to set up a workshop to employ fifty disabled persons with the possibility of subsequent expansion and perhaps the provision of outwork for the housebound centred on the factory. The industrialists on their part accepted the principle of community responsibility for such disabled persons, and the sheltered workshop came into being as a memorial to those who had fought in the cause of freedom. A sub-contract on favourable terms was secured for an initial period of ten years from a firm engaged in the manufacture of electrically heated pads and blankets. The capital required was subscribed by the tenants on the Estate together with contributions from a number of voluntary societies and private individuals, and in 1946 a company was incorporated under the name of Haven Products Limited as a private company to provide facilities for persons registered under the Disabled Persons (Employment) Act, 1944, to have employment and to manufacture electro-thermic quilts, etc.

A Medical Advisory Committee was brought into being and arrangements were made whereby every disabled man employed would be medically overhauled. Medical supervision was kept as far as possible in the background and the enterprise was run along ordinary industrial lines. The various jobs to be undertaken in the manufacturing process were analysed and the requirements for each were made known to the Medical Advisory Committee which was responsible for personnel selection.

A wide variety of ingenious contraptions was devised to enable the disabled to cope with their work and with their machines. Training allowances for a twenty-six week period were paid; a basic wage of 2s. 14d. per day was paid. A five-day week was adopted, and recruits were nominated by such bodies as the Cripples League, the Red Cross Treatment Centre, the City Hospitals, and the Ministries concerned. The British Red Cross undertook to provide twenty houses nearby for ex-servicemen, and since it is recognized that housing is the cornerstone for any scheme for the severely disabled it is hoped in the immediate future to obtain the means whereby similar houses for the civilian disabled will be provided. For the time being transport was provided to convey the workers to and from home.

During the first two years forty-eight men were employed, most of them very severely disabled: some with severe gunshot wounds of the head or of the spine or suffering from organic disease of the nervous system, some having lost a leg, a few having lost both.

The overall absence of workers from all causes amounted to some 7-5 per cent. of the total number of working days. The output of the workshop was low in the early months, as would be expected, but the curve rose gradually to reach a figure of about seventeen production units per man per day.

The best testimony to the value of this endeavour is the