former experience, may hold them in check. Suggestion is specially power­ful with the feeble-minded and it is a matter of the greatest importance what ideas we bring to bear upon them and what ideas we exclude.

No superintendent, physician or teacher in an institution for children, and this includes institutions for feebleminded children, is suitable for his position if he has not this power of impressing upon the minds of the children, by precept and example encouraging suggestion which will direct the mental activity of the child in proper paths; which will build up character, not destroy hope; which will set up active cerebral vibrations that a­waken cerebral areas which sleep in what seems to be a deathlike slumber, causing the mind to unfold and develop, not shrivel up and whither as may be the result of improper suggestion.

I fear we have ascribed too much importance to bad heredity and have taken a too pessimistic view as to the development of feeble-minded chil­dren. Let us remember that there is no marked dividing line between so-called normal and feeble-minded children or between the various subdivisions of feeble-mindedness. There is no such line and since all, or at least all the higher grades of the feeble-minded are susceptible of more or less development there must be the possibility of developing many of the children who come to us to such a degree as to make permanent custody unnecessary. In order to bring about the best results in the development of the children under our charge we must be hopeful of improving them. We must see that all who come in contact with the children give out encouraging suggestions, encour­aging them to greater mental activity. What is of as great importance is to avoid discouraging suggestions which destroy hope? A discouraging suggestion may be a remark made to a child, or about a child in its bearing; it may be the exhibition of, or calling the attention of others to some mental or physical defect within the hearing of the subject.

Dr. Bu Boise, of Bern, in speaking of the great hospitals in Paris states: "At the command of the chief of the staff or of the internes, they (the pa­tients) begin to act like marionettes, or like circus horses accustomed to re­peat the same evolutions. The dream or suggested fancy of these poor pa­tients has been respected, and the exhibition given to physicians who are strangers always follows the same program. The regularities of the phenom­ena observed is due to the suggestion which the physician, either volun­tarily or involuntarily, exercises."

The child with the pernicious habit of "Dervish spinning," echolalia, mirror writing, or who emits a noise which bears a fancied resemblance to the call of some animal, or who repeatedly goes from one grotesque gesticulation to another, is not only on exhibition in the side-show or cheap museum but too often in the hospital, institution or school. If these faulty habits are to be corrected they must be ignored not encouraged and the sug­gestion of more correct habits impressed upon the subject. Improve­ment is not to be brought about by calling attention to the defect but by sug­gesting something better to take its place. Do not permit the child who makes a noise resembling the bark of a dog to be nicknamed "poodle," or permit any nickname which in any way calls to mind any physical or mental defect.

Parents with the best of intentions will tell the physician in the presence of the defective child of all his shortcomings; what a trial he has been at school and at home; the discouraging statements his teacher has made about him; how different he is from his clever brothers and sisters and how they have tried in vain to correct his faulty habits, talking before the child in such a manner as to destroy all his self-respect and suggest the utter hope­lessness of any effort he might put forth.

By making discouraging remarks in regard to the children under their charge and within their hearing, many ignorant attendants, nurses, and I fear, some teachers and physicians give rise to discouraging suggestions which destroy hope, retard progress and actually produce a shrivelling up of the nerve-cells within the cerebral cortex. Impress upon all who have to do with the care of the children that they should never make a discouraging remark in regard to a child within hearing. If nothing encouraging can be said say nothing within the child's hearing even if the child is so defective we do not think he will understand.

The higher and middle grades of the feeble-minded are wonderfully in­fluenced by the suggestions of those who have gained their confidence and in whom they recognize mental superiority. It is almost pathetic the con­fidence and faith with which they accept the statements of those in whom they trust.

The child should, and can easily be made to feel that the physician or teacher or attendant does not regard him only as an inmate or pupil but as a friend whom he desires to help. We should make the child feel that we are so anxious to see him improve that it would be very unkind of him not to do so. When the child feels this bond of sympathy he is already well on the way toward a higher development. Where, between teacher and pupil or nurse and child, there exists this bond of sympathy the child, instead of feeling that he is shut up in an asylum, has a true pride in the institution or school and though, on account of the degree of mental defect, he may not take a place in the great outside world he will at least be lifted up to a higher degree of mentality and self-respect and be made infinitely more happy and useful by the encouraging suggestions imparted to him by those he recognizes as his friends.

