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FACTORS IN THE MENTAL HEALTH OF GIRLS OF FOREIGN PARENTAGE.

A study of 210 girls of foreign parentage who received advice and assistance from a social agency, 1919-1922.

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INTRODUCTION.

This report is a part of Field Investigations of Mental Health conducted by the United States Public Health Service. It is a preliminary report of the problems found among those foreign-born persons who come within the purview of social agencies. The agency from which the cases included in this study were taken deals only with girls, and chiefly with girls of wayward tendencies. Other types of social problems among our foreign stocks as shown in the records of different social agencies, both public and private, should also be studied. These include the major problems of dependent and neglected children, family and marital discord, illegitimacy, poverty, industrial incapacity, and delinquency. The relation of mental health to these problems is a subject of immense complexity and of incalculable importance to the development of our national life. This preliminary inquiry was undertaken largely for the purpose of developing methods of approach to the problem.

A study of the foreign case records in the Boston Society for the Care of Girls was undertaken as one tentative approach to an investigation of the relation between mental health and social conditions in the lives of immigrants in this country. The inquiry divided itself into two distinct phases. The first of these concerned itself with the immigrants' difficulties of adaptation to new customs as a cause of mental disorder, and the second with the rôle of mental stress and conflicts involved in adaptation to new customs as a cause of social disorder. A knowledge of these two phases of the question is fundamentally necessary before the inauguration of measures for the preservation of mental health among our foreign born. For practical purposes they present two aspects of the same problem, for mental disease leads to social disorder. On the other

hand, adverse social conditions peculiar to immigrants tend to produce mental stress that may cause some form of mental illness or aggravate a latent mental disease.

There is a popular belief that immigrants, hopelessly perplexed and confused by the complexities of American life, often become insane; or, harassed and irritated by the strain of living under unfamiliar conditions, commit antisocial acts. In *The Immigrant's Day in Court*,¹ Miss Claghorn discusses "hardship under the law" in connection with money difficulties over property and says that the immigrant "gets into a highly emotional state about it and sometimes goes really insane," and that the records of the Chicago Legal Aid Society contain references indicating this.

The frequency with which mental disorders occurred among military forces during the World War led to the familiar saying that intolerable conditions produce certain forms of neuroses, which the soldier dubbed "shell shock." The immigrant is unquestionably faced with conditions of special difficulty which have been investigated and expounded in the *Americanization Studies* of the Carnegie Foundation. However, we know very little about those intolerable situations productive of nervous and mental diseases. Except for a few studies of special groups and some speculation, we have no literature dealing with this subject. In Mr. Thompson's volume of the *Americanization Studies on the Schooling of the Immigrant*,² he says: "The reason for not proceeding with special provision in schools for immigrant children is that we do not know what to do." Concerning both children and adults, we are still ignorant as to whether or not special measures in mental hygiene should be adopted for the foreign born beyond those general measures applicable to the general population.

This study of 210 girls of foreign parentage who received advice or assistance from the Boston Society for the Care of Girls during the years 1919 to 1922, inclusive, is merely a beginning in the collection of facts bearing on the problem of mental health of immigrants. The society is an old organization that has always been progressive and has conducted its work along the best modern lines. It stands in the first rank of social agencies dealing with children and adolescents, giving advice and assistance to girls of any age who may be in need of such help for any reason, and supervising in foster homes those who are found to need that kind of care. The records of this society may be regarded as a fair sample of the records kept by the most progressive children's agencies.

¹ Claghorn, Kate Halladay: *The Immigrant's Day in Court*. Americanization Studies. Harper & Bros. 1923. (11 Vols. Editor Americanization Studies, Allen T. Burns.)

² Thompson, Frank V.: *The Schooling of the Immigrant*. Americanization Studies. Harper & Bros. 1923.

The group studied comprises cases during the years 1919 to 1922, inclusive, in which either the girl or both parents were born outside of the United States and in which the social agency undertook responsibility for an investigation and some form of social treatment. Other applications were received which were disposed of in various ways without investigation by referring the case to another agency or by giving advice upon the obvious facts. Consequently, the group under consideration does not represent all the immigrant problems that came to the society in these four years, but includes only the so-called "intensive social cases." Of all the intensive cases for that period, 32 per cent had foreign parents.

Difficulties leading to the application for aid in these cases were widely varied. Some of the girls were in court, others were runaways whose parents sought help from the society in hunting for them. Employers, neighbors, and other interested persons asked an investigation of girls who seemed to be unhappy at home or to be getting in with bad companions. A father sought assistance in breaking up his daughter's attachment to an undesirable suitor; a girl whose parents were dead was getting beyond her sister's control; an employer asked help for her nursery governess who had become pregnant by the employer's chauffeur; a girl who had married a young circus performer in the West and traveled with him in the circus became unhappy and asked protection; a father, claiming that his wife neglected the children, sought a foster home for them; the court asked for interest in a girl whose father complained of her because she stayed out until 11 o'clock at night, the girl being, in fact, unhappy at home for the reason that her standards were much higher than those of her family.

Among the 210 cases there were 131 girls who might be called "delinquent," that is, they had committed some offense against the law or misbehaved in some marked degree; and 79 girls who might be considered "nondelinquent," as they had not committed any grave antisocial acts. The misconduct of the delinquent girls ranges from prostitution and the unconventional relationship of one girl with a man whom she expected to marry to running away from home or persistent lying and disobedience to parents. The behavior of the girls classed as nondelinquent includes such acts as leaving home to stay with friends, being on the streets a great deal, untruthfulness, some fabrication, and "going to New York to find work." In most of the nondelinquent cases, however, there were no serious instances of misconduct. This classification into "delinquent" and "nondelinquent" cases is necessarily arbitrary, but it roughly differentiates between those girls who were a source of social disorder in the community and those who were not. The common factor in all of these

applications is the social maladjustment of the girl standing in the way of her own development. The social treatment took the form of supervision at home or in a foster home, advice to the family, or aid in getting the girl under the care of another social agency. However, the nature and success of treatment are not the subject of this study, the aim being to discover whether or not mental factors peculiar to immigrants in America may have caused the social maladjustment.

The case record includes interviews with the girl, members of her family, employers, teachers, and others who knew her, and observations of the environment of the girl made by a trained social worker. In a majority of cases there were reports of medical and psychiatric examinations. The lack of certain information significant to the problem of the girl in an immigrant family is at once conspicuous in a majority of the records. Certain facts of this sort may appear in a record where others equally pertinent are omitted. On the whole, the records in most cases do not reveal the attitude of the family toward this country and its customs, whether they are antagonistic or satisfied with the conditions here, whether they are ready or eager to adopt American ways, or whether they instinctively or deliberately try to maintain their native practices. The purpose of the family in coming to America and their attitude toward becoming citizens of this country are rarely shown. The attitude of American neighbors and the standing of the foreign family in the community are not often indicated, nor whether or not their friends are all from their native group. The extent to which the native language is used in the home is not reported, nor whether the family use books and newspapers in their own language. The degree in which they measure up to the standards of their own nationality or race is not indicated in most cases. The girl's attitude toward the country of her ancestors, whether she feels at home in America or is disturbed by difficulties due to foreign ways of doing things or unfamiliarity with the language, whether she is ashamed of her parents' foreign ways or resentful of their uneducated opinions are not shown. The effect of change from country to city life can not be seen, as the conditions of the girl's early life are not usually described with any detail.

The average social record in the most progressive social agencies consists mainly of information about the immediate situation that has led to the application for aid and about measures for dealing with this situation. There is a certain amount of information about the history and present condition of the persons concerned in the drama, chiefly facts bearing upon the present situation. There are glimpses of personality seen through the social worker's observations; snatches of record descriptive of personality. But most social records deal with situations and not with personalities. This is natural and also,

in a sense, necessary. The object of social work is to effect a readjustment of social relationships which will make the client or patient more stable.

The question of what social records should or should not be is still a moot point and hinges about the practicability of making them chronological records of active cases serving both the immediate purpose of treatment and the ultimate purpose of research. It is questionable if relationships can be successfully readjusted when personalities are so incompletely understood, and it is more than likely that social workers have little understanding of personality when records are lacking in this important respect. There is an enormous amount of data continually displayed before the social workers of the country which would illuminate many social problems if properly recorded and used. Because of the inaccuracy and inadequacy of these records, social agencies afford much less material for research than they might. The pressure of new applications, lack of time for careful planning, and lack of training in recording are some of the causes. To meet this situation one social agency, at least, the Children's Aid Association of Boston, established, in 1923, a department of research with a special research secretary in charge. Perhaps the chief reason for the dearth of information about personality and mental attitudes may be found in the fact that social workers as a rule do not yet receive as part of their education a sound training in the fundamentals of personality and mental development. Taking the records of social agencies as we find them we do, at any rate, secure facts that at least indicate the outlines of some of our main social problems.

GENERAL DESCRIPTION OF THE 210 GIRLS INCLUDED IN THIS STUDY.

There are 24 nationalities represented among these 210 cases, classified according to the birthplace of the father. In 128 cases the girl was born in the United States; in 79 cases in a foreign country, and in three cases the birthplace was not reported. The proportion of delinquent and nondelinquent girls born here and abroad was about the same—two-thirds in the United States and one-third abroad. With a few exceptions, the Italian and Irish girls were born in America, whereas all but one of the Greek girls were born in Greece. The figures for the other countries show about the same number of native-born and foreign-born girls. The distribution of delinquent and nondelinquent girls of the different nationalities is presented in Table I. The numbers are so small, however, that no definite conclusions can be derived.

TABLE I.—Foreign-born and American-born girls and delinquent and non-delinquent girls classified according to country of birth of father.

Country of birth of father.	Foreign-born girls.	American-born girls.	Birth-place not reported.	Total.	Delinquent girls.	Non-delinquent girls.	Total.
England.....	3	9	0	12	8	4	12
Scotland.....	3	5	0	8	5	3	8
Ireland.....	-3	21	0	24	16	8	24
Norway.....	4	1	0	5	3	2	5
Sweden.....	3	5	0	8	3	5	8
Denmark.....	2	3	0	5	3	2	5
France.....	1	2	0	3	3	0	3
Germany.....	1	4	0	5	4	1	5
Poland.....	4	6	2	12	10	2	12
Austria.....	1	1	0	2	1	1	2
Hungary.....	0	1	0	1	0	1	1
Russia.....	3	0	0	3	3	0	3
Finland.....	3	2	0	5	4	1	5
Lithuania.....	0	3	0	3	1	2	3
Greece.....	7	1	0	8	2	6	8
Albania.....	1	0	0	1	1	0	1
Italy.....	6	27	1	34	18	16	34
Portugal.....	1	3	0	4	3	1	4
Armenia.....	3	0	0	3	0	3	3
Syria.....	3	2	0	5	4	1	5
China.....	1	0	0	1	0	1	1
Canada and Newfoundland.....	26	30	0	56	36	20	56
West Indies.....	0	1	0	1	1	0	1
South America.....	0	1	0	1	0	1	1
Total.....	79	128	3	210	131	79	210

The several different types of misconduct found among the 131 delinquent girls were as follows:

	Instances.
Dishonesty.....	23
Sex delinquency.....	89
Use of alcohol and drugs.....	4
Violence and abuse.....	10
Other forms of misbehavior.....	85

The miscellaneous, or "other forms of misbehavior," occurring in 65 per cent of the delinquent cases include running away, persistent disobedience, excessive lying, running the streets, staying out late at night, or remaining out all night. Sex delinquency was known to have occurred in 68 per cent of all the cases.

The delinquent girls involved in court action comprised 54 cases, or 41.2 per cent, which is slightly more than one-fourth of the entire group studied. The complaints recorded in court were as follows:

	Cases.
Stubborn child.....	31
Runaway.....	4
Bastardy.....	4
Disorderly conduct.....	4
Larceny.....	3
Fornication.....	2
Neglect.....	2
Bigamy.....	1
Incest.....	1
Drunkenness.....	1
Receiving stolen goods.....	1

The court charge is not a reliable index of the girl's delinquency, because all stubborn children were not complained of in court; some runaways were brought into court on a "stubborn child"

complaint; there were cases of incest not brought into court; and there were other cases of illegitimate pregnancy besides the bastardy cases. Disorderly conduct and larceny did not always lead to arrest.

The ages of these girls at the time of the application to the society ranged from infancy in two cases to 25 years in four cases, and 26 in one case. Those between 15 and 20 years comprised 66 per cent, about the same proportion of delinquents and nondelinquents existing in this group. Sixteen per cent were children under 15, the larger proportion being nondelinquents; and 15 per cent were over 20, the larger proportion being delinquents. The majority of the foreign-born girls, 58 per cent, came to this country when under 15 years of age, and about one-fifth (21 per cent), came after they were 20. In 12 cases the age of the girl on arrival was not reported.

The religion of the girl was Catholic in 113 instances; Protestant in 79 cases; and not reported in 18 cases. In only 4 cases was a difference of religion noted between parents and child.

Only two girls were married at the time of application and fourteen married during the time they were known to the society. Of the two girls previously married, one had run away from a dishonest and abusive husband, and the other had a "steady" husband, but left him for other men.

The economic status of the girl's home was "comfortable" in 65 cases (in 20 cases the family owned property); "marginal" in 95 cases; "dependent" in 32 cases (in which the family either received financial aid or were in need of it); and 18 girls had no home in this country. In 76 per cent of the cases it would appear that financial need was not a factor in the girl's problem; and in only 15 per cent did it seem likely that financial difficulties of the family might possibly have been a contributing cause. The character of the home conditions of delinquent and nondelinquent girls is compared in Table II.

TABLE II.—*Character of the home.*

	General character.					Excessively bad conditions.				Economic condition.					
	Satisfactory.	Fair.	Unsatisfactory.	No home.	Total.	Physical.	Moral.	Both.	Total.	Own property.	Comfortable.	Marginal.	Dependent.	No home.	Total.
Delinquent girls:															
Number.....	42	25	51	13	131	4	30	7	41	9	27	62	20	13	131
Per cent.....	32.1	19.1	38.9	9.9 ¹	62.4	9.8	73.1	17.1 ²	60.3	6.9	20.6	47.3	15.3	9.9 ¹	62.4
Nondelinquent girls:															
Number.....	31	13	30	5	79	2	17	8	27	11	18	33	12	5	79
Per cent.....	39.2	16.5	38.0	6.3 ¹	37.6	7.4	63.0	29.6 ²	39.7	13.9	22.8	41.8	15.2	6.3 ¹	37.6
Totals:															
Number.....	73	38	81	18	210	6	47	15	68	20	45	95	32	18	210
Per cent.....	34.7	18.1	38.5	8.6	100.0	8.8	69.1	22.1 ²	32.4	9.5	21.4	45.3	15.2	8.6	100.0

¹ Per cent of total girls studied.

² Per cent of total having excessively bad home conditions.

Here it will be observed that 38.9 per cent of the delinquent girls and 38 per cent of the nondelinquent girls were recruited from homes the general character of which was considered unsatisfactory. It will also be observed that the percentage of delinquent girls recruited from homes in which the physical condition alone was excessively bad was about the same as the percentage of nondelinquent girls, and in homes where the moral situation only was excessively bad, the proportion of delinquent girls is little in excess of that of the nondelinquent. In homes where these two conditions are combined it will be noticed that the ratio of nondelinquent girls is higher. No great differences prevail when the economic conditions of the home are compared for the two groups concerned. It is apparent that the number of cases involved is too small to justify any definite conclusions. A comparison of these conditions points to the necessity for more detailed and tangible information concerning the character of home conditions in order that more light may be thrown upon those environmental factors which play such an important rôle in the molding of character traits.

The general character of the homes of the 192 girls who had homes either with parents or relatives at the time of application are described herein as *satisfactory* in 73 cases, *fair* in 38 cases, and *unsatisfactory* in 81 cases. The classification "satisfactory" is used to indicate a home that is comfortable and clean, and in which the members of the household are law-abiding and regular in their habits and take an average interest in each other's welfare. "Fair" is used to indicate a home in which there are less comfort and fewer opportunities for home life than is desirable, but in which there are no immoral influences and the habits of the family are regular; or it may mean a home that is comfortable and in which the parents are well-meaning but not always wise. "Unsatisfactory" indicates the absence of the above conditions. Including the 18 girls without homes, there were decidedly unsatisfactory living conditions in 99 instances, or 47 per cent of all the cases.

The employment of the fathers of these girls is represented by 32 occupations, as set forth in the following tabulation:

Factory workers.....	36
Laborers.....	19
Carrying on a business of their own.....	11
Janitor or watchman.....	8
Teamster.....	8
Machinist.....	6
Carpenter and fisherman (each).....	5
Painter, barber (each).....	4
Engineer, clerk, miner, peddler, sailor (each).....	3
Cook, cobbler (each).....	2
Soldier, waiter, chauffeur, ship captain, draughtsman, printer, electrician, musician, stonemason, egg tester, salesman, designer, mason, tinsmith (each).....	1
Unknown.....	62

These occupations can not be graded according to the degree of skill and intelligence they require because this is not accurately indicated by the information reported. Some of the factory workers may have been skilled mechanics. At least it may be said that 28 per cent of those whose occupations are known had their own business, had a position requiring a good deal of intelligence, or were in skilled trades.

The majority of the girls had left school in the upper grammar grades; several had graduated from grammar school; 4 had graduated from high school; 33 had spent some time in high school; 10 had taken a course at a business or trade school; 2 were in training to be teachers; 1 to be a nurse; and several were still in school. Twenty-seven girls (12.8 per cent), some of whom were feeble-minded, were backward in school work and had not reached the sixth grade. On the whole, the educational advantages of these girls seemed as satisfactory as could be expected.

