

even though in humble measure. So long as he does not, through conspicuously bad mating, increase the virulence of his strain in the body politic, and develops no other attitude definitely anti-social, his mental defect is of academic interest only. Such stable types of mild mental defectives are found doing the humble work of the world, and have a distinct value in our social structure. Nevertheless, the State has the right to know and it is its duty to ascertain the exact number of all such types so far as possible, in order that it may record their whereabouts and curb the possibilities of their developing, by indiscriminate mating, geographical foci of mental defect. To this end there is the pressing need of a system of State-wide registration, to be described later.

"The percentage of actual mental defectives in any average community will vary to some extent with the type of tests used, and whether or not the findings of such tests are accepted at their face value or are interpreted more broadly in the light of the general habits and characteristics of the patient's past life. The depth of psychological and psychiatric insight which the examiner possesses will also influence the result to some extent, but let it be remembered that while some figures seem perhaps rather too high and some authorities might question the fact of actual mental defect in such figures, nevertheless the presence of certain symptoms as indicated by failures on tests warn us that the individual has potential economic failure ahead of him. Later failures in real life will be due to inadequate reactions to reality in just the same way as the minor failures of the mental test indicate an inability for adequate reaction, of slight value though it may appear to be. *It is well, then, to realize that while from a scientific standpoint rather high percentage figures are obtainable in relation to mental defect, yet from the standpoint of this Board and the general public it must be borne in mind that all such individuals are not, therefore, destined for an institutional career. The problem, therefore, is not as appalling as it would first appear.* This at once brings us to the consideration of those individuals who will not need institutional care, and yet are recognized as potential failures in the social scheme. They will need specialized advice, constructive assistance, and perhaps occasional periods of treatment. It has been planned to meet these demands in the State system of clinics for mental hygiene."

Sir George Newman, M.D., the Chief Medical Officer of the Board of Education (England), in his report for 1917 touches upon another aspect of the question:—

"This problem of the mentally subnormal child is at its roots an issue which has relation to the whole structure and purpose of the national system of education. For the proper and effective handling of these children now forms an integral part of the educational system, and that national efficiency which is its goal is deeply affected by the training of the dull, backward, or defective child. The question is not one of a few feeble-minded children, here and there, whom the nation can afford to neglect or even ignore. It cannot afford to neglect them, first, because their tendency is dangerously downward; secondly, because they reproduce their kind; and thirdly, because they represent that mass of subnormal children who form the material of our great social problems of incapacity and unemployability.

"The problem of the mentally subnormal child is . . . fundamentally a part of the larger question of national mental capacity, and it should be considered from that point of view. It is not, as is so often assumed, an issue affecting a handful of hopeless children. It raises the whole problem of mental capacity, its maintenance and development; it involves the differentiation of the unsound in mind, the subnormal, the average, the more highly talented. We are only at the