DISCUSSION

Dr. Rogers: Mr. Chairman, I think one matter brought out by this paper can not be emphasized too much. We all understand the detrimental effect of discussing the merits or demerits of a child in its presence—the development of self-consciousness. And I think it is perhaps particularly true in our very large institutions that we in a
measure counteract our best work by permitting this. It is not only very difficult to impress upon new people the necessity of avoiding discussion of the children in their presence but we become careless in that respect ourselves. I am very glad Dr. Murdoch presented this phase of the subject.

Dr. Smith: Right in the line of this suggestion I want to mention a little item in my own experience. When I go away from home I endeavor to send a postal card or something to each member of my family of children—I mean our unfortunate family—and I did this on one occasion to a boy about twenty-three years of age. He was considered a very bright boy. In fact he is so bright that visitors calling to see me and entering into conversation with him frequently wonder what he is there for. And I signed this particular postal card sent from the East, "Your Friend, the Doctor." I did not have any thought that I was considered anything but his friend, yet he was so delighted with the idea of "Your Friend, the Doctor" that he took it to all the boys and said, "see, the Doctor signed that postal card, 'My Friend.'" When I came back he spoke of it to me. Ever since that time I have had more attention from him.

Dr. Milroy: I feel just a little out of place here upon the floor. I am a good listener enough and enjoyed the proceedings greatly this afternoon. I want to ask one question if it is not out of place. I am not a resident of Iowa, but I am a near neighbor of this great state and know something of its institutions and laws.

My attention was called, as perhaps that of others, sometime during the past winter, by newspaper reports, to a bill that was introduced into the legislature of Iowa at Des Moines providing for the removal by the chloroform route, if I understood correctly, of certain individuals who are, by officials designated in the bill, found to be permanently and fatally diseased; and also, if I remember correctly, of certain ones that are permanently incapacitated owing to mental weakness. And it seems to me, so far as the people are concerned with whom this association is more particularly occupied, that the two things are in line. That is to say, the authority of the law to prevent defectives being born, and the authority of the law to put them out of the world after they are born.

Dr. Milroy: Is there any authority in law for such a proceeding?

Dr. Rogers: Only the authority that any surgeon has by reason of his professional knowledge and judgment.

Our foreign brethren are absolutely unable to comprehend the propriety of discussions on this subject and they ignore them wholly. In a number of instances there has been an effort made to have the association commit itself to some general policy, but so far they have been unable to do that.

Dr. Mogridge: In connection with that, if all the feeble-minded children that we have in these institutions in the United States were wiped out of existence, there would be another crop of feeble-minded children in a few years to care for.

Dr. Fernald: In your institution I venture to say that not five per cent of your inmates are the children of feeble-minded persons. On the contrary, the parents of your children as you see them, fairly represent the population of your state. They are from all classes of society. I think we all agree with Dr. Johnson in his very forcible presentation of his topic. But that is a matter which not to be settled by act of parliament. It would be impossible to discharge today seventy-five per cent of the inmates of this institution, had an illustration last week. An Italian mother whose child
had been admitted recently, appeared with an Italian lawyer and the
Italian consul and a retinue of friends to demand the discharge of her
child. I said, "You may take him now," and she took him out on
the lawn, looked him over and begged for his re-admission. She
merely wished to know that she could have the boy. It seems to me
that that illustrates our situation. I was impressed by Dr. Johnson's
problem as to what he should tell the father of that boy. It would be
a brutal thing to destroy the father's hopes in regard to the possible
development of the child. It would be a needless injury to the father's
feelings and if you were entirely frank he probably would take the boy
home, and the boy would be deprived of the only development that is
possible.

It is impossible to keep a certain proportion of our patients in the
institution. A certain number of these cases are bound to be taken
home by the parents or friends. They cannot be retained. I believe
we weaken our position by insisting that some sort of a dragnet must
be put over the community and every defective forcibly taken away and
supported and maintained by the state. It should not be necessary for
us to explain that there is no desire on the part of the managers of in­
itutions to advocate forcible, life-long detention for the majority of
feeble-minded persons. The permanent care of the majority of feeble-
minded persons becomes a necessity as the result of the death of the
father, or the mother, or of friends.

Mr. Thomas: The question, as this gentleman tells us, isn't how
large a percentage of the feeble-minded is due to parents, the question
it seems to me is, what are the offspring of the feeble-minded?
Are they not practically all feeble-minded?

Dr. Rogers: If both parents are feeble-minded, yes; but fre­
quently one only is so and this modifies the stock.