FACTORS OF SOCIAL MALADJUSTMENT COMMON TO BOTH IMMIGRANT AND NATIVE FAMILIES.

There are certain conditions which are always potential causes of social maladjustment wherever they occur, such as bad home conditions, restricted activities, delinquency of parents or siblings, mental disorder, and physical illness either in the child or the parents.

TABLE III.—*Family status.*

	Illegitimate birth.	Parents separated.	Parents who deserted.			Parents dead.				Step-parents.			Foster parents.
			Father.	Mother.	Total.	Father.	Mother.	Total.	Both.	Father.	Mother.	Total.	
Delinquent girls.....	4	17	4	4	8	17	31	48	3	6	13	19	20
Nondelinquent girls.....	3	10	1	0	1	16	24	40	4	6	13	19	11
Total.....	7	27	5	4	9	33	55	88	7	12	26	38	31

UNFAVORABLE HOME CONDITIONS.

The family status of these girls is shown in Table III. In 3.3 per cent of all cases the girl was of illegitimate birth; in 42 per cent one parent had died (in 33 cases the father and in 55 cases the mother); and both parents were dead in 3.3 per cent of the cases. In 12.9 per cent the parents were separated (5 fathers and 4 mothers had deserted.) Fourteen and eight-tenths per cent of the girls had foster parents at some time, and 18 per cent had step-parents (in 12 instances a father and in 26 instances a mother.) A comparison of the family status of delinquents and nondelinquents does not

yield anything of particular significance except the fact that 14 per cent of the delinquents and 24 per cent of the nondelinquents had step-parents, and that 36 per cent of the delinquents and 50 per cent of the nondelinquents had one parent dead. In 68 cases (32.4 per cent) both parents were living in the home and the potentiality existed for ordinary family life. Among the 210 girls, 38 had both parents of good character; 35 had both parents delinquent; and the character of the parents was unknown in 52 cases. The incidence of delinquency, nondelinquency, and unknown character of parents is set forth in Table IV. Here it will be observed that delinquency among parents and siblings occurred in about the same proportion among delinquent and nondelinquent girls. The same also holds true for parents and siblings whose character was classified as "nondelinquent." Here, again, the number of cases involved is perhaps insufficient to draw definite conclusions, but they open up new avenues of approach for future study with respect to environmental situations in relation to the evolution of delinquency.

In 40 instances the girl had received care for a period of time in a charitable or correctional institution—20 (12 delinquent and 8 nondelinquent) in a children's home; and 20 in a correctional institution. Five girls had previously been placed out by a social agency; 1 had been in a maternity home; and 7 had attended boarding schools. Altogether, 51 girls had experienced some form of institutional supervision or care.

TABLE IV.—*Delinquency of parents and siblings.*¹

	Delinquent.				Nondelinquent.				Offenses unknown.				Total.
	Father.	Mother.	Both.	Siblings.	Father.	Mother.	Both.	Siblings.	Father.	Mother.	Both.	Siblings.	
Delinquent girls:													
Number.....	52	37	26	34	30	47	25	38	49	47	30	49	131
Per cent.....	39.6	28.2	19.8	25.9	22.9	35.8	19.1	29	37.4	35.9	22.9	37.4	.....
Nondelinquent girls:													
Number.....	27	17	9	16	20	21	13	21	32	41	22	26	79
Per cent.....	34.2	21.5	11.4	20.3	25.3	26.6	16.4	26.6	40.5	51.9	27.8	32.9	.....

¹ No siblings in 26 cases.

RESTRICTED ACTIVITIES OF THE GIRL.

The activities of the girls in leisure time were not reported in 104 cases, but some indications may be gathered from the cases in which there is information of this sort. If we consider satisfactory recreation to imply some variety of activities for leisure time among companions whose influence is not demoralizing and under conditions that are not injurious to physical and moral development, then in only 9 cases was the recreation of the girl satisfactory, and in 62

cases it was decidedly unsatisfactory. In 35 cases no recreation was allowed the girl. Only 17 of the 34 Italian girls were allowed recreation, and only 4 of the 8 Greek girls. The forms of recreation mentioned in the 71 cases in which recreation was reported were the "movies," 39 times; dances, 18 times; walking the streets, 15 times; automobile rides with men, 14 times; music, 5 times; theater, 4 times; restaurants, beaches, skating, walking, church activities, 2 each; bowling, amateur theatricals, glee club, bicycle, tennis, 1 each.

Church attendance and participation in church activities was not reported in 145 cases. Of the 65 cases in which it was reported, 44 girls attended church regularly, 5 irregularly, 14 never went, and 2 were not allowed to go. There were 8 girls who were reported as attending Sunday school, and 4 girls sang in the choir. In all, 44 attended church regularly, of whom, 23 showed an active interest. Twenty-four per cent of the delinquents and 15 per cent of the nondelinquents were regular in attendance. In only 4 cases was a difference of religion observed between the girl and her parents (3 delinquent girls and 1 nondelinquent). Only one case of friction due to difference of religion was reported.

The character of the girls' companions was not reported in 92 cases. Only 18 girls appeared to have satisfactory companions. Fourteen were said to have "few friends," and 28 had no companions outside the family. In 58 cases the girls' companions were of a decidedly bad character. These comprised 55 per cent of the cases in which there was information on the subject; and 54 of the 58 cases were delinquent girls. Of the 18 with satisfactory companionship, 17 were nondelinquent. A large proportion of delinquents were found with few or no friends. Only one delinquent girl was found whose recreation and companionship were at all suitable.

In 188 cases there was no report on the girls' tastes and habits in reading. Seventeen girls reported reading and enjoying it, ten of whom were delinquent.

Membership in some voluntary organization such as a neighborhood-house club or the Girl Scouts, was mentioned in 12 cases—8 delinquents and 4 nondelinquents. Several girls attended meetings of societies of their own nationalities.

Fifty-one girls were attending school, 4 did not work, and 10 were unreported as to employment. The remainder were employed in 17 different types of work, as follows: Factory, housework, store, clerk, waitress, maid in hotel or institution, errand girl, theater usher, sewing, nurse in training, teacher, nursery governess, keeping house at home, cashier, telephone operator, circus, and farm. About half of those working were in factories. The character of the girls' work was not reported in 50 cases. Sixty-eight girls were considered efficient workers, 19 were inefficient, and 22 worked irregularly.

Of the working girls whose quality of work was known, 62 per cent had a good record in their employment, and nearly three-fifths of this number were delinquent girls.

DELINQUENCY IN PARENTS AND SIBLINGS.

Among the 210 cases studied there were 98, or 46 per cent known to have one delinquent parent (the father in 79 cases, the mother in 54 cases, both parents in 35 cases), and probably the percentage was actually considerably larger for there were 117 parents whose character was not reported (81 fathers, 88 mothers, and both parents in 52 cases; see Table IV). Only 13 cases were found in which neither the girl nor her parents were delinquent. The delinquent girls showed only a slightly higher percentage of delinquent parents—of fathers, 39.6 per cent for delinquents and 34.2 per cent for nondelinquents; of mothers, 28.2 per cent for delinquents and 21.5 per cent for nondelinquents. Considering only the cases in which the character of the parents is known, 63.4 per cent of the delinquent girls had delinquent fathers and 44 per cent of the delinquent girls had delinquent mothers. Cases in which both parents were delinquent were nearly twice as frequent among the delinquent girls as among the nondelinquent (19.8 per cent compared with 11.4 per cent), and cases in which neither parent was delinquent were slightly more frequent among delinquent girls (19.1 per cent compared with 16.4 per cent). In one-third of the cases one parent was reported competent and reliable, and in a little over one-sixth of the cases both parents were of good character. Of all the cases in which the character of the father and mother was known, 61 per cent showed delinquent fathers and 44 per cent delinquent mothers. The character of foster-parents and step-parents must also be considered. Among the foster parents (in foster homes found by the families themselves) 14 were reported to be of bad character and 17 of good character. Among step-parents, 22 were of bad character, 11 of good character, and 5 whose character was unknown. Delinquents unfavorably guided by foster parents comprised 7.5 per cent; by step-parents, 7.5 per cent; while for nondelinquents it was 5 per cent with foster parents and 15 per cent with step-parents. These figures are too small to be significant for comparison. The essential fact is that among these 210 socially maladjusted girls, about 15 per cent had foster parents and 18 per cent had step-parents.

Delinquency appears with slightly higher frequency among the siblings of delinquent girls than among the siblings of nondelinquent girls. The same is true of nondelinquency, although the difference is less pronounced. The percentage of cases in which the character of siblings is not reported is about the same for both groups. In 13 cases (11 delinquent girls and 2 nondelinquent girls) there were only

2 delinquent siblings; in 4 cases (3 delinquent girls and 1 non-delinquent) there were 3 delinquent siblings, and in one case of a delinquent girl there were 4 delinquent siblings.

PHYSICAL AND MENTAL DISORDERS.

Physical illness among parents is reported in so few cases that it evidently had not been recorded except in extreme cases. Five cases of physical disability were recorded in both parents (4 cases of delinquent girls and 1 nondelinquent); 11 cases in the father alone and 22 cases in the mother alone. The proportion was about the same for delinquent and nondelinquent girls. These figures, complicated as they are by many other factors, are not sufficient to throw any light upon the difficulties of these girls.

With respect to the mental condition of parents, in the cases of 88 fathers and 88 mothers data were insufficient to justify any definite conclusion regarding them. In the cases of 68 fathers and 65 mothers no mental disorders were observed, and they were regarded as normal. Fifty-four fathers and 57 mothers had been recorded as "mentally defective," with "frank mental disease," "marked mental instability," or "alcoholic." Of the 420 parents involved, in 176 the mental condition was unknown, and in 133 no mental disorders were recorded, leaving 111 fathers and mothers who suffered from some form of mental disorder. In the case of 15 girls both parents had some mental disorder or disease. Cases were listed under "mental instability" only when there was marked evidence of some mental trouble, such as repeated outbursts of temper, persistently erratic conduct, peculiar forms of lying, or attempts at suicide. "Mental defect" indicates feeble-mindedness and subnormal mentality. "Mental disease" is used only when the diagnosis has been made by a psychiatrist and includes not only the psychoses, or so-called "insanities," but also other forms of mental trouble, as hysteria and constitutional psychopathic inferiority, so that cases thus classified are not all of the type that require hospital care.

The available data upon the physical condition of siblings is not sufficiently full to be of special importance or significance.

The mental condition of siblings is not reported in 78 cases, and in 26 cases there were no siblings. There are 30 cases in which one or more of the siblings were reported to have some form of mental disorder—mental defect in 20 cases, mental disease in 3 cases, marked mental instability in 5 cases, and alcoholism in 2 cases. In 78 cases the reports of the siblings indicated that there was no mental disorder, but the reports were not sufficiently full to be reliable and it would not be safe to conclude that only 28 per cent of the known cases (14 per cent of all cases) show mental disorder in siblings.

Regarding the girls, physical disabilities were found in 45, of whom 24 were delinquents and 21 nondelinquents. There were several who had syphilis or gonorrhoea, contracted in the course of a delinquent career, and one had congenital syphilis. A number were poorly developed, or anemic, and in a few cases there was a suspicion of tuberculosis. Two girls were deformed and one was a cripple. One had a severe chronic heart trouble. Several needed glasses or dentistry or tonsillectomy. These figures deal only with marked forms of physical disorder; the minor deviations from the normal which were brought out in the physical examinations are not here analyzed. In nearly four-fifths of the cases there were no indications of physical ill health, that is, either the physical examination was practically negative or, in those cases not examined, the girl gave no sign of illness.

Some form of mental disorder is shown in 41 per cent of the 210 girls; mental defect in 13.3 per cent, mental disease in 4.2 per cent, marked mental instability in 22.4 per cent, alcoholism in 1 per cent. Among the 124 girls in whom no mental disorder is noted it is quite possible and even probable that further study would have shown definite psychopathic conditions. It was not possible to secure a psychiatric examination for all cases, though a majority received examination. The cases listed as "mental defect" and "mental disease" were so diagnosed by psychiatrists, and some of the cases of "marked mental instability" had been seen by psychiatrists, while others were so classed because the girl showed obvious signs of mental disorder in her conduct.

Fifty-five per cent of the delinquent girls and 17 per cent of the nondelinquent girls had some mental disorder. Among the delinquents there were 26 mentally defective girls and 6 with a mental disease, while 38 showed mental instability of some kind, and 2 were alcoholic. Among the nondelinquent girls 2 were defective, 3 had mental disease, and 9 were markedly unstable. Of the 28 mentally defective girls 2 were not delinquent. Considering the factors of social disorder that appear in these cases, this is what would be expected.

Regarding the girls and their parents as a whole, there were 146 cases in which mental disorder occurred in either the girl or one parent and 30 cases in which it occurred in both the girl and one parent. Therefore, in about 70 per cent of all cases, mental disorder of a conspicuous type was a factor in forming the girl's social situation and personal character. If the mental condition of the 88 fathers and 88 mothers for whom there is no report were known, the aggregate number of mental cases would probably be higher. In

those cases showing unmistakable signs of mental disease there were 52 cases in which either the girl or one of her parents was afflicted and 8 cases in which both the girl and one parent were afflicted.

FACTORS OF SOCIAL MALADJUSTMENT PECULIAR TO THE IMMIGRANT FAMILY.

It was mentioned above that the records of these cases contain comparatively little data upon the special features of an immigrant's situation in this country. There were only 57 cases (32 delinquent girls and 25 nondelinquent girls) in which the record showed that the family endeavored to maintain the customs of their country and resisted the tendency of the girl to follow American ways. But in the remainder of the cases the habits of the family were not described sufficiently to indicate whether foreign customs were a factor in the maladjustment of the girl. Apparently other factors present were enough to cause the difficulty, but whether these factors were themselves in any measure due to a conflict of Old World and New World customs could not be told from the data available. The use of a foreign language in the home was reported in 42 cases, nearly 40 per cent of the non-English speaking part of the group. But this figure gives little indication of the actual situation, as this item is not given in many of the records. In 10 cases a language difficulty of the girl was mentioned.

The attitude of the girl and the family toward their adopted country was hinted at in only a few cases in descriptive phrases. One father called himself "100 per cent American"; one mother was said to be "anti-American"; one family was said by the neighbors to be "very foreign in their ways." The reasons for emigration were reported in 25 cases only. In 12 cases they had come to join relatives; in six to find work; two came to escape from abusive relatives; one to get away from the effects of war; one for a change; another for education; one girl to be married; and one because she was pregnant. Naturalization of the father was reported upon in only 14 cases, 4 of which were not naturalized, 8 were naturalized, and 2 had taken out their first papers.

Whether there was a change from country to city life in the experience of the girl was not clearly indicated in most cases. Only 20 girls were known to have been brought up in the country or in small towns.

Conflicts between American and foreign ways, resulting in over-strict control of the girl by parents or relatives who were endeavoring to carry out the traditions of their own country, was clearly indicated in 53 cases, of which 30 were delinquent girls and 23 nondelinquent. In 26 cases parents were responsible; in 10 cases, step-

parents; in 1 case, foster parents; and in 16 cases, relatives. This difficulty was shown in one-half of the 34 Italian families in the group, in 8 of the 56 Canadian families, 3 of the 4 Portuguese families, in 5 of the 12 Polish families, 4 of the 8 Greek families, 2 of the 3 Armenian families, and in all 5 of the Syrian families. There were 4 such cases among the Irish, and 1 each among the English, Scotch, Swedish, Austrian, and Albanian families.

Marked friction between the girl and her parents or the relatives with whom she lived was shown in 98 cases—55 delinquents and 43 nondelinquents. In all of the 53 cases of overstrict control there was more or less antagonism and resistance on the part of the girl, and in many cases anger, beatings, and harsh treatment on the part of parents or relatives. It can not be told to what extent in the remaining 45 cases of friction the conflict between American and foreign customs may have contributed to the discord; but it would seem that there were other conditions sufficient in themselves to cause it—for example, jealousy of a crippled sister, fear of assault by a stepfather, resentment against a father on account of his immorality, desire for freedom to seek unsuitable pleasures and bad companions.

Besides the 53 cases of overstrict control, there were 4 other cases in which the attitude of the immigrant unfamiliar with American conditions seemed to be a direct cause of the girl's social difficulty—2 cases of delinquent girls and 2 cases of nondelinquent girls. In one case the parents allowed the girl to go to New York alone to seek her fortune at the age of 16, because the father (from Poland) said: "Sixteen is the age at which, in my country, a girl is no longer controlled by her parents." An intelligent Polish girl of 17, interested in her work and eager for the usual pleasures, was neglected by her parents, who got drunk every Sunday with a party of friends and kept a dreary and untidy home. As a result the girl sought recreation through automobile rides with strange men. In this family two older brothers had accommodated themselves to these conditions and had grown up into steady and successful young men. A Norwegian girl was left by her father as a boarder in the home of a woman of bad character while he went West to work. A Finnish girl of 17, with hysteria, left the home of an excellent foster sister because she wanted to be free from the customary family oversight.

To what extent foreign customs and attitudes in the families contributed to the mental disorder found among the girls studied can not be determined from the data available, but in 17 of the 49 cases of marked mental instability it seems apparent that conflict with parents or relatives for this reason was a direct cause, in part at least, of the girl's mental difficulty. A young Syrian girl, with reasonable desires for American pleasures, living with an aunt who tried

to bring her up in alleged "Syrian fashion," was "boiling inside." An English girl, who had "tantrums" in her uncle's home, afterwards became a capable and well-behaved pupil nurse. An Armenian, strictly upholding the ideals of his own education in Turkey, beat his 17-year-old daughter for conduct customary among American girls; and sometimes, as she became more provocative, he would lose his temper and beat her cruelly. This girl fabricated about her own achievements, was extravagant, unreliable, and ran away from home. In these 17 cases a family attitude resulting from Old World traditions was a factor in causing mental instability in the girl. It is impossible to say in what degree this operated as a cause and to what extent other factors were also causes.

