INVESTIGATE BRITISH HEALTH INSURANCE.

Dr. Frederick L. Hoffman, vice-president and statistician of the Prudential Insurance Company, Newark, N.J., has completed a five months' study of the workings of the British National Insurance act in England, Scotland and Ireland. In a summary of his conclusions that are far from complimentary to the system of compulsory health insurance as found there, he states in part:

"After seven years of experience with the act the view-point of leading manufacturers and other employers of labor throughout Great Britain is that national health insurance has no direct relation whatever to labor efficiency except that a larger amount of malingering tends persistently toward a diminution of normal output.

"The act is condemned by insurance authorities as an unsound insurance measure; by medical authorities as an unsound method of medical relief; by pharmaceutical authorities as an unsatisfactory method of drug administration; by labor leaders as contrary to the best interest of the labor element, by large employers of labor as a menace to productive industry; by the organized medical profession as opposed to the best interests alike of panel practitioners and those who limit themselves to private practice; by public health authorities as of no value in the furtherance of public health measures; by authorities in charity, philanthropy and those who administer poor relief as not rendering satisfactory aid and assistance to those whose needs are most urgent."

Among Dr. Hoffman's explanatory statements were the following:

When the National Health Insurance act of Great Britain went into effect, the social condition of British wage earners had made enormous progress during half a century. Wages had increased and hours of labor had been diminished. The evil of child labor had been measurably decreased and conditions affecting the employment of women in industry had been improved. Industrial accidents were less common and the general health of the population had shown great improvement. No other country showed a corresponding reduction in the death rate from infectious, transmissible or other preventable diseases. The Public Health Administration of England had become a model for the civilized world.

"British health insurance has not raised the standard of sanitary progress. The lowering of the English death rate during the previous thirty years, challenging favorable comparison with all other countries, had been achieved without compulsory health insurance of any kind.

"The fundamental error of the act was to underrate the voluntary form and to establish a subsidiz-

ed system of relief. National health insurance does not promote public health or the prevention of disease.

"The administrative machinery necessary to carry the law into effect is of truly colossal proportions. It is probably safe to assume that cartainly not less than 50,000 persons directly or indirectly, in paid or unpaid capacities, are required to meet the basic administrative necessities of the act.

"The ill-defined provisions regarding medicines and appliances are disastrous failures. There has come into existence a complicated system of drug pricing and checking involving the handling and rehandling of not far from 30,000,000 prescription accounts a year.

"The main objections on the part of organized labor are that the benefits under the act are inadequate and insufficient. The act has had the effect of diminishing the sense of self-reliance, independence and thrift. Malingering in its most subtle forms has become a matter of common occurrence. The proportion of cases investigated found fully able to work is barely less than 4 per cent. and often exceeds 50 per cent. With respect to the insurance the labor element is demoralized and thoroughly discontented with the benefits which invariably fall short of expectations. A doubling in value of the benefits is practically unanimously demanded as an imperative duty on the part of the State."

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