Mr. Thomas: Up in our little school we have two feeble-
minded mothers who have four or five children. Now it seems to me
there is the whole question—the disposition of feeble-minded paren­
tage. I believe the feeble-minded are like the Kentuckian's description
of whiskey. One fellow said, "This is awful bad whiskey;" the other
responded, "Oh no, my friend, you are mistaken, all is good, but some
is better." We are all feeble-minded, but some are more so. If it is
practically true that feeble-minded parents have feeble-minded children
that settles that question of their control.

Dr. Wilmarth: I do not recollect at this time that I have ever
seen feeble-minded parentage that produced other than feeble-minded
children, and I have seen feeble-minded mothers, many of them, whose
children were all feeble-minded.

Dr. Rogers: There have been mothers of children in our in­
itution who were markedly feeble-minded while the children were
much brighter—bright enough to be classed in higher grades than
other children. However, that does not interfere with the general
proposition that we are all inclined to house and protect the individuals
in whom there is a tendency to reproduce defective offspring, or to
establish families of a lower grade of mentality. But the marriages in a
community, as a rule, are almost never between feeble-minded. The
feeble-minded party to the union is the mother, but in some of these
unions the disreputable fathers are bright men but morally depraved
and their children are often quite bright. That does not lessen our
duty to protect the woman from just such relations. That is what we
are all trying to do.

Mr. Thomas: Well, what I wanted to say was that it seems to
me clearly to be our duty to set a standard where people should enjoy the
privileges of life, marriage, motherhood and parentage and all that, but
if there is a likelyhood of having feeble-minded people to care for as a
result, it seems to me it is not only our duty but a kindness to prospec­
tive parents for us to interfere. I do not believe we can be too careful
on that line.

Dr. Wilmarth: And to the unborn children.

Mr. Thomas: Yes, certainly to the unborn children. I think
it is the duty of the state to anticipate such results. Now these
women in our institution who have children there, could go out and
earn a living all right. They could get three or four dollars a week
for domestic work, but you see they would be back in greater numbers
in a year or so. There is the trouble.

Dr. J. K. Kutnewsky: I am in the kindergarten in this line of work
and do not want to attempt to impress my views upon the older members,
but Mr. Thomas spoke about certain feeble-minded parents and chil­
dren we have. The family shows that there have been feeble-minded
children for several generations back. We had an application for the
father and mother and the three children but before the applications
were approved and we got around to receive them, the father, fortunately or unfortunately, died and lessened the number by one. But the history of that family is that the father and the mother were both feeble-minded and the father has a brother that is feeble-minded. Information from friends of the family showed that for several generations back there were feeble-minded children in the families. If the tendency is upward there must be something to raise the standard. Possibly one parent has a stronger constitution than the other and is mentally higher than the other. And some of the children—it is so in all animal life—some of the progeny will take to one side of the family and some, to the other.

Dr. Rogers: Now we do not know very much about the laws of heredity. I believe thoroughly, directly to answer Dr. Mogridge—which I think Dr. Fernald started out to, but did not finish—if every defective child in the institution and in the state and in all the states around about us were killed, absolutely disposed of, and no others brought in from other states, in a few years we would have practically the same percentage we have now of feeble-minded. Because the majority of cases come to us from people who are not only normal but very often brilliant. In fact, we are apt to have a feeble-minded person come to us from a family where one parent, at least, is unusually brilliant. If you will look over the community you will find a feeble-minded person in each of many of the best, most highly educated and refined families of our land. Now there are cases just as recited by Dr. Kutnewsky and Mr. Thomas.

Miss Gundry: A very short time ago, in looking up the subject because I had been asked, I found I had children in my institution whose parents were very distinguished people—justices of the supreme court, United States senators and consuls in foreign countries and people of that sort.

Dr. Mogridge: In Iowa we have a law which permits the annulment of the marriage where a person at the time of marriage was incompetent to enter into a civil contract. I would not be surprised if there is such a law on the statute books of every state. We have a child in this institution whose parents were both feeble-minded. The matter was brought to the attention of the county attorney and the marriage was annulled. They were separated, and they have been kept apart since. We have the child here, however, as a result of the marriage. That is as far as the state of Iowa has gone in the enactment of laws to prohibit the marriage of people affected, but it is certainly in its effect as prohibitory as any other law would be.

Dr. Heinsheimer: I would like to ask as to the best information concerning the percentage of feeble-minded resulting from the marriage of relatives. I would like to hear a little on that.