It is probably safe to assume that the conflict of foreign and American customs was one direct cause of social maladjustment with 26 of the girls who gave evidence of some form of mental disorder. In 60 cases this situation, apparently, was not directly responsible for the girl's social difficulty, which could be plainly traced to other causes. In the cases without signs of mental disorder, conflict between foreign ways and American customs seemed to be a factor in the maladjustment of 31 cases and not a factor in 93 cases. Thus 30 per cent of all cases of mental disorder and 25 per cent of all cases without mental disorder show that this conflict in the family situation was a prominent cause of the girl's social difficulty.

On the other hand, in many cases an overlax control was undoubtedly one of the causes of the girl's difficulties. Such expressions as the following occur in the records: "Shielded and humored," "running wild," "neglected and untrained," "father would not let mother correct the girl." It is impossible to say whether the foreign customs and attitudes of the parents were responsible for this lack of proper discipline and training of the girl.

RECAPITULATION.

When the facts brought out in the study of these social records are reviewed, it is evident that they do not afford a conclusive answer to either of two questions, namely, whether the immigrants' difficulties of adaptation in this country produce mental disorders, or whether the mental strain of such difficulties leads to social disorder. In only 27 per cent of the cases is it possible to say with any certainty that the conflict of foreign and American customs contributed to the social maladjustment of the girl. There is no proof that this was not also true of the others; but if it is true, the facts lie back of the obvious situations reported in the records, in the personal lives of the different members of the families and their relations to each other. In 73 per cent of the cases there existed con-

ditions not obviously related to the foreign origin of the parents which seem to be in themselves sufficient explanation of the mental and social disorder found among these girls. By the time these problems reached the social agency the social maladjustment of the girl had reached such a pitch that finer shades of causation were lost sight of in descriptions of present difficulties.

Conditions such as unstable homes, lack of opportunities for wholesome recreation and companionship, delinquency and mental disorder in the parents, which are likely to cause social maladaptation whether in an immigrant or native family, were found with great frequency in the cases studied. Forty-one per cent of the girls showed some kind of mental difficulty—a subnormal intelligence, a mental disease, or marked emotional instability. The asocial behavior in the cases of mental defect, disease, or instability could not be wholly attributed to difficulties of adaptation to American life. The nature of such disorders was, to some extent at least, due to inborn character. In 70 per cent of all cases mental disorder in some form was a complicating factor, appearing either in the girl or one of the parents, and possibly this percentage would be higher if the mental condition of the parents were known in those cases in which the facts reported were insufficient to indicate it. The extent to which difficulties of adaptation promoted mental disorder in the parents can not be told, but it is likely that some inborn tendency existed in many of them. The facts reported about the siblings are not sufficient to indicate the probability of abnormal mental strains in the families. In 25 per cent of all cases mental deficiency or definite mental disease occurred either in the girl or in one of the parents.

Unstable homes and broken family life are found in a high percentage of the cases studied. Both parents were living and together in less than half (45 per cent), and the girl was living with both parents in only 32 per cent of the cases. In only 35 per cent were the parents able to provide a comfortable, morally decent home for the girl; and this fact does not take into account possible discomforts arising from mental attitudes and customs. There was friction between the girl and the persons with whom she made her home in 47 per cent of the cases. The living conditions of 47 per cent of the girls were decidedly unsatisfactory—either without a home or in an unsuitable home. Thirty per cent of the girls were subjected to bad moral influences in their own homes. Family life for these girls was much broken through influences such as those resulting from the death of one or both parents, from step-parents, foster homes, institutional care, illegitimate birth, separation of parents, and desertion.

Delinquency in one or both of the parents occurred in 62 per cent of the cases in which their character was reported (46 per cent of all

cases). In only 18 per cent of the girls were both parents reported to be of good character, and in 16 per cent both parents were delinquent.

Information concerning recreation and companionship is lacking in about half the cases, but the small percentage of cases in which the girl was known to have had satisfactory recreation and companionship, would indicate a marked lack of opportunity for activities in leisure time. Church attendance was not reported in about half the cases, and only 10 per cent of the girls were known to take an active interest in the church.

This group would seem to be fairly representative, from the economic and educational standpoints, of an average American workingman's community. The economic condition of the family was decidedly comfortable in 30 per cent of the cases, and financial difficulties were evident in only 15 per cent. The fathers of the girls were, in most cases, workmen in occupations requiring intelligence, and over one-fourth were in skilled trades or owned their own business. The girls were educationally up to the average, and one-fifth of them were of high school grade. About one-fourth of the group were not yet out of school. Of those working, one-half were employed in factories; and of those employed and whose work record was known, 62 per cent were efficient (32 per cent of all cases).

In 27 per cent of the whole group of cases the family was attempting to maintain their native customs and to bring up the girl as they would have done in their own country. These show unmistakably that the struggle between the immigrant's standards and American ways was a direct cause of the girl's problem. They do not show, however, what other causes contributed to her difficulty, nor how important the foreign factor was. The proportion of nondelinquent girls among these cases is greater than the number of delinquents. The effect of foreign customs as a factor in the social maladjustment can be seen in three-fifths of the cases of girls with mental disorder, and in one-fourth of those without evidence of mental disorder. Among the emotionally unstable girls, marked indications that foreign customs were a contributing cause of the mental trouble were found in 35 per cent.

Facts concerning the social adjustment of siblings would be of great significance in evaluating the relative importance of inborn character and family custom. The information in the records, however, is insufficient to give any reliable indication of these facts. In 40 per cent of the cases with siblings there is no report of their character and conduct, and in 42 per cent no report of their mental condition. In the cases that contain information concerning siblings, the report does not always include all of them. In individual cases reports of successful adaptation of siblings to conditions apparently the same for them and the girl under consideration raise the question

as to whether personal traits rather than environmental influences were not the basic cause of the girl's difficulty, and whether conditions that appear the same for the different children in the family actually are the same. The latter should take into consideration the relationships between various members of the family as part of the home environment, and the effect of influences outside the home upon the home life of any member of the family. The young Polish girl who was running wild in her desire to compensate for a restricted, sordid, home life had two older brothers said to be very successful—fine young men. An Irish delinquent girl had good parents who had never experienced any trouble with six other children. A Swedish family of three girls and two boys showed two girls to be delinquent while the remainder were responsible and reliable.

Social case records should contain more information upon the social background of the immigrant in the community from which he originally came, his native intellectual endowment and education, his plans and desires, and his feelings and attitudes about this country. They should also contain descriptions of the particular American community in which the immigrant has settled, an account of the attitude of the community toward the immigrant, and his reaction toward that attitude. In other words, we should know the immigrant, his feelings, his new environment, and what opportunities are offered him. We should know this for every member of the family. While the records deal chiefly with factors that are common to all cases of social disorder, they are of little value in indicating measures that would help the immigrant situation. Miss Claghorn³ in a paper on methods of evaluating our immigrant peoples, says: "The social workers of the country have developed a technique especially adapted to the collection of material of this nature, and have made contacts through which it can be secured. And they have already collected a body of information of which use can be made. The material now on hand, however, is far from adequate. To carry out the task of research more completely, the social worker needs further training in the summarizing of material and greater financial support in carrying on research work."

The fact that at least 27 per cent of the 210 cases included in this study show plainly a relation between difficulties of immigrant parents in adapting themselves to American life and some social maladjustment of the daughter severe enough to bring her to the attention of a social agency, is in itself enough to show the need for studying more carefully the nature of these difficulties and the girl's reactions to them.

³Claghorn, Kate Halladay: *Methods of Evaluating Our Immigrant Peoples*. *Mental Hygiene*, vol. 7, No. 1. January, 1923.

The girls in this group represent 24 different nationalities, and there are not enough from any one nationality to throw light upon national customs in relation to American conditions. We need studies of large numbers of cases from different national groups to afford statistical indications, and also more intensive studies of smaller numbers of different nationalities carried on over a period of time, in which the process of adaptation may be studied while in progress and the interaction of influences within and without the home may be observed and experimented with. We need studies of the boys as well as the girls of immigrant families; and of all the children in a large number of families.

The factors that determine whether the child in the immigrant family shall become a productive American citizen or a useless burden upon his adopted country are many and complex. As in the physical sciences no problem is considered too complicated for study and experimentation, so in the mental sciences we are becoming bolder and are beginning to regard human nature as also subject to investigation. Investigations of human nature have brought the realization that an individual's life is not determined primarily by economic or legal factors, but by his mental attitudes and habits and by the effect upon him of the attitudes and habits of others. It is the task of mental hygiene to find means by which helpful mental attitudes may be developed and those that are harmful prevented. It is important to determine what special measures in mental hygiene are required for our foreign born. In careful studies of the causes of failure in immigrant adaptation, and especially of mental attitudes and habits, the primary factors in success or failure, lies our hope of bringing about a decrease in mental diseases and in antisocial behavior due to mental instability among the foreign born in this country.

Appendix.

ILLUSTRATIVE CASES IN BRIEF.

(a) *Delinquency in parents:*

(1) An immoral woman whose mother and sister had also been immoral, separated from her husband at 25 years of age and was taking lodgers to support her two girls, aged 13 and 10, the older an illegitimate child born before her marriage. The father was reported to be immoral and alcoholic. The children were receiving good physical care but no training, and the older girl was already showing a tendency to sex delinquency.

(2) An attractive 14-year-old girl was living with her mother and sisters and a younger brother. The father had left them some years before because of the mother's immorality. She was also believed to be dishonest. One of the sisters was immoral and alcoholic,

and the other was also probably a sex delinquent. The boy was playing truant and stealing. The family had a reputation in their neighborhood for a complete lack of moral standards.

(3) The father of two children, a married son and a girl of 16, was frequently arrested for drunkenness and finally deserted them. The mother, immoral and alcoholic, was employed as a charwoman. The son had been in a reform school. The daughter, an affectionate, pleasure-loving, quick-tempered girl of subnormal mentality, was a truant from school and a sex offender. This family was known to 10 social agencies.

(4) A feeble-minded girl of 12 lived with an alcoholic mother who kept a disorderly lodging house. In 10 years the family had made 12 moves. The father, who died when the girl was a year old, had been alcoholic and immoral. This child had been assaulted by one of the lodgers when younger. At 6 she began to steal and was remarkably adroit in concealing her thefts. She was a truant from school and often away from home several nights at a time. She was later arrested for stealing purses from shoppers and sent to a reform school.

(5) A girl whose father was dead lived with her immoral mother who was said to be "man crazy" and who had had an illegitimate child. The girl was antagonistic to her mother, who was abusive to her, and they were continually fighting. She ran away from home several times, led an irregular life with bad companions, and at the age of 18 had an illegitimate child which she took home. There were two younger brothers in the family.

(6) A girl of 14 had been placed by her parents with a family abroad where she was neglected and made to work. Her father died and, at the age of 6, she was sent to her mother in America. The latter was alcoholic and immoral, lived in a filthy, insanitary tenement, and was abusive to the girl. An older brother was arrested for drunkenness and larceny, and the mother was once arrested for assault and battery. The girl was reticent, worried, and unhappy, but had shown no delinquent tendencies except for some petty stealing and lying. She attended church and Sunday school regularly.

(7) A girl of 17, whose father was in Italy, lived with her mother, who was cohabiting with another man and running a dirty, disreputable lodging house. She was kept strictly in the house, even locked in at times, and made to work hard. She was unhappy and afraid of her mother but had shown no signs of delinquency. She had been in a convent school in Italy for a time.

(8) A girl of 16 was very unhappy over the continuous discord between her parents. The father was abusive to his wife and the mother had been unfaithful to him. The girl felt bitterly toward

her father and was afraid of him, while she was fond of her mother. She was a quick-tempered, stubborn girl, wanting a "good time," and much on the streets with boys. An older sister had run away from home and later married well.

(b) *Mental disorder in parents:*

(1) A girl of 15 had no respect for her mother who was "nervous" and lackadaisical, and would go to bed for days at a time if worried. The father had once been alcoholic and immoral but was now a steady workman. There were four younger children. This girl was beyond her mother's control and a sex delinquent.

(2) The mother of a 14-year-old girl was described as "peculiar" and subject to "fits." She not only beat the girl herself but allowed a man lodger to beat her. In defiance, the girl spent all her money on clothes and ran the streets with boys and men. She was a sex offender.

(3) A girl of 8, a well-behaved, quiet child, had an excitable and peculiar mother who was suffering from a mental disease but was not considered committable to a hospital. The father and mother accused each other of immorality and lived in continual discord. The mother finally deserted, taking the girl, her only child, with her.

(4) A family found itself in much difficulty financially because of the illness of both parents. The children ran wild. The mother was diagnosed as neurasthenic. The attitude of the 16-year-old daughter was ugly and defiant. She was out late at night, would not help at home, and was quarrelsome with her brothers and sister. The brother of 17, after a period in a school for the feeble-minded, worked regularly. A younger sister of 14 was said to be "a fine girl."

(5) The adaptation of another family showed the following: Both parents were alcoholic, and the father was cruelly abusive to his wife and children. A daughter of 20 lived in constant fear of her father and antagonism toward her mother. A younger girl was moody and sullen and made suicidal threats. A brother of 17 was also alcoholic and abusive. The mother finally committed suicide and the father was sent to a State hospital with the diagnosis of alcoholic psychosis.

(6) A girl of 16 was neglected and abused by her parents, who were both alcoholic and immoral. The mother was "peculiar" and hysterical. For two years the child had been in the care of the State. The home was neat but there was continual discord between the parents. The girl was discharged from her work for being too free with men.

(7) A religious fanatic, mentally unbalanced, had 14 children, 5 of whom were brought up by social agencies. He married an immoral woman as his second wife, and after her death cohabited

with his housekeeper, living in a dirty, disorderly home. The girl of 15 he placed with a woman who kept a disreputable lodging house. She was a well-behaved child, slightly backward in school, and beginning to be "boy crazy." One sister was subnormal and unstable. The remainder of the siblings were successful.

(8) A mother was committed to a State hospital with a chronic mental disease when her daughter was 3 years old. An aunt kept house for the father, who was quite an old man. The child had become a bright girl, capable of doing exceptional work in school, was willful and deceitful, played truant, and persisted in staying out all night. She had no respect for her father. A younger brother was feeble-minded, while an older brother presented no difficulty.

(c) *Some adaptative difficulties in an American environment:*

(1) A woman, after her husband's death, came here with her children, a boy and a girl, to get work and educate them. She did day-work, was thrifty and had accumulated enough money to buy a farm. She had a comfortable home, but rigidly restricted her daughter of 18 from enjoying the pleasures of an average American girl, except for an occasional church entertainment. She was allowed no young friends. The girl resented this strictness and married at her first opportunity. The boy, after a term in a reform school, joined the Navy.

(2) A girl of 16, intellectually defective, ran away from home and got drunk. She was actively rebellious against the foreign customs of her family, even refusing to eat the food prepared according to foreign custom.

(3) A 15-year-old girl of good ability, eager for education, was discontented because she was kept closely at home, not being allowed out at night even to attend a neighborhood house club. She heard of a job in New York and ran away. When found and sent home, she was allowed to go back to school, a privilege which had formerly been refused.

(4) A girl of 18, of good ability and a "strong character," was unhappy and dissatisfied because her mother failed to adopt any American ways or customs and beat her whenever she went out without permission. The mother desired her daughters to remain at home and crochet or sew. This girl was not allowed to have her fiancé come to the house. The parents were good people but the mother had a quick temper. The younger girls defied her. This girl had managed to adjust herself to the situation.

(5) Foreign parents who, after 30 years' residence had not assimilated American customs and standards, would not allow their 15-year-old daughter, "wanting a good time," to go out alone. She evaded their authority and went with a crowd of bold American girls, staying away from home several days at a time. In the end she

eloped with a young man whom the family later accepted. The girl's home was clean and pleasant and the family life wholesome, but "too quiet."

(6) A girl of 19, living with her mother and two brothers, refused to conform to the customs of the family, avoided those of her nationality, and said she preferred "American ways." Her brothers regarded her as too "high toned." She ran after American boys and was taken in charge by the police for idle and disorderly conduct with sailors. She finally ran away to another city to get work.

(7) A girl of 18, self-reliant and of good judgment, had had a good home until her mother's death two years before. Her father married again and the stepmother was unkind. A marriage was arranged for her with a husband found by her cousin, a custom long cherished by her nationality, and preparations for the wedding were being made when she decided that the man was not suitable and ran away to another city.

(8) A girl of 17 came to live with an uncle who kept a restaurant. She worked for him but he kept back her wages, a custom not infrequently employed by certain nationalities. She quarreled with him and ran away and was found living alone in a house with three men, to one of whom she was engaged.

(9) A girl of 16 who was usher in a theater was not allowed to go out without her mother except to her work. She had developed a strong antagonism toward her parents and older brothers. At 15 she attempted suicide. She was alert, self-assertive, and independent, with a jealous, changeable disposition. In accordance with their native custom, her family insisted upon marrying her to a man she had never seen. She eloped with an older man who was infatuated with her and apparently made a happy marriage.

(10) A girl whose parents were dead was living with a married sister. The sister and her husband were scrimping to buy a house, living in overcrowded quarters. They overworked the girl and gave her no pleasures. She had been quiet and gentle as a child, but at 16 was untruthful, lazy, and a trouble maker, with a saucy, independent manner. She was bright and quick but changed jobs frequently.

(11) A girl of 15 who had hysterical fainting spells was allowed no recreation and no companions by her father and stepmother. They were both good people and kind, but they spoke very little English and did not know any other way to treat the girl except according to the "Old World" custom. They tried forcing her to marry a man they had chosen. The girl was childish, earnest, and unhappy. She ran away and eventually was sent to an industrial school.

