

The extra-institutional supervision should include cases dismissed from institutions, so that the defective who has spent many years in an institution would not be thrown out into the world, with a freedom which he does not know how to utilize. In these cases, the supervision would constitute a permanent parole which would be most effective. This provision would enable the defective to be returned to the institution if he did not properly conduct himself in the community.

Such provision for registration of the feeble-minded and for extra-institutional supervision would ensure that those defectives who most need institutional training and protection would be sent to the institutions, and that those who can live safely and happily in the community should be allowed to do so.

The keynote of a practical programme for the management of mental defectiveness is to be found in the fact, which seems to have been proved, that those defectives who are recognized while they are young children, and who receive proper care and training during the formative period, are, as a rule, not especially troublesome after they have been safely guided through the period of early adolescence. Every child automatically comes under the control of the school authorities between the ages of 6 and 14. Every case of mental defect can be easily recognized during this period.

Present methods of health examination of school children could easily be extended so as to ensure and require a mental examination of every child obviously retarded in school accomplishment. It would not be necessary to give every child a mental examination. It would be sufficient to examine only those children who are three or four or more years retarded, perhaps two or three per cent. of the school population.

In the large cities, the mental examinations can be done by special examiners and at mental clinics. The rapid development of out-patient mental clinics all over the country will soon furnish facilities for such examinations in all the large cities.

Rural communities and small towns could be served by a travelling mental clinic, as a part of the state government. This clinical group, or even a single clinician, could examine the backward children over a very large area. A visit to each small town once each year would be sufficient.

Every school for the feeble-minded should conduct out-patient mental clinics at the institution, and in the various cities and towns served by the school.

At the time of the mental examination, the parents could be informed as to the mental condition of the child, and of his need for special training and protection.

Suitable manuals should be prepared by the State Board of Education, which could be placed in the hands of every teacher, especially in the