Dr. Wilmarth: I think that has been looked into a great many times in these institutions and the percentage of consanguineous marriages has not been large. It has not the vital importance that is sometimes attributed to it. If there is mental weakness in a family it should not be increased by inter-marriage. I do not think the statistics show any bad effects from inter-marriage in healthy families.

Dr. Murdoch: The result in those cases is that if there is a mental or neurotic defect it will be increased by doubling up of that special defect. If the parents are normal, if we can imagine two perfectly normal individuals marrying, no matter what their relationship may be, their children will be normal. It is not the fact that they are related, but because they have neurotic tendencies in the same direction that produce defective offspring.

Dr. Rogers: My impression is that the average consanguinity in the cases reported is less than six per cent and that does not necessarily mean that consanguinity causes the defect.

Dr. Murdoch: In that connection it would be interesting to know
what per cent of the parents of children in the public schools, for instance, are related. We would have to have two sets of figures to draw a reasonable conclusion.

Dr. Mogridge: Yes, in order to establish anything from that, we would have to know what the entire percentage was in a particular community.

Dr. Johnson: I am glad that so much discussion came from the papers. A3 I recall it, we have four children at our institution from one family in which the mother is distinctly feeble-minded, and so are all the children she ever had. I am led to believe that is practically the condition that you may look for all the time. When Dr. Milroy asked the question in regard to chloroform and one thing and another, the thought came to me that it is remarkable how ready the physicians that visit our institutions are to give us advice in regard to a number of our very low grade children. I remember a year ago when the Nebraska State Medical Society met in Beatrice and I invited a number of the physicians out to our institution, that, after looking through some of the worst classes we had, one of the physicians—a physician I have known a great many years and who had practiced medicine for forty years—remarked, "Doctor, do you want me to suggest a sure cure for those cases?" I said, "yes." He replied: "Two grains of morphine hypodermically." I asked him if he cared to administer the dose. "No," he said, he did not care to. But in all seriousness most of the physicians that have visited our institution have said in substance that it is certainly too bad these children have to live, and we ought to put them out of the way, either by morphine or by the chloroform route or some other route.

Dr. Mogridge: They do not like to be the executioners, however.

Dr. Johnson: No.

THE SEGREGATION AND PERMANENT DETENTION OF THE FEEBLE-MINDED.

A. JOHNSON, M. D. BEATRICE, NEBRASKA.

SUPPOSE an apology is due on my part for trying to present a few thoughts on a subject that is so well known to every member of this association. I believe that every member will agree that the segregation and even permanent detention of at least the great majority, if not all of the feeble-minded, is the proper procedure. On the other hand, when you and I discuss this matter with parents or friends having children at an institution, or who are about to bring their loved ones, we find that we do not always display good judgment if we present this matter too forcibly.

Imagine, if you please, a father bringing his boy at the age of eight or ten years to your institution. In the father's mind, he is a very dear little fellow and, aside from the fact that he was a little late in cutting his teeth, talking, and even walking, the father can see little that is wrong with the boy. He expects him to be educated and trained in a general way so that he will become not only self-supporting, but a useful member of society, marry, and perhaps have children of his own. It has been a great struggle on the part of both father and mother to decide to give up their child and place it in the hands of entire strangers. And, if the above referred to results could not be obtained or at least reasonably expected for their child, they would rather keep him at home.

You look the boy over hurriedly as the father must have your opinion before he leaves the institution and, although the father thought his boy as nearly normal, you find that he is small for his age, that he has large, thick lips, with mouth open a great deal, thick tongue, abnormally large ears, and a head that is rather flat and narrow through the temples, but the forehead is very prominent; he talks quite a little when he feels like it, but is often stubborn and will not talk at all. You learn from the father that the boy did not begin to cut his teeth until he was about a year and a half old. He did not walk until he was three years old, and that he was very slow in talking. He has not been to school a day in his life, neither has he been to church or Sunday school. What are you going to tell the father you can do for his boy? It certainly would not be wise at this time to tell him that his boy would have to remain in your institution all his life, and yet, by the experience you have gained from so many similar cases, you know that, in all probability, the child will never develop so that he will become not only self-supporting, but a useful member of society, marry, and perhaps have children of his own. It has been a great struggle on the part of both father and mother to decide to give up their child and place it in the hands of entire strangers. And, if the above referred to results could not be obtained or at least reasonably expected for their child, they would rather keep him at home.