(12) A girl of 16 lived with an aunt who took all her wages, allowed her few clothes and no recreation, and made her do much of the

housework. Later, when she was 18, she left home because her aunt questioned a young man, to whom she considered herself engaged, about his intentions in regard to marriage.

(13) A girl, subject to severe fainting spells, whose father had lived in this country 25 years, insisted upon marrying a young man she knew to be feeble-minded as a means of escape from the strictness of her father's control.

WORLD HEALTH CONDITIONS AS REPORTED BY THE HEALTH SECTION OF THE LEAGUE OF NATIONS.

The following general summary of world health conditions is taken from data published in the Monthly Epidemiological Report of the Health Section of the League of Nations, issued January 15, 1924:

PLAGUE.

India.—During the four weeks from October 14 to November 10, 1923, there were reported 12,124 deaths from plague in British India, a number that makes insignificant the reports of the disease in other parts of the world. The mean October plague mortality for the previous 24 years was stated to be 14,857. An unusual feature of the Indian plague reports for 1923 relates to the prevalence of the disease in the Northwest Frontier Province, a part of India which had previously enjoyed a remarkable comparative immunity. Plague appears to be more severe in the Central Provinces than for several years past, whereas in the United Provinces the incidence of the disease is well below the average incidence for the particular period.

Java.—Java is next in importance, with 1,085 deaths from plague reported from August 1 to September 30, 1923. This is lower than the figures for the same months for the two preceding years.

Europe.—The only plague cases reported by European health administrations since the previous report (December 15, 1923) occurred in Piræus, Greece, and in the Kirghiz Republic and the Ural Government of Russia.

CHOLERA.

Reports of cholera were as follows:

Locality.	Date.	Cases.	Deaths.
British India, total.....	Oct. 14—Nov. 10.....	3,531	2,170
China—Hongkong.....	Nov. 17—Dec. 1.....	1	.....
Indo-China—Saigon.....	Aug. 12—Sept. 15.....	4	4
Iraq.....	Oct. 31—Nov. 13.....	11	6
Persia:			
Abadun.....	Sept. 7—Oct. 4.....	8	7
Mohammerah.....	do.....	24	12
Siam.....	Oct. 21—Nov. 17.....	1	.....

SMALLPOX.

Reports received since the last issue of the Epidemiological Report pointed to an epidemic occurrence of smallpox in Hongkong, where from November 16 to December 1, 1923, 170 deaths were ascribed to the disease; and during the four weeks covering the period from November 4 to December 1, 1923, the deaths from smallpox numbered 316, a number considerably in excess of the total annual mortality for any one of the past five years. The total population of the colony is stated to be 625,000, of which 98 per cent is Chinese.

The number of cases of smallpox in Siam has been on the decrease since the epidemic in August. In Spain, there were 76 deaths from smallpox in October, as compared with 33 in September and 31 in August. Smallpox prevalence was stated to be increasing in Switzerland.

TYPHOID FEVER.

In the large majority of the countries from which reports are received, the prevalence of typhoid fever was apparently less in November, 1923, than in 1922. Germany and Italy are stated to be exceptions, both showing a relatively higher prevalence of typhoid.

No marked changes were noted with reference to influenza, lethargic encephalitis, poliomyelitis, cerebrospinal meningitis, and scarlet fever.

The report states that the Service of Epidemiological Intelligence and Public Health Statistics is now receiving currently official reports on notifiable diseases from a considerable number of countries, and that the data are being compiled and presented each month in order to make the information as valuable as possible. Through the cooperation of the ministries of health and other agencies of the various countries, the delays in the reports are gradually being lessened.

DEATHS DURING WEEK ENDED FEBRUARY 23, 1924.

Summary of information received by telegraph from industrial insurance companies for week ended Feb. 23, 1924, and corresponding week of 1923. (From the Weekly Health Index, Feb. 26, 1924, issued by the Bureau of the Census, Department of Commerce.)

	Week ended Feb. 23, 1924.	Corresponding week, 1923.
Policies in force.....	56, 401, 612	52, 219, 893
Number of death claims.....	9, 951	12, 076
Death claims per 1,000 policies in force, annual rate..	9. 2	12. 1

Deaths from all causes in certain large cities of the United States during the week ended Feb. 23, 1924, infant mortality, annual death rate, and comparison with corresponding week of 1923. (From the Weekly Health Index, Feb. 26, 1924, issued by the Bureau of the Census, Department of Commerce.)

City.	Week ended Feb. 23, 1924.		Annual death rate per 1,000, corresponding week, 1923.	Deaths under 1 year.		Infant mortality rate, week ended Feb. 23, 1924. ²
	Total deaths.	Death rate. ¹		Week ended Feb. 23, 1924.	Corresponding week, 1923.	
Total.....	8,086	14.1	18.2	1,046	1,231	.....
Akron.....	27	6.8	8.8	5	7	53
Albany ³	33	14.5	20.9	2	5	41
Atlanta.....	106	24.3	19.6	17	14	.....
Baltimore ³	232	15.4	22.9	34	44	99
Birmingham.....	75	19.5	12.8	11	6	.....
Boston.....	245	16.4	18.3	40	37	111
Bridgeport.....	27	9.8	12.7	2	5	31
Buffalo.....	146	14.0	18.8	34	36	144
Cambridge.....	23	10.7	14.5	2	2	35
Camden ³	39	16.1	26.9	3	9	47
Canton.....	23	11.7	12.6	5	2	105
Chicago ³	741	13.1	17.8	113	148	104
Cincinnati.....	133	17.0	19.5	15	15	94
Cleveland.....	209	11.9	16.8	31	35	81
Columbus.....	72	14.1	22.2	9	9	86
Dallas.....	53	14.7	13.7	4	2	.....
Dayton.....	36	11.1	17.3	6	6	101
Denver.....	86	16.2	21.7	8	13	.....
Des Moines.....	35	12.6	18.1	1	2	.....
Detroit.....	269	14.1	18.2	55	56	102
Duluth.....	25	12.0	11.8	3	4	64
Erie.....	25	11.3	15.7	2	6	41
Fall River ³	27	11.6	19.8	7	11	99
Flint.....	17	7.1	16.8	7	5	121
Fort Worth.....	40	14.1	11.2	4	4	.....
Grand Rapids.....	32	11.2	20.0	2	8	31
Houston.....	40	13.0	13.4	4	4	.....
Indianapolis.....	94	14.0	21.3	5	11	38
Jacksonville, Fla.....	32	16.3	19.3	2	1	.....
Jersey City.....	94	15.7	19.9	17	16	123
Kansas City, Kans.....	32	14.2	24.8	7	10	140
Los Angeles.....	238	17.7	18.8	27	22	84
Louisville.....	95	19.2	15.0	11	12	104
Lowell.....	31	14.0	19.9	4	14	71
Lynn.....	14	7.0	22.3	0	3	0
Memphis.....	82	24.8	32.8	5	5	.....
Milwaukee.....	94	10.0	18.0	19	27	87
Minneapolis.....	111	13.9	14.7	17	10	91
Nashville ³	52	22.0	17.9	12	6	.....
New Bedford.....	30	11.8	20.0	3	14	47
New Haven.....	39	11.6	19.6	4	5	52
New Orleans.....	174	22.2	23.2	15	17	.....
New York.....	1,518	13.2	18.8	167	224	67
Bronx Borough.....	157	9.4	16.6	12	17	42
Brooklyn Borough.....	486	11.5	16.9	56	68	60
Manhattan Borough.....	714	16.5	22.0	83	118	81
Queens Borough.....	125	11.7	14.1	15	17	82
Richmond Borough.....	36	14.4	29.8	1	4	18
Newark, N. J.....	118	13.8	19.8	10	26	47
Norfolk.....	39	12.4	12.8	5	6	91
Oakland.....	47	9.9	14.3	8	7	100
Oklahoma City.....	26	13.0	.....	3	.....	.....
Omaha.....	54	13.5	17.6	7	7	75
Paterson.....	46	17.1	18.3	10	4	163
Philadelphia.....	519	13.9	17.7	61	62	77
Pittsburgh.....	230	19.2	25.0	33	48	112
Portland, Oreg.....	71	13.3	14.5	9	7	93
Providence.....	91	19.5	15.7	15	6	122
Richmond.....	62	17.6	15.3	10	7	118
Rochester.....	70	11.2	17.0	7	14	55
St. Louis.....	225	14.4	13.7	18	16	.....
St. Paul.....	58	12.4	18.5	3	13	26
Salt Lake City ³	41	16.6	13.6	5	4	83

¹ Annual rate per 1,000 population.

² Deaths under 1 year per 1,000 births—an annual rate based on deaths under 1 year for the week and estimated births for 1923. Cities left blank are not in the registration area for births.

³ Deaths for week ended Friday, Feb. 22, 1924.

Deaths from all causes in certain large cities of the United States during the week ended Feb. 23, 1924, infant mortality, annual death rate, and comparison with corresponding week of 1923. (From the Weekly Health Index, Feb. 26, 1924, issued by the Bureau of the Census, Department of Commerce)—Continued.

City.	Week ended Feb. 23, 1924.		Annual death rate per 1,000, corresponding week, 1923.	Deaths under 1 year.		Infant mortality rate, week ended Feb. 23, 1924.
	Total deaths.	Death rate.		Week ended Feb. 23, 1924.	Corresponding week, 1923.	
San Antonio.....	80	21.8	16.4	11	4	.....
San Francisco.....	157	14.9	17.2	21	7	126
Schenectady.....	36	18.7	11.6	5	1	142
Seattle.....	60	9.9	10.9	6	8	58
Somerville.....	15	7.8	16.9	1	6	27
Spokane.....	14	7.0	13.0	0	2	0
Springfield, Mass.....	33	11.6	18.4	3	7	51
Tacoma.....	15	7.6	14.4	3	2	69
Toledo.....	62	11.7	20.1	10	9	95
Trenton.....	29	11.7	15.6	2	4	33
Utica.....	25	12.4	12.6	2	7	43
Washington, D. C.....	145	17.3	21.8	16	18	92
Waterbury.....	21	10.9	12.7	5	2	112
Wilmington, Del.....	29	12.6	22.6	2	13	43
Worcester.....	56	14.9	18.7	3	7	36
Yonkers.....	23	10.9	16.0	3	3	66
Youngstown.....	43	16.9	20.1	8	12	116

PREVALENCE OF DISEASE.

No health department, State or local, can effectively prevent or control disease without knowledge of when, where, and under what conditions cases are occurring.

UNITED STATES.

CURRENT STATE SUMMARIES.

These reports are preliminary, and the figures are subject to change when later returns are received by the State health officers.

Reports for Week Ended March 1, 1924.

ALABAMA.		Cases.	CALIFORNIA.		Cases.
Chicken pox.....		83	Cerebrospinal meningitis:		
Diphtheria.....		14	Dinuba.....		1
Influenza.....		179	Long Beach.....		1
Malaria.....		21	Pasadena.....		1
Measles.....		937	San Francisco.....		1
Mumps.....		57	Stockton.....		1
Pellagra.....		5	Diphtheria.....		271
Pneumonia.....		181	Influenza.....		48
Scarlet fever.....		3	Lethargic encephalitis:		
Smallpox.....		49	Los Angeles.....		1
Tuberculosis.....		29	San Francisco.....		2
Typhoid fever.....		7	Measles.....		1,502
Whooping cough.....		66	Scarlet fever.....		275
			Smallpox:		
			Compton.....		8
ARIZONA.			Hermosa Beach.....		9
Chicken pox.....		5	Long Beach.....		47
Diphtheria.....		2	Los Angeles.....		115
Measles.....		126	Los Angeles County.....		68
Mumps.....		2	Pasadena.....		9
Pneumonia.....		5	Pomona.....		17
Scarlet fever.....		1	San Bernardino.....		9
Trachoma.....		1	Scattering.....		50
Whooping cough.....		3	Typhoid fever:		
			Santa Ana.....		17
			Scattering.....		11
ARKANSAS.			COLORADO.		
Chicken pox.....		16	(Exclusive of Denver.)		
Diphtheria.....		6	Botulism.....		7
Influenza.....		128	Chicken pox.....		8
Malaria.....		36	Diphtheria.....		16
Measles.....		292	Influenza.....		4
Mumps.....		29	Measles.....		261
Pellagra.....		3	Mumps.....		41
Scarlet fever.....		2	Pneumonia.....		9
Smallpox.....		4	Scarlet fever.....		24
Trachoma.....		1	Smallpox.....		3
Tuberculosis.....		6			
Whooping cough.....		52			

COLORADO—continued.		GEORGIA—continued.	
	Cases.		Cases.
Tuberculosis.....	52	Septic sore throat.....	1
Typhoid fever.....	2	Smallpox.....	121
Whooping cough.....	2	Trachoma.....	2
CONNECTICUT.		Tuberculosis (pulmonary).....	16
Chicken pox.....	88	Typhoid fever.....	3
Diphtheria.....	44	Whooping cough.....	18
German measles.....	12	ILLINOIS.	
Influenza.....	17	Cerebrospinal meningitis—Knox County.....	1
Lethargic encephalitis.....	1	Diphtheria:	-
Malaria.....	1	Cook County.....	102
Measles.....	284	Lake County.....	12
Mumps.....	180	Scattering.....	64
Pneumonia (lobar).....	42	Influenza.....	46
Poliomyelitis.....	1	Measles.....	566
Scarlet fever.....	205	Pneumonia.....	400
Septic sore throat.....	1	Scarlet fever:	
Tuberculosis (all forms).....	40	Cook County.....	141
Typhoid fever.....	1	De Kalb County.....	25
Whooping cough.....	42	Kane County.....	8
DELAWARE.		La Salle County.....	13
Chicken pox.....	5	Livingstone County.....	11
Diphtheria.....	9	Macon County.....	14
Measles.....	2	Saline County.....	15
Mumps.....	3	Sangamon County.....	7
Scarlet fever:		Stephenson County.....	8
Wilmington.....	9	Scattering.....	99
Scattering.....	6	Smallpox.....	9
Smallpox—Harrington.....	1	Tuberculosis.....	319
Tuberculosis.....	4	Typhoid fever.....	21
Whooping cough.....	11	Whooping cough.....	144
DISTRICT OF COLUMBIA.		INDIANA.	
Chicken pox.....	52	Cerebrospinal meningitis—Allen County.....	1
Diphtheria.....	9	Chicken pox.....	101
Influenza.....	3	Diphtheria.....	54
Lethargic encephalitis.....	1	Influenza.....	9
Measles.....	14	Pneumonia.....	20
Scarlet fever.....	35	Scarlet fever:	
Smallpox.....	4	Allen County.....	9
Tuberculosis.....	33	Jennings County.....	9
Typhoid fever.....	1	Lake County.....	24
Whooping cough.....	8	Montgomery County.....	10
FLORIDA.		Vigo County.....	11
Cerebrospinal meningitis.....	1	Scattering.....	54
Diphtheria.....	14	Smallpox:	
Influenza.....	5	Jay County.....	11
Malaria.....	7	Marion County.....	38
Pneumonia.....	12	Rush County.....	14
Scarlet fever.....	5	Scattering.....	36
Smallpox.....	3	Tuberculosis.....	30
Typhoid fever.....	11	Typhoid fever.....	11
GEORGIA.		Whooping cough.....	101
Chicken pox.....	24	IOWA.	
Conjunctivitis (infectious).....	5	Diphtheria.....	29
Diphtheria.....	8	Scarlet fever.....	75
German measles.....	3	Smallpox.....	17
Hookworm disease.....	6	KANSAS.	
Influenza.....	41	Cerebrospinal meningitis.....	1
Malaria.....	7	Chickenpox.....	141
Measles.....	156	Diphtheria.....	33
Mumps.....	73	German measles.....	5
Pellagra.....	2	Influenza.....	8
Pneumonia.....	65	Lethargic encephalitis.....	1
Scarlet fever.....	8		

KANSAS—continued.

	Cases.
Measles.....	1,527
Mumps.....	215
Pneumonia.....	52
Poliomyelitis.....	2
Scarlet fever.....	64
Septic sore throat.....	1
Smallpox.....	36
Tuberculosis.....	50
Typhoid fever.....	7
Whooping cough.....	110

LOUISIANA.

Diphtheria.....	16
Hookworm disease.....	24
Influenza.....	33
Malaria.....	5
Measles.....	310
Pneumonia.....	51
Scarlet fever.....	5
Smallpox.....	15
Tuberculosis.....	17
Typhoid fever.....	13
Whooping cough.....	18

MAINE.

Chicken pox.....	76
Diphtheria.....	11
German measles.....	36
Influenza.....	8
Measles.....	135
Mumps.....	51
Pneumonia.....	37
Scarlet fever.....	42
Tuberculosis.....	4
Typhoid fever.....	3
Vincent's angina.....	1
Whooping cough.....	66

MARYLAND.¹

Cerebrospinal meningitis.....	1
Chicken pox.....	223
Conjunctivitis.....	1
Diphtheria.....	31
Dysentery.....	2
German measles.....	39
Influenza.....	73
Lethargic encephalitis.....	2
Measles.....	238
Mumps.....	41
Ophthalmia neonatorum.....	1
Pneumonia (all forms).....	179
Scarlet fever.....	151
Septic sore throat.....	2
Smallpox.....	1
Trachoma.....	1
Tuberculosis.....	53
Typhoid fever.....	7
Whooping cough.....	33

MASSACHUSETTS.

Cerebrospinal meningitis.....	5
Chicken pox.....	309
Conjunctivitis (suppurative).....	39
Diphtheria.....	205
German measles.....	27
Influenza.....	8

MASSACHUSETTS—continued.

