

14.2 "The Roseto Effect"

I. HEALTH AND CULTURE

People are nourished by other people. The importance of social networks in health and longevity has been confirmed by study of a close-knit Italian-American community in Roseto, Pennsylvania. At first blush, Roseto seems a distant memory of what once was the nation's ideal lifestyle--neighbors who looked after one another, civic-minded joiners and doers who formed the grass roots of American-style democracy. It seems to showcase those virtues that have all but disappeared elsewhere in what has become what we are now--a nation of strangers.

At one time the village came to be a living laboratory demonstrating that neighborliness is good not just for the community but for the human body (self) as well. Now Roseto is changing, becoming a community of suburban comfort with satellite dishes, fenced-in yards, and expensive cars.

Thirty years earlier, medical researchers were drawn to Roseto by a bewildering statistic: in defiance of medical expectations, Rosetans seemed nearly immune to one of the most common causes of death. They died of heart attacks at a rate far lower than the rest of America. Doctors were mystified in that residents led what medical textbooks predicted would be short lives.

The men of the village smoked and drank wine freely. They spent their days in backbreaking, hazardous labor, 100 feet down in nearby slate quarries. At home, the dinner tables each evening were laden with traditional Italian food, modified for local ingredients in ways that would drive a dietitian to despair.

The Mediterranean diet, with its use of olive oil rather than animal fat, has been touted lately for health benefits. Immigrants couldn't afford to import cooking oil from their homeland and instead fry their sausages and brown meatballs in lard. Yet, the resulting hefty bodies contained unusually healthy hearts. Why?

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II. A RESEARCH OPPORTUNITY

Study of the "Roseto Effect" began with a chance conversation over a couple of beers. A local physician happened to mention to the head of medicine at the University of Oklahoma that heart disease seemed much less prevalent in the adjoining town of Bangor, occupied by non-Italians.

When first studied in 1966, Roseto's cardiac mortality traced a unique graph. Nationally, the rate rises with age, but in Roseto it dropped to near zero for men aged 55-64. For men over 65, the local death rate was half the national average.

The study quickly went beyond death certificates, to poke, prod, and extensively interview the Rosetans. Instead of solving the puzzle, all the data simply ruled out any genetic or other physical sources of the Rosetans' resistance to heart disease. Two statistics about Roseto were eye-catching: Both the crime rate and the applications for public assistance were zero.

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III. HEALTH AND SOCIAL RELATIONSHIPS

Subsequent study showed that all of the houses contained three generations of the family. Rosetans took care of their elderly. Instead of putting the elderly "on the shelf," they were elevated "to the Supreme Court." The scientists were led to believe that the Roseto Effect was caused by something that could not be seen through the microscope, something beyond

focus of medical researchers.

It seemed that those groaning dinner tables offered nourishment for the human spirit as well as the body. In fact communal rituals--the evening stroll, the many social clubs, the church festivals that were occasions for the whole community to celebrate--contributed to the villagers' good health.

In "The Power of Clan," an updated report on studies by Stewart Wolf, a physician, and John Bruhn, a sociologist, covering a broad period of time from 1935 to 1984. They found that mutual respect and cooperation contribute to the health and welfare of a community and its inhabitants, and that self indulgence and lack of concern for others exert opposite effects.

Tracing the history of Roseto, the sociologists found that early immigrants were shunned by the English and Welsh who dominated this little corner of eastern Pennsylvania. Accordingly, the Rosetans turned inward and built their own system of mutual cooperation and as Wolf and Bruhn noted, "radiated a kind of joyous team spirit as they celebrated religious and family landmarks."

"People are nourished by other people," said Wolf, noting that the characteristics of tight-knit communities are better predictors of healthy hearts than are low levels of serum cholesterol or tobacco use. He explained that an isolated person may be overwhelmed by the problems of everyday life. Such a person internalizes that feeling as stress which, in turn, adversely affects everything from blood pressure to kidney function. That, however, is much less likely to happen when a person is surrounded by caring friends, neighbors and relatives. The sense of being supported reduces stress and disease stress engenders.

"We looked at the social structure of healthy communities," Wolf said, "and found that they are characterized by predictability and stability. In those communities, each person has a clearly defined role in the social scheme."

Into the 1960s, Roseto was the epitome of predictability and conformity. In clothing, housing or automobiles, a display of wealth was taboo. Women knew that, from their teens on, they would work in one of the many small blouse factories scattered throughout the village. Even the evening meal followed a rigid cycle.

"Monday" recalled 66-year old Angie Martocci, "almost everyone in town ate spezzati (a spinach and egg soup with spaghetti and gravy (tomato sauce). Wednesday was roast chicken and potatoes. Thursday, spaghetti again. Fridays, of course. Veal and peppers on Saturday; and antipasto, meatballs and spaghetti on Sunday."