While it may seem strange to some of you that a subject of this nature should be presented at this meeting, I am of the opinion that it can be discussed with profit by this association, for we must remember that many people do not believe as we do in regard to this question and it occurs to me that no one is better qualified from personal experience to present this matter to the people at large than we who are devoting our entire time to the care, training and developing of the feeble-minded.

*See preceding discussion.
school for feeble-minded has long been obscure; of the first one hundred people met upon one of the streets of any of our cities, probably ninety would not know there are such people as the feeble-minded and, possibly, only one of the remaining ten would really know anything of them, and yet, one in every five hundred of the population is feeble-minded, and there is hardly a line of thought into which the feeble-minded person does not enter, either as an object of love in its truest sense, a spur to greater endeavor, a subject of scientific research, a drag upon the progress of a community, or as a positive menace to society."

If what I have just quoted from Prof. Johnstone's paper is true, and I believe every word of it, it is time the public were informed of the condition of affairs and I believe that this should be the mission of this association.

Under this head I would like to include not only the feeble-minded in general but the epileptic as well, for I believe it is quite accurately estimated that of the total number of epileptics, sixty-eight to seventy per cent are either imbeciles or idiots. Only about two per cent are normal and the remaining difference is made up of insane and disagreeable persons in general. In fact, they are the people that should not only be segregated but permanently detained at an institution.

The question of segregation of the mentally incompetent and epileptic has been in the minds of many people not only in our own country but abroad, for many years, and a great deal along this line has been accomplished since the days of Drs. Itard and Seguin in France, who, I believe, were the first to undertake the education of the idiot. In our own country, the principle is firmly rooted in the minds of many of our people that it is not only a privilege but a right that every child should be accorded means for the full development of all his faculties and that this principle applies not only to children born of strictly native parentage but to all feeble-minded alike.

The work of segregation and state care for the feeble-minded has extended so that, if I am not misinformed, there are now twenty-six public institutions for the feeble-minded in twenty-one different states. I am very glad that so many of our western states have recognized the necessity of caring for their feeble-minded, when some of the eastern states that are much older as well as much wealthier, have seemingly neglected their duties in this respect.

The rapid increase of this class, together with the knowledge that has been gained by the study of heredity and nervous diseases in general, have made it clear to those engaged in the work of caring for the mental defectives that it is necessary for the public safety to cut off the supply. This cannot be done by segregation alone; hence, permanent detention must be resorted to. We have learned by experience that the great aim of our work is not cure, for that is impossible. We cannot cure that which is a defect not a disease. The term cure as it is generally understood does not apply to the mental defectives.

As far as I have been able to ascertain, practically all those engaged in the work of caring for, teaching and training this class, are of the opinion that none of those discharged are capable of self-support in all that the term implies. They never become fit for full citizenship although they may be capable of doing many things quite as well as a normal man or woman. The higher powers, intellect, reason and judgment always remain markedly and noticeably at fault, and without intelligent and kindly supervision they inevitably become dependents or worse.

In a paper written by the late Dr. Powell on the care of the feeble-minded, he says: "The specialist of today has virtually abandoned the belief that the school-training of the imbeciles can ever develop and restore them to safe citizenship. We do not now regard the school-training of the feeble-minded child as an ultimate aim and end, but as the education of the normal child is only preparatory to a participation in the activities of life in the great world, so we propose by similar means to prepare the mentally weak for the exercise of their limited activities in their circumscribed world—in the institution life—after the preparatory period is past during which each one is fitted to fill his niche according to the degree of his ability."

Mr. Alexander Johnson in his report of the committee on Colonies for Segregation of Defectives, read at the conference of Charities and Corrections at Atlanta, Georgia, three years ago, said among other things: "It has long seemed to many people that the wisest course the state can take is to separate all true degenerates from society and keep them in carefully classified groups under circumstances that shall insure that they shall do as little harm to themselves and their fellows as possible, and that they shall not entail upon the next generation the burden which the present one has borne."

A minority report was presented by Mary E. Perry and as I believe this report to be very important, I shall take the liberty of quoting it also: "While agreeing in the main with the report as presented by the chairman, I take issue with him in thinking the millenium must come before we are able to put a stop to the fast increasing population of the epileptic and feeble-minded. I believe the remedy is largely in the hands of this conference and instead of reporting annually the statistics and the facts about these people, it would now be well to prepare our several states to call to their assistance the surgeon's knife to prevent the entailing of this curse upon innocent numbers of yet unborn children. It is time we looked this question squarely in the face, and as it is humane, so it is righteous, if resorted to for the sake of the child."