	Cases.
Lethargic encephalitis.....	1
Measles.....	926
Mumps.....	467
Ophthalmia neonatorum.....	18
Pneumonia (lobar).....	168
Poliomyelitis.....	2
Scarlet fever.....	527
Septic sore throat.....	7
Tetanus.....	2
Trachoma.....	4
Trichinosis.....	2
Tuberculosis (all forms).....	113
Typhoid fever.....	7
Whooping cough.....	109

MICHIGAN.

Diphtheria.....	178
Measles.....	658
Pneumonia.....	191
Scarlet fever.....	383
Smallpox.....	182
Tuberculosis.....	105
Typhoid fever.....	11
Whooping cough.....	51

MINNESOTA.

Cerebrospinal meningitis.....	1
Chicken pox.....	51
Diphtheria.....	72
Influenza.....	1
Measles.....	276
Pneumonia.....	8
Scarlet fever.....	303
Smallpox.....	58
Tuberculosis.....	116
Typhoid fever.....	1
Whooping cough.....	6

MISSISSIPPI.

Cerebrospinal meningitis.....	1
Diphtheria.....	20
Scarlet fever.....	4
Smallpox.....	4
Typhoid fever.....	10

MISSOURI.

(Exclusive of Cape Girardeau and Kansas City.)

Chicken pox.....	43
Diphtheria.....	54
Influenza.....	21
Measles.....	400
Mumps.....	101
Ophthalmia neonatorum.....	1
Pneumonia.....	15
Scarlet fever.....	144
Septic sore throat.....	3
Smallpox.....	35
Trachoma.....	3
Tuberculosis.....	32
Typhoid fever.....	1
Whooping cough.....	64

MONTANA.

Diphtheria.....	11
Scarlet fever.....	21
Smallpox.....	25
Typhoid fever.....	2

¹ Week ended Friday.

NEBRASKA.	
	Cases.
Cerebrospinal meningitis.....	1
Chicken pox.....	33
Diphtheria.....	11
Influenza.....	6
Measles.....	509
Mumps.....	11
Pneumonia.....	9
Scarlet fever.....	36
Smallpox.....	1
Typhoid fever.....	1
Whooping cough.....	34

NEW JERSEY.	
Cerebrospinal meningitis.....	4
Chicken pox.....	358
Diphtheria.....	106
Influenza.....	36
Measles.....	532
Pneumonia.....	204
Scarlet fever.....	199
Typhoid fever.....	8
Whooping cough.....	93

NEW MEXICO.	
Chicken pox.....	12
Conjunctivitis.....	1
Diphtheria.....	13
Hookworm disease.....	1
Influenza.....	1
Measles.....	184
Mumps.....	6
Pneumonia.....	4
Scarlet fever.....	8
Typhoid fever.....	2
Whooping cough.....	6

NEW YORK.	
(Exclusive of New York City.)	
Cerebrospinal meningitis.....	3
Diphtheria.....	150
Influenza.....	94
Lethargic encephalitis.....	1
Measles.....	1,503
Pneumonia.....	343
Poliomyelitis.....	3
Scarlet fever.....	456
Smallpox.....	5
Typhoid fever.....	10
Whooping cough.....	420

NORTH CAROLINA.	
Cerebrospinal meningitis.....	1
Chicken pox.....	222
Diphtheria.....	40
German measles.....	2
Measles.....	2,222
Scarlet fever.....	42
Septic sore throat.....	1
Smallpox.....	129
Typhoid fever.....	1
Whooping cough.....	408

OREGON.	
Chicken pox.....	16
Diphtheria:	
Portland.....	12
Scattering.....	10

OREGON—continued.	
	Cases.
Influenza.....	4
Lethargic encephalitis.....	1
Measles.....	339
Mumps.....	10
Pneumonia.....	4
Scarlet fever:	
Portland.....	8
Scattering.....	32
Smallpox:	
Portland.....	15
Scattering.....	11
Tuberculosis.....	7
Typhoid fever.....	3
Whooping cough.....	2

SOUTH DAKOTA.	
Chicken pox.....	23
Diphtheria.....	4
Influenza.....	1
Measles.....	239
Pneumonia.....	13
Scarlet fever.....	30
Trachoma.....	1
Tuberculosis.....	3
Whooping cough.....	7

TEXAS.	
Chicken pox.....	53
Diphtheria.....	53
Influenza.....	62
Measles.....	1,138
Mumps.....	140
Pellagra.....	5
Pneumonia.....	60
Scarlet fever.....	13
Smallpox.....	34
Tuberculosis.....	76
Typhoid fever.....	2
Whooping cough.....	55

VERMONT.	
Chicken pox.....	13
Diphtheria.....	4
Measles.....	145
Mumps.....	10
Pneumonia.....	3
Scarlet fever.....	16
Smallpox.....	2
Whooping cough.....	35

WASHINGTON.	
Cerebrospinal meningitis—Spokane County..	1
Chicken pox.....	70
Diphtheria.....	19
Measles.....	1,120
Mumps.....	26
Pneumonia.....	1
Scarlet fever:	
Seattle.....	13
Skagit.....	10
Spokane.....	23
Scattering.....	24
Smallpox:	
Spokane.....	54
Scattering.....	18
Tuberculosis.....	63
Typhoid fever.....	7
Whooping cough.....	17

WEST VIRGINIA.		Cases.
Diphtheria.....		9
Scarlet fever.....		17
Smallpox.....		4
Typhoid fever.....		2
WISCONSIN.		
Milwaukee:		
Cerebrospinal meningitis.....		1
Chicken pox.....		47
Diphtheria.....		22
Measles.....		14
Pneumonia.....		14
Scarlet fever.....		23
Smallpox.....		1
Tuberculosis.....		19
Whooping cough.....		54
Scattering:		
Chicken pox.....		133
Diphtheria.....		52
German measles.....		4

WISCONSIN—continued.		Cases.
Scattering—Continued.		
Influenza.....		40
Measles.....		428
Pneumonia.....		23
Poliomyelitis.....		1
Scarlet fever.....		262
Smallpox.....		24
Tuberculosis.....		18
Typhoid fever.....		1
Whooping cough.....		97
WYOMING.		
Chicken pox.....		17
Diphtheria.....		3
Measles.....		91
Mumps.....		1
Pneumonia.....		5
Scarlet fever.....		2
Typhoid fever.....		4
Whooping cough.....		20

Report for Week Ended February 23, 1924.

NORTH DAKOTA.		
Chicken pox.....		12
Diphtheria.....		7
Measles.....		303
Mumps.....		1
Pneumonia.....		18

NORTH DAKOTA—continued.		
Scarlet fever.....		41
Smallpox.....		15
Tuberculosis.....		4
Whooping cough.....		10

SUMMARY OF CASES REPORTED MONTHLY BY STATES.

The following summary of monthly State reports is published weekly and covers only those States from which reports are received during the current week:

State.	Cerebrospinal meningitis.	Diphtheria.	Influenza.	Malaria.	Measles.	Pellagra.	Poliomyelitis.	Scarlet fever.	Smallpox.	Typhoid fever.
<i>January, 1924.</i>										
Colorado.....		127	2		1,696			254	13	19
Iowa.....	2	153	0		834	0	1	268	52	38
Kansas.....	3	213	36		2,182		4	420	119	6
Mississippi.....	1	90	2,819	2,895	4,144	142	1	29	20	101
Montana.....		29	11		1,986			155	212	8
Nevada.....		0			14			6	1	
Oregon.....		138	9		2,172		1	101	95	7
Pennsylvania.....	10	1,712		0	2,366	0	3	2,210	18	105
Virginia.....	10	298	3,369	105	2,305	6	3	290	25	50
Washington.....		143			11,407			323	341	17
Wyoming.....		11			555			53		

DEATHS FROM TYPHOID FEVER IN NEW HAVEN, CONN.—CORRECTION.

In the Public Health Reports, volume 38, No. 32, August 10, 1923, at page 1841, the number of deaths from typhoid fever in New Haven, Conn., during the year 1922 was given as 19. The number should have been 9. The deaths per thousand inhabitants should have been 0.05, and the fatalities per 100 cases, 9.7.

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924.

Influenza and pneumonia.—During the three weeks ended February 16, 1924, 97 cities reported 274 deaths from influenza and 3,309 deaths from pneumonia (all forms). During the corresponding three weeks of the year 1923, the same cities reported 1,048 deaths from influenza and 4,597 deaths from pneumonia.

Measles.—In general, the reports indicate that measles was more prevalent in the West during the first seven weeks of the year than it was last year, but along the northern Atlantic coast the number of cases reported was smaller than it was last year.

Scarlet fever.—Some improvement is noted in the reports of scarlet fever for the week ended February 16, 1924, as compared with the preceding week. The number of cases was greater than the number reported for the corresponding period of last year, however, and considerably greater than the calculated expectancy, which is based on reports for the last nine years, excluding epidemics.

Smallpox.—State health officers reported about twice as many cases of smallpox for the week ended February 16, 1924, as were reported for the corresponding week of last year. The cities included in the table report 473 cases for the week this year, while for the corresponding week of 1923 they reported only 140 cases.

City reports for week ended February 16, 1924.

The "estimated expectancy" given for diphtheria, poliomyelitis, scarlet fever, smallpox, and typhoid fever, is the result of an attempt to ascertain from previous occurrence how many cases of the disease under consideration may be expected to occur during a certain week in the absence of epidemics. It is based on reports to the Public Health Service during the past nine years. It is in most instances the median number of cases reported in the corresponding week of the preceding years. When the reports include several epidemics, or when for other reasons the median is unsatisfactory, the epidemic periods are excluded and the estimated expectancy is the mean of the number of cases reported for the week during nonepidemic years.

If reports have not been received for the full nine years, data are used for as many years as possible, but no year earlier than 1915 is included. In obtaining the estimated expectancy, the figures are smoothed when necessary to avoid abrupt deviations from the usual trend. For some of the diseases given in the table the available data were not sufficient to make it practicable to compute the estimated expectancy.

Division, State, and city.	Chicken pox, cases re-ported.	Diphtheria.		Influenza.		Measles, cases re-ported.	Mumps, cases re-ported.	Pneu-monia, deaths re-ported.	Scarlet fever.	
		Cases, esti-mated expect-ancy.	Cases re-ported.	Cases re-ported.	Deaths re-ported.				Cases, esti-mated expect-ancy.	Cases re-ported.
NEW ENGLAND.										
Maine:										
Lewiston.....	0	1	0	0	0	0	0	1	2	2
Portland.....	13	3	2	0	0	2	8	3	3	3
New Hampshire:										
Goncord.....	0	0	0	0	0	3	0	1	1	0
Nashua.....	0	0	0	0	0	1	1	0	2	4
Vermont:										
Barre.....	1	0	0	0	0	0	0	0	1	0
Burlington.....	3	1	2	0	0	1	0	1	1	3
Massachusetts:										
Boston.....	60	64	75	5	2	180	28	35	52	123
Fall River.....	5	6	2	0	0	2	3	7	3	4
Springfield.....	2	4	3	2	2	58	9	1	7	17
Worcester.....	.....	5	0	2	0	16	.....	5	9	0
Rhode Island:										
Pawtucket.....	0	1	3	0	0	0	0	4	1	3
Providence.....	0	16	12	1	0	0	0	12	9	68

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924—Continued.

Division, State, and city.	Chicken pox, cases reported.	Diphtheria.		Influenza.		Measles, cases reported.	Mumps, cases reported.	Pneumonia, deaths reported.	Scarlet fever.	
		Cases, estimated expectancy.	Cases reported.	Cases reported.	Deaths reported.				Cases, estimated expectancy.	Cases reported.
NEW ENGLAND—continued.										
Connecticut:										
Bridgeport.....	0	10	8	0	0	0	0	1	4	11
Hartford.....		8	8	0	0	66		3	5	39
New Haven.....	12	5	2		1	7	27	7	5	8
MIDDLE ATLANTIC.										
New York:										
Buffalo.....		27	20	2	0	21		15	16	34
New York.....	250	277	212	91	17	924	214	226	169	242
Rochester.....	10	10	1	0	0	0	6	6	12	9
Syracuse.....	18	11	13	0	0	75	2	8	18	76
New Jersey:										
Camden.....		4	2	0	0	2		4	3	3
Newark.....	63	26	19	9	1	63	80	9	22	24
Trenton.....	5	6	12	1	0	28	0	8	3	2
Pennsylvania:										
Philadelphia.....	166	74	121	7	8	54	0	74	56	88
Pittsburgh.....	101	23	34		4	11	87	55	17	44
Reading.....		4	0	0	0	5		2	1	3
Scranton.....	1	5	2	0	0	4	0	6	6	4
EAST NORTH CENTRAL.										
Ohio:										
Cincinnati.....	17	14	7	1	5	80	9	16	9	17
Cleveland.....	53	34	33	8	1	17	196	29	38	20
Columbus.....	10	4	6		2	6	0	7	8	9
Toledo.....	0	8	3	0	0	30	0	10	15	37
Indiana:										
Fort Wayne.....		3	11	0	0	3		4	2	7
Indianapolis.....	49	12	2		2	20	203	17	10	2
South Bend.....		1	9	0	0	1		1	2	10
Terre Haute.....	3	2	0	0	0	0	0	0	2	1
Illinois:										
Chicago.....	156	143	118	21	2	96	90	101	153	99
Cicero.....	8	1	0	0	0	0	16	0	2	0
Peoria.....	7	1	1	0	0	0	1	5	6	1
Springfield.....	4	3	3	0	0	1	0	6	1	1
Michigan:										
Detroit.....	76	73	34	4	1	93	56	53	76	112
Flint.....	15	8	6	0	0	42	32	4	9	6
Grand Rapids.....		3	2	0	0	3		4	6	12
Saginaw.....	7	2	3	0	0	3	6	1	2	38
Wisconsin:										
Madison.....	6	0	2	0	0	1	0	1	3	7
Milwaukee.....	62	18	10	0	0	7		10	35	31
Racine.....	0	1	3	0	0	2		2	4	49
Superior.....	0	1	1	0	0	0		0	2	0
WEST NORTH CENTRAL.										
Minnesota:										
Duluth.....	12	2	1	0	0	5	0	0	4	12
Minneapolis.....	84	18	32	0	0	16	15	3	28	65
St. Paul.....		15	13	0	0	42		8	20	59
Iowa:										
Sioux City.....	0	3	4	0		1	0		2	2
Waterloo.....	1	1	0	0		1	8		2	0
Missouri:										
Kansas City.....	9	10	14	1	5	116	8	17	13	10
St. Joseph.....	1	3	0	0	0	29	0	6	3	2
St. Louis.....	25	61	41	0	0	15	23		27	96
North Dakota:										
Fargo.....	0	1	0	0	0	0	0	0	2	0
Grand Forks.....	1	0	0		0	3		0	1	1
South Dakota:										
Sioux Falls.....	2	1	1	0	0	12		2	3	0
Nebraska:										
Lincoln.....		1	5	0	0	103		0	4	3
Omaha.....	22	5	10	0	0	33		8	12	6
Kansas:										
Wichita.....	10	2	7	0	0	364	174	6	3	3

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924—Continued.

Division, State, and city.	Chicken pox, cases reported.	Diphtheria.		Influenza		Measles, cases reported.	Mumps, cases reported.	Pneumonia, deaths reported.	Scarlet fever.	
		Cases, estimated expectancy.	Cases reported.	Cases reported.	Deaths reported.				Cases, estimated expectancy.	Cases reported.
SOUTH ATLANTIC.										
Delaware:										
Wilmington.....		1	5	0	0	0		8	2	8
Maryland:										
Baltimore.....	215	29	32	42	6	98	18	37	32	68
Cumberland.....		1	0	0	0	0		0	1	0
Frederick.....		1	0	0	0	52		0	0	5
District of Columbia:										
Washington.....	48	15	6	3	3	13	0	27	18	49
Virginia:										
Lynchburg.....	4	1	1	0	0	0	1	0	0	0
Norfolk.....	12	1	4	0	0	38	0	7	1	1
Richmond.....	8	3	0	2	2	39	0	10	3	3
Roanoke.....	2	2	1	2	0	0	0	0	0	2
West Virginia:										
Charleston.....	0	2	1	3	0	0	2	1	2	1
Huntington.....	3	1	1	0	0	0	0	3	1	0
Wheeling.....	12	1	1	0	0	3	3	6	1	5
North Carolina:										
Raleigh.....	14	1	0	0	0	22	0	1	0	0
Wilmington.....	4	0	0	0	0	31	7	3	1	0
Winston-Salem..	9	1	1	0	0	116	5	8	1	13
South Carolina:										
Charleston.....	0	1	0	0	0	4	0	3	1	0
Columbia.....	8	1	1	0	0	50	17	3	0	0
Greenville.....	1	0	0	0	0	63	5	1	0	0
Georgia:										
Atlanta.....	5	3	1	6	4	8	6	18	4	1
Brunswick.....	0	0	0	0	0	43	0	2	0	0
Savannah.....	3	1	0	19	1	44	0	7	1	1
Florida:										
St. Petersburg..	0		0		0	26	0	1		0
Tampa.....	1	3	3	1	1	5	0	3	0	0
EAST SOUTH CENTRAL.										
Kentucky:										
Covington.....	1	1	2	0	0	11	0	4	1	1
Lexington.....	0	0	0	0	0	5	2	4	1	0
Louisville.....	7	9	3	5	0	1	5	10	4	1
Tennessee:										
Memphis.....	29	4	6	0	0	22	18	20	3	7
Nashville.....	9	1	0	3	3	1	0	10	3	2
Alabama:										
Birmingham....	5	2	5	14	0	71	14	16	1	2
Montgomery.....		1	0	5	1	7		3	1	0
WEST SOUTH CENTRAL.										
Arkansas:										
Fort Smith.....	3	0	0	0		39	0		0	2
Little Rock.....	1	1	3	0		27	4		1	0
Louisiana:										
New Orleans.....	3	12	13	14	9	115	0	19	5	4
Shreveport.....	0		3	0	0	9	1	4		0
Oklahoma:										
Tulsa.....	18	2	0	0		7	2		1	2
Texas:										
Dallas.....	3	5	13	3	2	297	49	11	1	1
Galveston.....	0	2	0	0	0	13	0	1	1	0
Houston.....		2	2	0	0	131		8	1	2
San Antonio.....	1	2	3	0	0	79	1	16	1	3
MOUNTAIN.										
Montana:										
Billings.....	0	1	0	0	0	7	0	0	2	0
Great Falls.....	1	1	3	0	0	119	0	1	1	2
Helena.....	4		0	0	0	16	0	0		9
Missoula.....	2	0	1	0	0	80	0	2	1	0
Idaho:										
Boise.....	0	0	0	0	0	20	0	0	1	1

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924--Continued.

