a committee to authoritatively decide upon and publish in medical journals and dictionaries the meanings which the various terms connected with mental defect shall properly have and hold.

The next main point is that after definition comes the need, which is just as great, for the clear determination of the methods of diagnosis. It is easy to see that the two things, definition and diagnosis, must be inextricably mixed up in any logical classification of the subject. Definitions, like diagnoses, must be upon a dynamic basis—if a person has this or that capacity he belongs to this or that class. Since the work of the ardent anthropometrists has fallen so flat, at least in this country, we have ceased to judge by external signs and it is clear that the psychologists who are attacking the most vital problems of human nature must come to the rescue. They must step in and formulate methods for the evaluation of mental capacities. Diagnoses like the Royal Commission definitions, based on what the individual can ultimately or under the most favorable circumstances do for himself, will not suffice in making of the immediate estimation which is necessary for court work. Of course, I know very well the beginnings which have been made in this country through the limited use of Binet's findings of what a normal individual can mentally accomplish at successive ages of childhood. I would urge upon you that psychologists should work with practical institutional men everywhere in an endeavor to try out these tests and add to them or alter them for the purpose of standardizing a measuring scale of human mental capacities which will be ready for use by any one with competent training who may need to pass judgment on mentality.

We know from many signs that the legal profession is waking up in these matters and probably, if authoritative material were offered on these points for its consideration, would shake of its "dogmatic slumbers" and rejoice in clearer formulation of its problems. One of the best signs of the times is the organization of the American Institute of Criminal Law and Criminology, which is looking forward to the results of just such
work as I urge upon you. I bespeak your hearty co-operation with that Institute and its scholarly journal.

You have asked me to this conference to address you upon the relationship of the mental defective to legal procedure. I come full tilt at you in return and insist that there will be very little betterment in the inconsistent and often deplorable situation until you yourselves, as authorities, appoint a commission of your best men to define your subject and to determine and evaluate generally usable diagnostic tests. You should do this for the development of your own science and on the other hand there is a deep need of it in educational circles and especially in the criminal courts.

DISCUSSION

Dr. Rogers: One point in connection with Dr. Healy’s paper: I presume we all have been up against this proposition of inability to punish crimes against feeble-minded girls, because of the lack of proper testimony. I have in mind three cases that came to my knowledge during the last four years. In one case it was well known that the crime had been committed but both the county attorney and the assistant attorney general advised against action because the only definite incriminating testimony would have been that of the feeble-minded girl. She afterwards gave birth to a child. In another case which was recently tried for rape in a city in Minnesota, the defendant pleaded guilty and the testimony as to the mental status of the aggrieved person was based upon the fact of a previous admission to the school for feeble-minded and a medical examination of the girl at the time of the trial. Her attendant at the school, upon cross examination, admitted certain industrial capacity, which, while very limited, was made so much of by the defense, that the jury was confused and finally disagreed and the case was discharged. On a re-trial, at my suggestion, a different plan was followed. The early his-
tory of the girl was brought into evidence upon the testimony of the people who knew her in childhood. It was shown that she was not able to attend school because of mental deficiency and her incapacity as compared with other children was easily shown. I then took the stand and testified as to her mental capacity, as shown by such testimony. The jury rendered a verdict accordingly. This is the only way that the mental deficiency of the borderland cases can be shown at the present time to the satisfaction of laymen. A system of psychological tests that are approximately sound and correct would be a wonderful help in medical jurisprudence, when such cases are before the court and these are the cases that are most apt to be involved in criminal trial for sexual offense.

Mr. Butler: I want to express my appreciation of the facts that were presented by Doctor Healy and of the important conclusion which to my mind he brought out. Those of us who see mental defects in their various stages and under different conditions realize, with all their good work, how inadequate the various branches of public institution work are. To my mind, all of these great institutions that are caring for public wards are but branches of one whole; they are all institutions of the state for the treatment of those who are there. They are also educational institutions. I feel that the public does not recognize the scope of these institutions. It does not make any difference whether we consider a school for the deaf, or for the feeble-minded; a hospital for the insane, an industrial school, reformatory or prison; the whole question is an educational one. Taking one or two points to which Doctor Healy referred: I remember, very well, when an officer, on a trip to a certain prison, brought with him two men tried at some term of court, convicted and sentenced. Both were insane. Probably they were at the time they committed the offense. Both remained in the institution during their term and were discharged. I recall a man in a certain prison, in this country, who was tried and sentenced for rape. He served his term and was discharged. He was insane when received. Eleven days after his discharge,
was returned for committing another offense of the same kind and he is still in that institution. We know that in all of our institutions for the treatment of offenders, whether they be institutions for young men, young women, or prisons for older persons, a very large number of the population are defectives. In one institution, a reformatory of which I know, there have been two murders of one inmate by another within the last three or four years. In each instance the assailant was feeble-minded. We find great difficulty in all our cities in disposing properly of these cases. Before the courts there seems to be no place for these persons, unless they are insane. The only possible chance is to have them committed to a correctional institution. In some of our institutions we have had very intelligent men, both as superintendents and as medical officers. Some are unusually expert and have great ability and a desire to advance science. It is well known that at the New York state reformatory at Elmira, when Dr. Wey was the medical officer and Professor Bates, a well known specialist, was principal of schools, Mr. Brockway had a very careful test made of the population. By referring to records we find that more than twenty per cent. of the prisoners were mental defectives and the population of the Elmira reformatory has run many years from twelve, to fifteen hundred. Most of our American statistics on these subjects are worthless, but I think the figures from Elmira will stand. I have checked up many thousands of inmates in the Indiana institutions and compared them with New York, but find very few discrepancies. I believe that Doctor Healy has given us some very helpful suggestions in the way of determining who are capable of self-control and who are not; in suggesting definitions which can be used, and also in taking a census of the mental defectives of a state. In that connection, Dr. Davenport's paper comes along the same line. I am very glad to hear him refer to the necessity of some sort of care and control of the feeble-minded women. In some of our states, feeble-minded women under forty-five years of age are made public charges and it is interesting to note results. I recall five feeble-minded poor asylum inmates. These