

local agencies or in a protected environment, a hospital, or an asylum, or a colony. The clinic must become a place of help sought freely and given freely by enough patients to overcome as much as possible the usual unwillingness to accept help in matters of behaviour and conduct of one's mental process. And the clinic must be a place from which the avenues offered by the community be freely accessible. Thus, after all, the clinic is only a part of the organization. It must be able to take in any kind of case. But it needs the convalescent home and training school for habit-training, its mental reformatory, its colony, and its homes for those needing protection; for some of these functions provisions are at hand, for others not.

My ideal is the creation of the clinic as the centre of the mental health work of a sufficiently circumscribed community, provided with helpful adjuncts close at hand, not thrown upon the state institutions at a distance, but keeping its successes and its failures within the district. Even if the primary task is teaching and research, the right kind of teaching is showing how to do things in each case from the start to the finish; and the right kind of research is work with all the facts within reach or sight and the applications practicable. Large complexes like New York may need special provisions, monstrosities to fit a monstrosity. Even a city like Baltimore is almost too large to be taken up as a whole. But owing to the munificence of Mr. Phipps, a start is being made there which will overcome many otherwise unsurmountable difficulties. We hope to take up intensive work or social study of a limited number of districts, facilitate dispensary work by a system of social service work, collaborate with the physicians and existing agencies of the districts, cultivate an ideal that helps, and not merely moralizing and preaching of tiresome rules furnished *ad nauseam* by all the good advisers called in or not called in. Even a moderate number of persons who have learned to look upon medical help as a reasonable process worth their full co-operation will do more than a dozen lectures.

The proper operation of a hospital for intensive work will also have its influence upon the large existing institutions. They are hampered by administrative tradition and lack of adequate support, and sometimes by a certain helplessness coming from lack of opportunities for training. It would be a great satisfaction to become helpful in overcoming difficulties in these directions.

The points that I should like to have you remember are briefly these:

It is eminently necessary to get model institutions in which medical students and physicians can learn how to deal with the many problems of the disorders of the organ of behaviour from their inceptions into all their ramifications. The clinic must do the work for at least one limited district, with its out-patient and social service and consultation department, and with its hospital wards. Everything must be done to make help in mental disorders more acceptable and convincingly helpful. More patients must learn to look to it for help and the organization must be such as to give the patient and the physician and the public at large a conception very different from that to-day associated with insanity. It is not so much the issue of moral help to the curable, but the issue of more work near where the troubles begin, and work against that which breeds trouble. For this we must learn to put the chief weight on hospitals and organizations for natural districts for intensive work rather than upon the mere economy of huge hospitals far away from where the troubles develop.