Division, State, and city.	Chicken pox, cases reported.	Diphtheria.		Influenza.		Measles, cases reported.	Mumps, cases reported.	Pneumonia, deaths reported.	Scarlet fever.	
		Cases, estimated expectancy.	Cases reported.	Cases reported.	Deaths reported.				Cases, estimated expectancy.	Cases reported.
MOUNTAIN--contd.										
Colorado:										
Denver.....	35	10	16	0	0	97	9	15	10	17
Pueblo.....	5	4	0	0	0	257	2	3	2	9
New Mexico:										
Albuquerque.....		1	3	0	0	20		3	5	2
Utah:										
Salt Lake City..	24	3	3	0	0	620	22	8	3	3
Nevada:										
Reno.....	3	0	0	1	0	0	0	1	1	0
PACIFIC.										
Washington:										
Seattle.....	7	6	13	0		725	7		10	14
Spokane.....	7	4	1	0		56	0		3	10
Tacoma.....	4	1	1	0		148	3		4	1
California:										
Sacramento.....	6	1	8		2	16	0	3	2	2
San Francisco...	29	23	63	7	1	92	16	6	16	35

Division, State, and city.	Population July 1, 1923, estimated.	Smallpox.			Tuberculosis, deaths reported.	Typhoid fever.			Whooping cough, cases reported.	Deaths, all causes.
		Cases, estimated expectancy.	Cases reported.	Deaths reported.		Cases, estimated expectancy.	Cases reported.	Deaths reported.		
NEW ENGLAND.										
Maine:										
Lewiston.....	33,790	0	0	0	0	0	0	0	12	7
Portland.....	73,129	0	0	0	0	1	0	0	9	20
New Hampshire:										
Concord.....	22,408	0	0	0	0	0	0	0	3	6
Nashua.....	29,234	0	0	0	0	0	0	0		7
Vermont:										
Barre.....	110,008	0	0	0	0	0	0	0	0	1
Burlington.....	23,613	0	0	0	0	0	0	0	1	5
Massachusetts:										
Boston.....	770,400	0	0	0	17	2	3	0	11	252
Fall River.....	120,912	0	0	0	3	1	0	0	13	37
Springfield.....	144,227	0	0	0	2	0	0	0	0	39
Worcester.....	191,927	0	0	0	2	0	0	0		31
Rhode Island:										
Pawtucket.....	68,799	0	0	0	0	0	0	0	0	
Providence.....	242,378	0	0	0	6	0	0	0	2	79
Connecticut:										
Bridgeport.....	1143,555	0	0	0	3	0	0	0	0	39
Hartford.....	1138,036	0	0	0	0	1	0	0		38
New Haven.....	172,667	0	0	0	3	0	0	0	8	44
MIDDLE ATLANTIC.										
New York:										
Buffalo.....	536,718	0	0	0	9	1	1	0		127
New York.....	5,927,625	0	0	0	89	7	7	1	124	1,492
Rochester.....	317,867	0	0	0	4	0	1	0	12	71
Syracuse.....	184,511	0	0	0	1	0	2	1	5	46
New Jersey:										
Camden.....	124,157	0	0	0	1	0	2	0		41
Newark.....	438,669	0	0	0	8	1	1	0		125
Trenton.....	127,390	0	0	0	1	0	0	0	0	36
Pennsylvania:										
Philadelphia....	1,922,788	0	0	0	44	5	7	0	35	576
Pittsburgh.....	613,442	0	0	0	14	2	2	0	30	193
Reading.....	110,917	0	0	0	1	0	0	0		42
Scranton.....	140,636	0	0	0	2	0	0	0	0	47

¹ Population Jan. 1, 1920.

² Pulmonary only.

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924—Continued.

Division, State, and city.	Population July 1, 1923, estimated.	Smallpox.			Tuberculosis, deaths reported.	Typhoid fever.			Whooping cough, cases reported.	Deaths, all causes.
		Cases, estimated expectancy.	Cases reported.	Deaths reported.		Cases, estimated expectancy.	Cases reported.	Deaths reported.		
EAST NORTH CENTRAL.										
Ohio:										
Cincinnati.....	406,312	2	2	0	12	0	0	0	17	138
Cleveland.....	888,519	2	5	0	19	2	4	0	42	219
Columbus.....	261,082	1	7	0	4	0	2	0	4	82
Toledo.....	268,338	3	0	0	2	1	0	0	0	65
Indiana:										
Fort Wayne.....	93,573	1	0	0	0	0	0	0	.....	25
Indianapolis.....	342,718	6	32	0	10	1	0	0	19	96
South Bend.....	76,709	1	0	0	0	0	0	0	.....	12
Terre Haute.....	68,939	0	0	.....	.....	.....	.....	.....	14	.....
Illinois:										
Chicago.....	2,586,121	3	12	0	54	4	8	0	43	684
Cicero.....	55,968	0	0	0	0	0	0	0	4	5
Peoria.....	79,675	2	0	0	2	0	0	0	1	21
Springfield.....	61,833	1	0	0	0	0	0	0	5	18
Michigan:										
Detroit.....	995,668	6	82	0	24	2	0	1	8	257
Flint.....	117,968	0	0	0	3	0	1	0	4	34
Grand Rapids.....	145,947	2	0	0	1	0	0	0	.....	33
Saginaw.....	69,754	0	0	0	0	1	1	0	4	21
Wisconsin:										
Madison.....	42,519	1	0	0	0	0	0	0	5	4
Milwaukee.....	484,595	5	1	0	9	0	0	0	36	.....
Racine.....	64,393	0	0	0	0	0	3	0	0	14
Superior.....	139,671	3	2	0	0	0	0	0	0	8
WEST NORTH CENTRAL.										
Minnesota:										
Duluth.....	106,289	2	13	1	3	0	0	0	1	28
Minneapolis.....	409,125	18	1	0	6	1	0	0	0	83
St. Paul.....	241,891	12	28	0	4	1	1	0	.....	46
Iowa:										
Sioux City.....	79,662	2	0	.....	.....	0	0	.....	0	.....
Waterloo.....	39,667	1	0	.....	.....	0	0	.....	8	.....
Missouri:										
Kansas City.....	351,819	3	0	0	7	0	0	0	5	108
St. Joseph.....	78,232	3	0	0	4	0	1	0	0	26
St. Louis.....	803,853	4	1	0	15	1	0	0	45	233
North Dakota:										
Fargo.....	24,841	1	0	0	2	0	0	0	0	5
Grand Forks.....	14,547	1	0	.....	.....	0	0	.....	.....	.....
South Dakota:										
Sioux Falls.....	29,206	2	0	0	1	0	0	0	.....	5
Nebraska:										
Lincoln.....	58,761	1	0	0	0	0	0	0	.....	15
Omaha.....	204,382	5	0	0	1	1	0	0	.....	55
Kansas:										
Wichita.....	79,261	4	6	0	1	0	0	0	2	30
SOUTH ATLANTIC.										
Delaware:										
Wilmington.....	117,728	0	0	0	0	0	0	0	.....	36
Maryland:										
Baltimore.....	773,580	0	1	0	19	2	1	0	11	249
Cumberland.....	32,361	0	0	0	1	0	0	0	.....	7
Frederick.....	11,301	0	0	0	0	0	0	0	.....	1
District of Columbia:										
Washington.....	1,437,571	0	4	0	11	2	0	0	7	145
Virginia:										
Lynchburg.....	30,277	0	0	0	1	0	0	0	9	4
Norfolk.....	159,089	0	0	0	4	0	0	0	8	.....
Richmond.....	181,044	0	0	0	2	1	0	0	5	61
Roanoke.....	55,502	0	0	0	0	0	1	0	0	12
West Virginia:										
Charleston.....	45,597	1	0	0	2	0	0	0	3	11
Huntington.....	57,918	0	0	0	2	0	0	0	5	20
Wheeling.....	156,208	0	0	0	0	1	5	0	5	25

¹Population Jan. 1, 1920.

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924—Continued.

Division, State, and city.	Population July 1, 1923, estimated.	Smallpox.			Tuberculosis deaths reported.	Typhoid fever.			Whooping cough, cases reported.	Deaths, all causes.
		Cases, estimated expectancy.	Cases reported.	Deaths reported.		Cases, estimated expectancy.	Cases reported.	Deaths reported.		
SOUTH ATLANTIC—continued.										
North Carolina:										
Raleigh.....	29,171	0	2	0	1	0	0	0	8	11
Wilmington.....	35,719	0	0	0	1	0	0	0	1	15
Winston-Salem.....	56,230	1	1	0	7	0	0	0	15	29
South Carolina:										
Charleston.....	71,245	0	3	0	1	0	0	0	0	21
Columbia.....	39,688	0	0	0	1	0	0	0	0	32
Savannah.....	26,789	0	1	0	0	0	0	0	3	5
Georgia:										
Atlanta.....	222,963	3	105	0	5	0	0	0	0	97
Brunswick.....	15,937	0	0	0	0	0	0	0	0	7
Savannah.....	89,448	0	0	0	2	1	0	0	0	36
Florida:										
St. Petersburg.....	24,403	.....	0	0	0	.....	0	0	0	11
Tampa.....	56,050	1	0	0	1	1	0	0	0	22
EAST SOUTH CENTRAL.										
Kentucky:										
Covington.....	57,877	0	0	0	4	1	0	0	3	16
Lexington.....	43,673	1	0	0	2	0	0	0	3	17
Louisville.....	257,671	1	0	0	3	1	0	0	1	83
Tennessee:										
Memphis.....	170,067	2	0	0	3	0	1	0	3	69
Nashville.....	121,128	0	0	0	4	0	0	0	5	58
Alabama:										
Birmingham.....	195,901	0	5	0	5	1	0	0	12	70
Montgomery.....	45,383	0	0	0	1	0	1	0	.....	20
WEST SOUTH CENTRAL.										
Arkansas:										
Fort Smith.....	30,635	0	1	.....	.....	0	0	.....	8	.....
Little Rock.....	70,916	0	0	.....	.....	0	0	.....	1	.....
Louisiana:										
New Orleans.....	404,575	4	0	0	16	1	2	0	0	196
Shreveport.....	54,590	.....	7	0	4	.....	0	0	0	27
Oklahoma:										
Tulsa.....	102,018	2	0	.....	.....	0	0	.....	1	.....
Texas:										
Dallas.....	177,274	6	0	0	4	0	1	0	0	61
Galveston.....	46,877	0	0	0	0	1	0	0	0	13
Houston.....	154,970	1	4	0	3	1	0	0	.....	41
San Antonio.....	184,727	1	0	0	11	0	0	0	0	59
MOUNTAIN.										
Montana:										
Billings.....	16,927	0	0	0	0	0	0	0	0	5
Great Falls.....	27,787	2	9	9	0	0	0	0	7	15
Helena.....	112,037	.....	0	0	0	0	0	0	0	11
Missoula.....	112,068	0	2	0	0	0	1	0	1	6
Idaho:										
Boise.....	22,806	1	0	0	0	0	0	0	0	5
Colorado:										
Denver.....	272,031	13	0	0	10	0	0	0	11	74
Pueblo.....	43,519	1	0	0	2	0	1	0	0	17
New Mexico:										
Albuquerque.....	16,648	0	0	0	5	0	0	0	.....	11
Utah:										
Salt Lake City.....	126,241	4	1	0	3	1	1	0	6	42
Nevada:										
Reno.....	12,429	1	0	0	0	0	1	0	0	1
PACIFIC.										
Washington:										
Seattle.....	1315,685	6	2	.....	.....	0	1	.....	3	.....
Spokane.....	104,573	18	8	.....	.....	0	0	.....	0	.....
Tacoma.....	101,731	3	3	.....	.....	0	4	.....	0	.....
California:										
Sacramento.....	69,950	0	0	0	0	1	0	0	0	25
San Francisco.....	539,038	3	0	0	16	1	1	0	1	160

¹ Population Jan. 1, 1920.

CITY REPORTS FOR WEEK ENDED FEBRUARY 16, 1924—Continued.

Division, State, and city.	Cerebrospinal meningitis.		Lethargic encephalitis.		Pellagra.		Poliomyelitis (infantile paralysis).		
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases, estimated expectancy.	Cases.	Deaths.
NEW ENGLAND.									
Massachusetts: Boston.....	0	0	1	1	0	0	0	0	0
MIDDLE ATLANTIC.									
New York:									
Buffalo.....	0	1	0	0	0	0	0	0	0
New York.....	1	2	12	6	0	0	1	1	1
New Jersey: Newark.....	0	0	0	0	0	0	0	1	0
Pennsylvania: Philadelphia.....	1	0	1	2	0	0	1	0	0
EAST NORTH CENTRAL.									
Ohio:									
Cincinnati.....	0	0	0	0	0	0	0	0	1
Cleveland.....	0	0	2	0	0	0	0	0	0
Illinois: Chicago.....	1	0	0	0	0	0	0	0	0
Michigan:									
Detroit.....	0	0	4	1	1	1	0	1	0
Flint.....	0	0	0	0	0	0	0	0	1
Wisconsin: Milwaukee.....	1	1	2	0	0	0	0	2	1
WEST NORTH CENTRAL.									
Missouri: Kansas City.....	0	0	0	1	0	0	0	0	0
SOUTH ATLANTIC									
Maryland: Baltimore.....	0	0	2	1	0	0	0	0	1
North Carolina:									
Raleigh.....	0	0	0	0	0	0	0	0	2
Winston-Salem.....	0	0	0	0	0	1	0	0	0
South Carolina: Columbia.....	0	0	0	0	0	1	0	0	0
Florida: Tampa.....	0	0	0	0	1	0	0	0	0
EAST SOUTH CENTRAL.									
Tennessee: Nashville.....	0	0	0	0	0	1	0	0	0
Alabama:									
Birmingham.....	0	0	0	0	2	1	0	0	0
Montgomery.....	0	0	0	0	0	2	0	0	0
WEST SOUTH CENTRAL.									
Louisiana: New Orleans.....	0	1	0	0	1	1	0	0	0
Texas:									
Galveston.....	0	0	0	0	0	1	0	0	0
Houston.....	0	1	0	0	0	0	0	0	1
MOUNTAIN.									
Montana: Missoula.....	0	0	1	0	0	0	0	0	0
PACIFIC.									
California: San Francisco.....	0	0	1	0	0	0	1	0	0

The following table gives a summary of the reports from 105 cities for the seven-week period ended February 16, 1924. Eight of these cities did not report deaths. The aggregate population of the cities reporting cases was estimated at nearly 29,000,000 on July 1, 1923, which is the latest date for which estimates are available. The cities reporting deaths had more than 28,000,000 population on that date. The number of cities included in each group and the aggregate population are shown in a separate table below.

Reports for the week ended February 16, 1924, had not been received from Los Angeles, Calif.; Mobile, Ala.; and Topeka, Kans., at the time of going to press. Data from these cities are included in the table for the other weeks, and in order to enable comparisons with other weeks to be made, the figures for these cities for the week ended February 16 have been estimated and the estimates included in the figures for the groups of cities.

Summary of weekly reports from cities, December 30, 1923, to February 16, 1924.

DIPHTHERIA CASES.

	1924, week ended—						
	Jan. 5.	Jan. 12.	Jan. 19.	Jan. 26.	Feb. 2.	Feb. 9.	Feb. 16.
Total	1,339	1,385	1,453	1,387	1,288	1,305	1,226
New England	172	123	130	141	161	136	115
Middle Atlantic	401	476	488	479	410	490	434
East North Central	341	352	333	305	291	284	247
West North Central	133	102	125	124	125	97	128
South Atlantic	59	86	112	72	59	50	57
East South Central	19	20	15	17	19	13	17
West South Central	46	36	38	41	38	33	37
Mountain	26	19	19	27	21	21	23
Pacific	142	171	193	181	164	181	168

MEASLES CASES.

	4,008	4,997	5,479	5,571	5,908	5,794	6,577
Total	4,008	4,997	5,479	5,571	5,908	5,794	6,577
New England	175	161	176	170	227	265	334
Middle Atlantic	611	639	690	770	899	1,004	1,183
East North Central	283	356	328	296	330	292	378
West North Central	525	444	383	411	522	643	814
South Atlantic	553	439	499	507	556	508	655
East South Central	45	92	98	121	118	98	118
West South Central	352	375	370	552	564	511	710
Mountain	300	458	434	723	1,005	975	1,216
Pacific	1,164	2,033	2,492	2,021	1,687	1,498	1,169

SCARLET FEVER CASES.