All of that conformity reduced the distance between the haves and have-nots, thereby reinforcing everyone's sense of conformity also spared Rosetans the stress that comes with freedom of choice. (My comment: the anthropologist Maybury-Lewis in his video series *Millennium* that individuals in a tribal society grow up in a defined world where they know their place and their relationship to others. We grow up with freedom, he says, in a limitless world where we are lost and terribly alone.)

Possibly the strongest conformity in the village was the work ethic. Not only did everyone work here, they worked for a common goal--a better life for their children. The reverence for work was the legacy of Roseto's first priest, Rede Nisco. Arriving in 1896, De Nisco practiced what he preached. Taking up a pick and shovel, he started clearing land next to the church to build the graveyard, where he now lies. Above all, De Nisco, whose influence is still strong, preached education.

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IV. THE EFFECT FADES

In the slate quarries and blouse factories, the men and women of Roseto labored to be able to send their children

which they did at a rate far above the national average. By World War II, Roseto had a small white-collar class prospering. And of course with that, life began to change.

Wolf and Bruhn's study took place just as Roseto's golden age of community was drawing to a close. They were predict that Rosetans then under 30 would not long be content with their rigid, traditional lifestyle. By the '70s, outskirts of town were in the suburbanized style that had become the American norm: large single family house pools, fenced yards, country clubs, and churches outside of the community.

As people moved and achieved material success, they found those gains at the expense of traditional communal which they have been raised. One person said, "I'm sorry we moved; everything is modern here and we have ev need here, except people."

The principal of the elementary school said that children's lives changed. They went from days filled with activ of watching from the sidelines. She found she had to teach children how to play jacks and marbles. The stronge that change had come to Roseto was in 1985 when the town's coronet band, founded in 1890, demanded for the be paid for playing at the church's big festival.

As Wolf and his colleagues continued to monitor the health of the community, they noted that social change in was accompanied by increasing health problems. In 1971, the first heart attack death of a person less than 45 oc Roseto.

Nationally, the Americans' vulnerability to heart attack began to decline because of the widespread adoption of programs and healthier diet. At the same time, the Rosetan's rate rose to the national average.

Roseto has lost its statistical uniqueness. Yet, it makes clear to a visitor that it retains a sense of community--on be the envy of almost any place else in the nation. For many families, eating remains a ritual of the communal r here. On Sundays, extra chairs are drawn up and leaves are added to dinner tables all over town for a ceremony both physical hunger and the hunger to be surrounded by people who share our lives.

At Rose's Cafe, the only restaurant remaining in town, proprietor Rose Pavan calls everyone by name. Anyone questions about menu items is swept into the kitchen for a sample. Children, most in Catholic school uniforms, an after-school snack--just as parents did back when Rose's was Mary's Luncheonette.

A visitor is bound to come away from Rose's with a full stomach and even fuller appreciation how far the rest c drifted from the civic-mindedness that marked much of the nation's history.

(My comment: this article is drawn from a series done by The Chicago Tribune on America's loss of communit articles focused on our changing urban/suburban social fabric. They noted the social changes implied by suburt where the garage is in front and both parents are employed, often an hour drive away. This article was especiall medical anthropology's emphasis on bio culture, the interrelationship between culture, health and disease.)

If older Rosetans are concerned that they have traveled too far down the path of materialistic fulfillment--a path never to end in lasting contentment--shouldn't other Americans be at least as concerned?

We now know that people's reaction's to the same stressful experience vary widely and those who have a greate control, support and satisfaction in their lives are less at risk of illness. Those who get sick most seem to view t their lives as unmanageable while those who stay healthy have a greater sense of coherence and control throug the same problems. The Rosetans, to put it in Darwinian terms, were a successful adaptation.

A wide range of illness reflects the role that ineffective coping and inadequate support play. The highest rates o

have been found among isolated and marginal people who have little social support, although they may live in neighborhoods. This article focused on heart disease, others are indicators of social life as well. These include r diseases, accidents, and mental illness. Studies in England have shown that civil servants with the highest rate c coronary heart disease occurs amongst those with little social support. We are indeed nourished by contact with

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V. SOCIALIZING AND LONGEVITY

A study published in the British Medical Journal in 1999 found that people more than 65 who like to eat out, pl to movies and take part in other social activities live an average of two ½ years longer than more reclusive peop mixing with people seems to offer as great a benefit as regular exercise. Social and productive pursuits are equi independent of the merits of exercise.

In a similar study at Harvard, it was found that those who were most engaged in productive pursuits were 23 pe likely to die than those least involved in such pursuits. When each activity was examined individually, doing a l opposed to not much, extended live in almost every case regardless of the activity.

Does humor matter? While it is popularly accepted that laughter speeds healing and fights disease, some resear laughter isn't the best medicine after all. A review of humor research does not confirm a direct therapeutic effect

Does love matter? In a study of 10,000 married men, it was found that-in the subsequent five years-men who fe their wife had significantly less angina that those that felt no love.

People who perceived themselves as socially isolated were found to be two to five times more at risk for prema from all causes. Persons with low interpersonal conflict in their lives do best.

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