	1,550	1,731	1,883	1,925	1,858	1,934	1,798
Total	1,550	1,731	1,883	1,925	1,858	1,934	1,798
New England	281	287	330	327	368	307	276
Middle Atlantic	386	445	461	530	492	572	525
East North Central	413	404	487	419	405	426	383
West North Central	190	265	227	245	227	248	258
South Atlantic	122	113	128	142	145	183	157
East South Central	10	27	26	27	12	18	14
West South Central	22	20	21	15	19	19	12
Mountain	20	25	36	24	24	27	41
Pacific	106	145	167	196	166	134	132

SMALLPOX CASES.

	178	341	454	379	368	427	473
Total	178	341	454	379	368	427	473
New England	0	2	0	1	0	0	0
Middle Atlantic	1	1	1	6	3	0	0
East North Central	28	58	92	64	74	87	143
West North Central	25	49	45	50	36	59	49
South Atlantic	37	52	81	55	58	118	117
East South Central	2	7	4	3	5	8	5
West South Central	2	10	6	3	12	6	12
Mountain	2	2	4	2	2	4	3
Pacific	81	160	221	195	178	145	144

Summary of weekly reports from cities, December 30, 1923, to February 16, 1924—Continued.

TYPHOID FEVER CASES.

	1924, week ended—						
	Jan. 5.	Jan. 12.	Jan. 19.	Jan. 26.	Feb. 2.	Feb. 9.	Feb. 16.
Total	63	81	77	69	78	76	74
New England.....	2	1	11	1	5	0	3
Middle Atlantic.....	11	29	30	21	26	24	23
East North Central.....	26	27	16	18	14	8	18
West North Central.....	3	1	3	2	5	7	2
South Atlantic.....	7	9	7	11	13	15	7
East South Central.....	6	0	3	8	1	2	2
West South Central.....	4	8	6	4	1	10	3
Mountain.....	1	2	0	0	1	1	4
Pacific.....	3	4	1	4	7	9	12

INFLUENZA DEATHS.

Total	46	76	68	70	82	100	92
New England.....	4	9	2	6	3	3	5
Middle Atlantic.....	13	24	32	14	29	33	30
East North Central.....	7	17	11	23	18	19	13
West North Central.....	0	4	10	4	5	6	6
South Atlantic.....	6	5	1	6	5	14	17
East South Central.....	3	6	4	3	7	13	6
West South Central.....	3	5	2	6	10	7	11
Mountain.....	2	1	0	1	0	2	0
Pacific.....	8	5	6	7	5	3	4

PNEUMONIA DEATHS.

Total	852	1,105	1,054	1,002	1,120	1,064	1,125
New England.....	52	80	78	51	73	73	79
Middle Atlantic.....	328	448	422	409	463	421	407
East North Central.....	182	203	202	177	222	216	255
West North Central.....	59	67	73	70	64	46	52
South Atlantic.....	97	143	132	129	123	134	146
East South Central.....	35	43	30	50	62	63	65
West South Central.....	28	44	47	60	64	53	59
Mountain.....	28	32	30	20	21	24	30
Pacific.....	43	45	40	36	28	34	32

Number of cities included in summary of weekly reports and aggregate population of cities in each group, estimated as of July 1, 1923.

Group of cities.	Number of cities reporting—		Aggregate population of cities reporting—	
	Cases.	Deaths.	Cases.	Deaths.
Total	105	97	28,898,350	28,140,934
New England.....	12	12	2,098,746	2,098,746
Middle Atlantic.....	10	10	10,304,114	10,304,114
East North Central.....	17	17	7,032,535	7,032,535
West North Central.....	14	11	2,515,330	2,381,454
South Atlantic.....	22	22	2,566,901	2,566,901
East South Central.....	7	7	911,885	911,885
West South Central.....	8	6	1,124,564	1,023,013
Mountain.....	9	9	546,445	546,445
Pacific.....	6	3	1,797,830	1,275,841

FOREIGN AND INSULAR.

BRITISH EAST AFRICA.

Plague.

Plague has been reported in British East Africa as follows: Mombasa—December 30, 1923, to January 5, 1924, 1 case with 1 death. Uganda—Month of October, 1923, 97 cases and 94 deaths; month of November, 1923, 94 cases and 89 deaths.

Smallpox.

During the period from November 25 to December 29, 1923, eight cases of smallpox with three deaths were reported in the territory of Tanganyika, three cases of smallpox were reported in Uganda during the month of October, 1923, and one case and one death during the month of November, 1923.

CANARY ISLANDS.

Plague—Santa Cruz de Teneriffe.

Information dated February 5, 1924, shows the occurrence of a case of plague at Santa Cruz de Teneriffe, Canary Islands.

JAMAICA.

Smallpox (Alastrim).

During the week ended February 2, 1924, 35 new cases of smallpox (alastrim) were reported in the island of Jamaica. Of these, two cases were reported at Kingston.

Typhoid Fever—Kingston and Vicinity.

During the same week, 21 cases of typhoid fever were reported at Kingston and the disease was stated to be present in the surrounding country.

Chicken Pox.

During the same period, 15 cases of chicken pox were reported for the Island of Jamaica.

PANAMA CANAL.

Communicable Diseases—January, 1924.

Communicable diseases were reported for the Panama Canal during the month of January, 1924, as follows:

Disease.	Canal Zone.	Colon.	Panama.	Non-resident.	Total.
Chicken pox.....	3	1	7	.....	11
Diphtheria.....	1	.....	.....	.....	1
Dysentery.....	.....	.....	4	5	9
Hookworm disease.....	24	7	28	52	111
Malaria.....	21	1	2	7	31
Measles.....	14	3	30	4	51
Pneumonia.....	2	1	38	1	42
Polio-myelitis.....	.....	.....	1	.....	1
Tuberculosis.....	3	5	11	4	23
Typhoid fever.....	1	.....	1	.....	2
Whooping cough.....	3	2	4	.....	9

POLAND.

Communicable Diseases—November 11–December 8, 1923.

Communicable diseases have been reported in Poland as follows:

NOVEMBER 11-17, 1923.

Disease.	Cases.	Deaths.	District showing greatest number of deaths.
Cerebrospinal meningitis.....	10	8	Lodz.
Diphtheria.....	94	9	Posen.
Measles.....	522	16	Lwow.
Scarlet fever.....	594	58	Do.
Smallpox.....	2	.....	Do.
Tuberculosis.....	72	141	Do.
Typhoid fever.....	387	40	Lodz.
Typhus fever.....	64	3	Dublin.
Typhus fever, recurrent.....	16	1	Pomerania.
Whooping cough.....	226	7	Stanislawow.

NOVEMBER 18-24, 1923.

Cerebrospinal meningitis.....	8	4	Warsaw.
Diphtheria.....	100	17	Lodz.
Measles.....	595	3	Lwow.
Scarlet fever.....	565	64	Tarnopol.
Smallpox.....	8	.....	Do.
Tuberculosis.....	65	149	Warsaw.
Typhoid fever.....	411	29	Tarnopol.
Typhus fever.....	104	7	Lwow.
Typhus fever, recurrent.....	3	.....	Do.
Whooping cough.....	70	6	Do.

NOVEMBER 25-DECEMBER 1, 1923.

Cerebrospinal meningitis.....	5	2	Lodz.
Diphtheria.....	79	16	Warsaw.
Measles.....	351	7	Stanislawow
Scarlet fever.....	528	48	Warsaw.
Smallpox.....	13	3	Krakow.
Tuberculosis.....	65	176	Warsaw.
Typhoid fever.....	338	48	Lwow.
Typhus fever.....	62	5	Krakow.
Typhus fever, recurrent.....	2	.....	Do.
Whooping cough.....	115	.....	Do.

DECEMBER 2-8, 1923.

Cerebrospinal meningitis.....	8	9	Kisloe.
Diphtheria.....	96	19	Lodz.
Measles.....	402	12	Lwow.
Scarlet fever.....	508	50	Do.
Smallpox.....	1	.....	Do.
Tuberculosis.....	74	168	Warsaw
Typhoid fever.....	289	30	Lwow.
Typhus fever.....	81	6	Stanislawow.
Typhus fever, recurrent.....	3	.....	Do.
Whooping cough.....	35	9	Do.

Dysentery—Malaria—Rabies.

During the period under report, dysentery, malaria, and rabies were reported in Poland as follows: Week ended November 17, 1923—dysentery, 108 cases, 28 deaths; malaria, 15 cases; rabies, 2 deaths. During the week ended November 24, 1923—dysentery, 96 cases, 32 deaths; malaria, 9 cases; rabies, 1 death. During the week ended December 1, 1923—dysentery, 83 cases, 24 deaths; malaria, 12 cases; rabies, 3 deaths. During the week ended December 8, 1923—dysentery, 67 cases, 25 deaths; malaria, 8 cases.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER.

The reports contained in the following tables must not be considered as complete or final as regards either the list of countries included or the figures for the particular countries for which reports are given.

Reports Received During Week Ended March 7, 1924.¹

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
India:				
Bombay.....	Dec. 23-29.....	1	1	
Calcutta.....	Jan. 6-12.....	16	16	
Madras.....	Jan. 13-19.....	2	1	
Siam:				
Bangkok.....	Dec. 31-Jan. 5....	2	1	

PLAGUE.

Brazil:				
Bahia.....	Dec. 30-Jan. 19....	4	5	
Rio de Janeiro.....	Jan. 20-26.....	1		
British East Africa:				
Mombasa.....	Dec. 30-Jan. 5....	1	1	
Uganda.....	Oct. 1-Nov. 30....	191	183	
Canary Islands:				
Santa Cruz de Teneriffe....	Feb. 5.....	1		
Ceylon:				
Colombo.....	Dec. 30-Jan. 19....	31	22	Plague rodents, 10.
India:				
Calcutta.....	Jan. 6-12.....	1	1	
Rangoon.....	do.....	1	1	
Madagascar:				
Tananarive Province.....	Dec. 1-15.....	57	39	
Tananarive Town.....	do.....	10	10	
Straits Settlements:				
Singapore.....	Dec. 30-Jan. 5....	2	2	

SMALLPOX.

Brazil:				
Bahia.....	Jan. 6-12.....	2		
Pernambuco.....	do.....		1	
Rio de Janeiro.....	Jan. 20-26.....	1		
British East Africa:				
Tanganyika.....	Nov. 25-Dec. 29...	8	3	
Uganda.....	Oct. 1-Nov. 30....	4	1	
Canada:				
Alberta—				
Calgary.....	Feb. 10-16.....	5		
Manitoba—				
Winnipeg.....	Feb. 9-15.....	4		
New Brunswick—				
Restigouche County....	Feb. 10-16.....	2		
Victoria County.....	do.....	2		
Westmoreland County....	do.....	3		
Quebec—				
Montreal.....	Feb. 10-23.....	3		
Saskatchewan—				
Regina.....	Dec. 30-Feb. 9....	5	1	
Chile:				
Antofagasta.....	Jan. 6-12.....	1	1	
China:				
Amoy.....	do.....			Present.
Antung.....	Dec. 31-Jan. 13....	4	1	
Chungking.....	Dec. 16-29.....			Do.
Do.....	Dec. 30-Jan. 12....			Do.
Hongkong.....	Dec. 30-Jan. 5....	100	73	
Nanking.....	Jan. 13-26.....			Do.
Shanghai.....	do.....	8	18	Cases, foreign.
Estonia:				Dec. 1-31, 1923: Cases, 6.
Greece:				
Saloniki.....	Nov. 26-Dec. 30...	1	3	
Do.....	Dec. 31-Jan. 27....	2	1	

¹ From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received During Week Ended March 7, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
India:				
Bombay.....	Jan. 6-12.....	16	6	
Karachi.....	Jan. 13-19.....	1		
Madras.....	do.....	16		
Jamaica.....				Jan. 27-Feb. 2, 1924: Cases, 35 (a'sastrim).
Kingston.....	Jan. 27-Feb. 2.....	2		
Japan:				
Taiwan.....	Jan. 1-10.....	6		
Java:				
West Java—Batavia.....	Dec. 29-Jan. 4.....	17	4	
Latvia.....				Dec. 1-31, 1923: Cases, 2.
Manchuria:				
Darien.....	Jan. 14-20.....	1		
Mexico:				
Mexico City.....	Jan. 27-Feb. 9.....	16		Including municipalities in Federal district.
Palestine:				
Jaffa.....	Jan. 15-28.....	3		
Poland.....				Nov. 11-Dec. 8, 1923; Cases, 24; deaths, 3.
Portugal:				
Oporto.....	Feb. 3-9.....	3	1	
Portuguese East Africa:				
Lourenco Marques.....	Dec. 30-Jan. 5.....	2		
Siam:				
Bangkok.....	Dec. 30-Jan. 5.....	1	1	
Spain:				
Valencia.....	Jan. 27-Feb. 9.....	57	4	
Straits Settlements:				
Singapore.....	Dec. 23-29.....	1	1	
Do.....	Dec. 30-Jan. 5.....	1	1	
Switzerland:				
Basel.....	Jan. 27-Feb. 2.....	1		
Berne.....	Jan. 20-Feb. 2.....	4		
Zurich.....	Jan. 27-Feb. 2.....	1		
Tunis:				
Tunis.....	Jan. 29-Feb. 4.....		1	
Union of South Africa:				
Northern Rhodesia.....	Jan. 8-14.....	2		

TYPHUS FEVER.

Chile:				
Concepcion.....	Jan. 8-14.....		2	
Iquique.....	Jan. 20-26.....		1	
Talcahuano.....				Jan. 12, 1924: 1 case under treatment.
China:				
Chungking.....	Dec. 16-29.....			Endemic.
Do.....	Dec. 30-Jan. 12.....			Do.
Egypt:				
Cairo.....	Nov. 19-Dec. 9.....	7	5	
Estonia.....				Dec. 1-31, 1923: Cases, 15. Paratyphus: Cases, 4.
Greece:				
Saloniki.....	Nov. 26-Dec. 30.....	7	3	
Latvia.....				Dec. 1-31, 1923: Cases, 9. Paratyphus fever: Cases, 3.
Mexico:				
Durango.....	Dec. 1-31.....		2	
Do.....	Jan. 1-31.....		1	
Mexico City.....	Jan. 27-Feb. 9.....	19		Including municipalities in Federal district.
Palestine:				
Jaffa.....	Jan. 8-21.....	2		
Poland.....				Nov. 11-Dec. 8, 1923: Cases, 311; deaths, 21. Recurrent typhus: Cases, 24; deaths, 1.
Rumania:				
Kishineff District.....	Dec. 1-31.....	5		
Spain:				
Barcelona.....	Jan. 17-23.....		2	
Union of South Africa:				
Johannesburg.....	Jan. 6-12.....	4		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 29, 1923, to February 29, 1924.¹

CHOLERA.

Place.	Date.	Cases.	Deaths.	Remarks.
China:				
Hongkong.....	Nov. 18-24.....	1		
India:				
Calcutta.....	Nov. 11-Dec. 29.....	85	69	Oct. 14-Dec. 8, 1923: Cases, 9,691; deaths, 6,153.
Do.....	Dec. 30-Jan. 5.....	46	33	
Madras.....	Nov. 25-Dec. 29.....	15	5	
Do.....	Dec. 30-Jan. 5.....	1		
Rangoon.....	Nov. 11-Dec. 29.....	8	5	
Siam:				
Bangkok.....	Nov. 18-Dec. 8.....	4	2	
Turkey:				
Constantinople.....	Dec. 2-8.....		1	

PLAGUE.

Azores:				
St. Michael Island.....	Oct. 20-Nov. 10.....	9	5	At localities 3 to 9 miles from port of Ponta Delgada.
Bolivia:				
La Paz.....	Oct. 1-31.....		3	
Brazil:				
Bahia.....	Nov. 11-Dec. 22.....	5	3	
British East Africa:				
Kenya:				
Mombasa.....	Oct. 14-20.....	1	1	Infected rats, 2. Dec. 9-15, 1923: Cases, 4; deaths, 2; removed from vessel arrived Dec. 11, 1923.
Nairobi.....	Nov. 1-21.....	40		In rural districts, several hundred.
Tanganyika.....		4		To Nov. 24, 1923: Cases, 39; deaths, 25.
Uganda.....	Aug. 1-Oct. 31.....	734	719	
Canary Islands:				
Las Palmas.....	Oct. 15-Nov. 15.....	14	14	Locality 52 km. from Teneriffe.
San Juan de la Rambla.....	Dec. 11.....	1		Epidemic.
Celebes Island:				
Nov. 30.....				
Ceylon:				
Colombo.....	Nov. 11-Dec. 29.....	31	21	Plague rodents, 24.
China:				
Nanking.....	Dec. 16-29.....			Present.
Do.....	Dec. 30-Jan. 12.....			Do.
Ecuador:				
Guayaquil.....	Nov. 16-Dec. 15.....	15	6	Rats taken, 35,070; found infected, 94.
Jipijapa.....	do.....			Present.
Quito.....	Nov. 1-30.....	11	1	
Vino del Milagro.....	Dec. 1-15.....	1		
Egypt:				
City:				
Alexandria.....	Jan. 1-Dec. 27.....	65	33	Jan. 1-Dec. 27, 1923: Cases, 1,518; deaths, 724.
Cairo.....	do.....	2	2	Date of last case, Nov. 29, 1923.
Port Said.....	do.....	51	29	Date of last case, Dec. 25, 1923.
Suez.....	do.....	46	24	Date of last case, Sept. 10, 1923.
Hawaii:				
Honokaa.....				Jan. 8-10, 1924: Three plague-infected rodents.
Pauuhau.....				Dec. 14, 1923: One plague rat.
India:				
Bombay.....	Oct. 28-Dec. 22.....	5	5	Oct. 14-Dec. 8, 1923: Cases, 25,781; deaths, 17,435.
Do.....	Dec. 30-Jan. 5.....	2	2	
Calcutta.....	Dec. 23-29.....	1	1	
Karachi.....	Nov. 11-Dec. 29.....	42	33	
Do.....	Dec. 30-Jan. 12.....	3	1	
Padras Presidency.....	Nov. 4-Dec. 29.....	1,657	1,021	
Rangoon.....	do.....	20	15	
Do.....	Dec. 30-Jan. 5.....	3	3	
Indo-China:				
Saigon.....	Oct. 28-Dec. 8.....	19	6	Including 100 square kilometers in surrounding country.
Iraq:				
Bagdad.....	Nov. 11-Dec. 8.....	6	4	

¹ From medical officers of the Public Health Service, American consuls, and other sources.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 29, 1923, to February 29, 1924—Continued.

PLAGUE—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Java.....				Oct. 1-31, 1923: Deaths, 902. Nov. 1-30, 1923: Deaths, 942.
Province—				
Djakakarta.....	Oct. 1-Nov. 30.....		93	
Kedoe.....	do.....		696	
Pekalongan.....	do.....		71	
Samarang.....	do.....		336	
Soerabaya.....	do.....		5	Nov. 11-24, 1923: Cases, 2; deaths, 2. Dec. 9-15, 1923: Cases, 2; deaths, 2.
Soerakarta.....	do.....		643	
Madagascar:				
Tananarive Province.....	Oct. 1-Nov. 30.....	153	137	Bubonic, pneumonic, septicemic.
Tananarive town.....	do.....	54	54	
Paraguay:				
Asuncion.....	Dec. 18.....	6	4	
Peru.....				Nov. 1-Dec. 31, 1923: Cases, 38 deaths, 21.
Locality—				
Canete.....	Nov. 1-30.....	1	1	
Chanccay.....	Dec. 1-31.....	2		
Chepen.....	Nov. 1-30.....	1		
Chiclayo.....	Nov. 1-Dec. 31.....	2	1	
Lima (city).....	do.....	22	15	
Lima (country).....	do.....	8	7	
Lurin.....	do.....	2		
Portugal:				
Lisbon.....	Dec. 13-21.....	7		
Do.....	Dec. 31-Jan. 6.....		1	
Portuguese West Africa:				
Angola—				
Loanda.....	Oct.-Nov.....	59	23	
Siam:				
Bangkok.....	Nov. 4-Dec. 8.....	3	2	
Spain:				
Malaga.....	Dec. 17.....	2		
Straits Settlements:				
Singapore.....	Nov. 11-Dec. 22.....	4	4	
Syria:				
Beirut.....	Nov. 1-Dec. 10.....	3		
Turkey:				
Constantinople.....	Dec. 2-22.....	6	3	
Union of South Africa:				
Cape Province—				
Uitenhage district.....	Dec. 9-15.....			Plague rodent found in vicinity Haarhoff's kraal farm.
Orange Free State—				
Kroonstad district.....	Dec. 16-27.....	7	3	At Zandfontein farm, Bothaville area: Cases, white, 4; native, 3; deaths, white, 1; native, 2.
Wonderfontein farm.....	Dec. 2-8.....	4		Vicinity of Hoopstad. At Hoop- stad, Dec. 9-15, 1923, one death of case previously reported.
On vessel:				
Ship.....	Dec. 11.....	4	2	At Mombasa, British East Africa.

SMALLPOX.

Algeria:				
Algiers.....	Nov. 1-30.....	1		
Arabia:				Imported.
Aden.....	Dec. 16-22.....	1		
Do.....	Jan. 13-19.....	1		
Belgium:				
Brussels.....	do.....	10		
Bolivia:				
La Paz.....	Oct. 1-Dec. 31.....	45	15	
Brazil:				
Pernambuco.....	Nov. 4-Dec. 1.....	15	3	
Porto Alegre.....	Dec. 23-29.....		1	
Porto Rico.....	Dec. 30-Jan. 5.....		1	
Rio de Janeiro.....	Nov. 18-24.....	3	1	
Do.....	Jan. 6-12.....	2	1	
Sao Paulo.....	Sept. 3-9.....	1		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 29, 1923, to February 29, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
British East Africa:				
Tanganyika Territory.....	Sept. 30-Oct. 27....	14	1	
Uganda.....	Sept. 1-30.....	6	1	
Zanzibar.....	Sept. 1-Oct. 31....	116	18	Sept. 1-30, 1923: In areas 27 miles from town of Zanzibar. Oct. 1-31, 1923: in vicinity, 1 case, 1 death. In Mikokotoni district, 30 cases, 14 deaths reported.
Canada:				
Alberta—				
Calgary.....	Jan. 27-Feb. 2....	2		
British Columbia—				
Vancouver.....	Dec. 22-29.....	10		
Do.....	Dec. 30-Jan. 26....	17		
Manitoba—				
Winnipeg.....	Nov. 25-Dec. 29....	21		
Do.....	Dec. 30-Feb. 8....	47		
New Brunswick—				
Madawaska County....	Dec. 8-15.....	1		
Restigouche County....	Jan. 20-26.....	1		
Ontario.....				Jan. 1-31, 1924: Cases, 50. Occurring at Fort William.
Fort William and Port Arthur.....	Dec. 16-29.....	3		
London.....	Feb. 3-9.....	1		
North Bay.....	do.....	1		
Quebec—				
Montreal.....	Nov. 30-Jan. 26....	3		
Do.....	Feb. 3-9.....	1		
Saskatchewan—				
Regina.....	Dec. 9-15.....	1		
Ceylon:				Port case.
Colombo.....	Nov. 11-17.....	1		
Chile:				
Antofagasta.....	Jan. 13-19.....	3		
Concepcion.....	Oct. 1-Nov. 30.....		13	Nov. 12-Dec. 3, 1923: Deaths, 5.
Do.....	Dec. 25-31.....		1	
Talcahuano.....	Nov. 26-Dec. 2....	3		Dec. 22, 1923: Five cases present.
Valparaiso.....	Dec. 9-15.....		1	
China:				
Amoy.....	Nov. 18-Dec. 8....			Present.
Canton.....	Dec. 23-Jan. 13....			Do.
Chungking.....	Nov. 4-Dec. 15....			Present and endemic.
Do.....	Dec. 23-29.....			Present.
Foochow.....	Nov. 4-Dec. 15....			Do.
Do.....	Dec. 31-Jan. 12....			Do.
Hongkong.....	Oct. 28-Dec. 29....	718	630	
Manchuria—				
Harbin.....	Nov. 12-Dec. 22....	36		
Do.....	Jan. 1-7.....		5	
Nanking.....	Dec. 2-15.....			Do.
Do.....	Dec. 30-Jan. 12....			Do.
Shanghai.....	Dec. 29.....			Prevalent.
Do.....	Jan. 6-12.....	3	8	Cases, foreign.
Chosen (Korea):				
Seoul.....	Nov. 1-30.....	1		
Columbia:				
Buenaventura.....	Nov. 18-Dec. 15....	8		
Ecuador:				
Esmeraldas.....	Nov. 16-30.....	4		
Quito.....	Nov. 1-30.....	167	26	
Egypt:				
Port Said.....	Nov. 24-Dec. 2....	1		
Esthonia.....				Nov. 1-30, 1923: Cases, 32.
Greece:				
Saloniki.....	Oct. 22-Nov. 11....		8	
Guadeloupe (West Indies).				Jan. 2-16: Present.
Basse Terre.....	Dec. 18.....			Present.
Do.....	Jan. 12.....			Do.
Marie Galante.....	Dec. 18.....			Off shore island; present.
Moule.....	Jan. 12.....			Present.
Point à Pitre.....	Dec. 18.....			Present in vicinity.

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 29, 1923, to February 29, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
India.....				Oct. 14-Dec. 8, 1923: Cases, 6,544; deaths, 1,356.
Bombay.....	Oct. 28-Jan. 5.....	65	30	
Calcutta.....	Dec. 16-29.....	4	4	
Do.....	Dec. 30-Jan. 5.....	1	1	
Karachi.....	Dec. 30-Jan. 5.....	2		
Madras.....	Nov. 4-Dec. 29.....	23	3	
Do.....	Dec. 30-Jan. 12.....	6	1	
Rangoon.....	Nov. 4-Dec. 29.....	12	4	
Do.....	Dec. 30-Jan. 5.....	1		
Indo-China:				
City—				
Saigon.....	Nov. 4-Dec. 8.....	69	34	Including 100 square kilometers of surrounding country.
Iraq:				
Bagdad.....	Oct. 24-Dec. 8.....	25	16	
Jamaica.....				Nov. 25-Dec. 29, 1923: Cases, 115. Dec. 30, 1923-Jan. 19, 1924: Cases, 57.
Do.....				Jan. 20-26, 1924: Cases, 8. (Reported as alastrim.)
Kingston.....	Nov. 25-Dec. 29.....	3		
Do.....	Dec. 30-Jan. 19.....	4		
Japan:				
Tokyo.....	Jan. 1-23.....	46		
Java:				
East Java—				
Surabaya.....	Oct. 28-Nov. 24.....	219	28	
Do.....	Dec. 9-15.....	107	15	
West Java—				
Batavia.....	Oct. 27-Dec. 14.....	64	12	
Do.....	Dec. 22-28.....	1	1	
Latvia.....				Oct. 1-31, 1923: Cases, 3; Nov. 1-30, 1923: Cases, 1.
Manchuria:				
Dairen.....	Dec. 31-Jan. 6.....	1		
Mexico:				
Manzanillo.....	Dec. 4-10.....	5	1	
Mexico City.....	Nov. 25-Dec. 29.....	32		Including municipalities in Federal district.
Do.....	Dec. 30-Jan. 26.....	49	23	Do.
Tampico.....	Jan. 27.....			Present among military.
Vera Cruz.....	Nov. 3-Dec. 30.....		4	
Do.....	Jan. 6-13.....	1	1	
Do.....	Jan. 21-27.....		1	
Netherlands:				
Rotterdam.....	Jan. 20-26.....	3		
Persia:				
Teheran.....	Sept. 24-Nov. 22.....		2	
Poland.....				Sept. 23-Nov. 10, 1923: Cases, 22; deaths, 4.
Portugal:				
Lisbon.....	Nov. 11-Dec. 29.....	19	10	
Do.....	Dec. 31-Jan. 26.....	14	3	
Oporto.....	Nov. 25-Dec. 29.....	39	23	
Do.....	Dec. 30-Jan. 20.....	36	20	
Siam:				
Bangkok.....	Oct. 28-Dec. 8.....	33	18	Nov. 25-Dec. 1, 1923; Epidemic.
Siberia:				
Dauria Station.....	Oct. 21.....			Present. Locality on Chita Railway, Manchurian frontier.
Sierra Leone:				
Sherbro District—				
Tagbail.....	Nov. 1-15.....	3		
Spain:				
Barcelona.....	Nov. 15-Dec. 26.....		2	
Do.....	Jan. 3-9.....		2	
Valencia.....	Nov. 25-Dec. 29.....	152	12	
Do.....	Dec. 30-Jan. 13.....	64	9	
Do.....	Jan. 21-26.....	24	2	
Straits Settlements:				
Singapore.....	Dec. 16-22.....	1		
Switzerland:				
Berne.....	Nov. 18-Dec. 22.....	12		Corrected.
Do.....	Jan. 6-19.....	3		
Lucerne.....	Nov. 1-30.....	34		
Do.....	Dec. 1-31.....	26		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 29, 1923, to February 29, 1924—Continued.

SMALLPOX—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Syria:				
Aleppo.....	Nov. 25-Dec. 1....	1		In vicinity, at Djisr Choughour.
Damascus.....	Nov. 16-Dec. 15....	7		
Tunis:				
Tunis.....	Oct. 27-Nov. 2....	5	1	
Do.....	Jan. 8-21.....	3	1	
Turkey:				
Constantinople.....	Nov. 11-Dec. 8....	3		
Do.....	Jan. 6-12.....	1		
Union of South Africa.....				Oct. 1-31, 1923: Colored, cases, 41; deaths, 2; white, cases, 3. Outbreaks.
Cape Province.....	Oct. 28-Dec. 8....			Do.
Natal.....	Oct. 28-Nov. 3....			
Northern Rhodesia.....	Dec. 4-10.....	10		
Do.....	Dec. 18-31.....	30	5	
Orange Free State.....	Oct. 28-Nov. 24....			Do.
Transvaal.....	Nov. 18-Dec. 1....			Do.
Johannesburg.....	Nov. 25-Dec. 15....	3		
Uruguay:				
Montevideo.....	Oct. 1-31.....	1		
Venezuela:				
Caracas.....	Jan. 22.....			Epidemic.
On vessels:				
S. S. Torres.....	Jan. 14.....	1		At New Orleans quarantine station from Tampico, Mexico, via ports. Case in seaman signed on at Galveston, Tex., on outward voyage.
S. S. Tupper.....	Jan. 20-26.....			At Gonaïges, Haiti.
S. S. Vasari.....	Dec. 31.....	1		At Trinidad, West Indies, from Buenos Aires, Argentina. Vessel left Buenos Aires Dec. 15, 1923, for New York, via Santos, Rio de Janeiro, Trinidad, Barbados.

TYPHUS FEVER.

Algeria:				
Algiers.....	Nov. 1-Dec. 31....	7	3	
Do.....	Jan. 11-20.....	1	1	
Bolivia:				
La Paz.....	Oct. 1-Dec. 31....	43	5	
Bulgaria:				
Sofia.....				Nov. 18-Dec. 15, 1923: Paratyphus fever; cases, 17.
Canary Islands:				
Teneriffe.....	Jan. 14-20.....		1	
Chile:				
Antofagasta.....	Dec. 2-8.....	4		
Concepcion.....	Oct. 1-Nov. 30....		4	Dec. 11-24, 1923: Deaths, 3.
Talcahuano.....				Dec. 5, 1923: 3 cases under treatment.
Do.....	Dec. 31-Jan. 6....	1		
Valparaiso.....	Nov. 25-Dec. 15....		29	Dec. 24, 1923: In hospital, 34 cases.
China:				
Antung.....	Nov. 12-Dec. 30....	5		
Chungking.....	Nov. 18-24.....			Present.
Do.....	Dec. 23-29.....			Endemic.
Ecuador:				
Quito.....	Nov. 1-30.....	14	1	
Egypt:				
Alexandria.....	Nov. 19-Dec. 23....	3		
Do.....	Jan. 8-14.....	1		
Cairo.....	Sept. 10-Nov. 11....	28	5	
Esthonia.....				Nov. 1-30, 1923: Paratyphus fever; cases, 8.
Finland.....				Dec. 1-15, 1923: Paratyphus fever; cases, 15.
Germany:				
Coblenz.....	Jan. 27-Feb. 2....	1		
Hungary.....				July 1-Aug. 31, 1923: Cases, 24.
Java:				
East Java— Soerabaya.....	Dec. 9-15.....	4		

CHOLERA, PLAGUE, SMALLPOX, TYPHUS FEVER, AND YELLOW FEVER—Continued.

Reports Received from December 29, 1923, to February 29, 1924—Continued.

TYPHUS FEVER—Continued.

Place.	Date.	Cases.	Deaths.	Remarks.
Latvia.....				Oct. 1-31, 1923: Cases, 12; paratyphus fever, 7; recurrent typhus, 3. Nov. 1-30, 1923: Cases, 1; paratyphus fever, 2 cases.
Mexico:				
Mexico City.....	Nov. 25-Dec. 29...	86		Including municipalities in Federal district. Do.
Do.....	Dec. 30-Jan. 5.....	8		
Norway:				
Stavanger.....	Dec. 25-31.....	1		
Palestine:				
Jaffa.....	Jan. 1-7.....	1		
Persia:				
Teheran.....	Sept. 24-Oct. 23.....		1	
Poland.....				Sept. 23-Nov. 10, 1923; Cases, 270; deaths, 28; recurrent typhus, cases, 25.
Rumania:				
Kishineff District.....	Nov. 1-30.....	10		
Spain:				
Barcelona.....	Nov. 29-Dec. 12.....		2	
Do.....	Jan. 3-9.....		2	
Madrid.....	Dec. 1-31.....		7	
Syria:				
Damascus.....	Jan. 27-Feb. 2.....	1		
Turkey:				
Constantinople.....	Nov. 11-Dec. 29.....	15	1	
Do.....	Dec. 30-Jan. 19.....	5		
Union of South Africa.....				Oct. 1-31, 1923: Colored, 287 cases, 58 deaths; white, 2 cases; total, 289 cases, 58 deaths.
Cape Province.....				Oct. 1-31, 1923: Colored, cases, 245; deaths, 47.
Do.....	Oct. 28-Dec. 8.....			Outbreaks.
Natal.....				Oct. 1-31, 1923: Colored, cases, 4; deaths, 3.
Do.....	Oct. 28-Nov. 3.....			Outbreaks.
Durban.....	Nov. 24-Dec. 1.....	73		Cases occurring among native stevedores in the harbor area of the port and confined to one barracks.
Orange Free State.....				Oct. 1-31, 1923: Colored, cases, 25; deaths, 8.
Do.....	Dec. 15.....			Outbreaks.
Transvaal.....				Oct. 1-31, 1923: Colored, cases, 13.
Do.....	Oct. 28-Dec. 1.....			Outbreaks.
Johannesburg.....	Oct. 1-Dec. 31.....	3	4	
Venezuela:				
Maracaibo.....	Dec. 16-22.....		1	
Yugoslavia:				
Croatia—				
Zagreb.....	Dec. 2-15.....	3		
Serbia—				
Belgrade.....	Nov. 25-Dec. 1.....	1		

YELLOW FEVER.

Brazil:				
Pernambuco City.....	Nov. 16.....	3	2	