economy in construction rather than economy in administration. A reversal of that rule would be beneficial. Proper construction cannot be had for less than $300 per inmate, but it need never exceed $500 per inmate.

Poorhouses are built to meet a distinct need, the humane and reasonably economical care of people who cannot be provided for by themselves or by their near relatives. The mere provision of room for a given number of people will not answer. The construction of a large farm house will not meet this need, and in the purchase of a poor farm it is better to select a site whose buildings are valued low, because experience has proved that buildings previously constructed cannot be utilized to advantage as a part of the main building.

Each department should have its separate stairway to the second floor, and the men's and women's departments should each be provided with an ample day room or sitting room, and there should be a smoking room for the men. The infirm and querulous character of the inmates makes it important that there be a classification. In small poorhouses it is desirable that no dormitory contain more than four or five beds, and it is better that provision be made for most inmates in rooms having but one or two beds. Single iron beds are preferable. Double beds should never be used. It is very desirable, and effects a considerable saving in administration, if the ground floor have three or more sunny rooms which may be used by the infirm patients.

A broad covered porch is useful for inmates in inclement weather, and a deck over its roof will be useful in airing bedding and in house-cleaning. Fire escapes should be provided. A general rule for the division of floor space has been suggested as follows: For each inmate in the dining-room, 15 square feet; in the day rooms, 30 square feet; and in the bed rooms, 45 square feet, when they are occupied by four or more persons, and at least 56 square feet for one person.

Among the chief requirements are good-sized, properly heated and ventilated bathrooms, with plenty of hot and cold water, good roll top enamel bathtubs, or still better shower baths, with shoulder sprays for the women.

Heating and ventilating are correlative. Unless the heating apparatus in such buildings is effective, the ventilation must necessarily be imperfect, because the class of people occupying them are particularly insensible to the presence of bad air, and will shut their windows at all hazards to keep warm. Uniform temperature is most desirable, and very difficult to attain, unless great care is used in the means of creating it. The importance of light for health and cleanliness is beginning to be realized, and no place outside of an actual hospital requires more light than a poorhouse. The windows should be of good size, numerous and well placed.

The similarity to a hospital leads easily to the conclusion that a simple and adequate scheme of ventilation is essential. Every room should be provided with some plan that will insure the natural removal of foul air. The plan of ventilation should be such as to be effective and so simple as to be practically self-operative.

I do not know that an attempt has hitherto been made to present a series of stereopticon views representing poorhouse construction. The subject is not inviting from an artistic standpoint, but it is intensely practical. Permit me to present views showing the exteriors and as far as possible the interior arrangement of the poorhouses in Becker, Fillmore, Goodhue, Hennepin, Lyon, Nicollet, Olmsted, Otter Tail, Pipestone, Ramsey, Rice, Rock, Wabasha, Washington and Winona counties. That in Becker county is nearest perfect, and the best poorhouse of its size within my knowledge. The collection also includes model floor plans for a poorhouse for forty and for fifty inmates re- [illegible] county insane asylum, which is

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REPORT OF COMMITTEE ON CARE OF EPILEPTICS.

Your committee to whom was assigned the duty of promoting a move- ment for a larger provision by the state for the care and treatment of epilep- tics beg leave to submit the following report:

Our purpose has been, first, to ascertain, if possible, the number of epi- leptics in the state; second, to consider what is being done for epileptics in Minnesota; third, to ascertain what, according to advanced ideas and mature experience, is most conducive to the improvement of epileptics as individuals, along the lines of good public policy; fourth, what, taking into consideration all the circumstances and the information we have been able to obtain, should Minnesota do in addition to what she is doing for this class.

Under date of Sept. 15, 1899, the superintendent of the school for feeble- minded sent out 1,525 circulars to the physicians of Minnesota, requesting a report as to the number, sex, age and mental condition of all epileptics under their care, or known to them. A blank prepared for convenient record of such data and a stamped and addressed envelope were inclosed to each, to insure reply. The numerical result of this inquiry has been given to this com- mittee. Five hundred and seventy-six responses were received during the year, giving more or less complete data concerning 949 epileptics—446 males and 326 females, living with their own families or friends, besides the num- ber in the institutions. Of the latter, there are 145 in the hospitals for in- sane, 32 in the St. Paul city hospital, and 167 at the school for feeble-minded. Thus the total number reported was 1,116.

The difficulty of obtaining full information upon such subjects is well known. The fact that only a little over one-third of the physicians to whom the inquiries were addressed responded, and the additional fact that many cases of the mild form of the diseases do not go to physicians, are strong presumptive reasons for believing that the figures given do not represent even a majority of the epileptics of the state, and that the rules usually ap- plied by statisticians, of estimating about one patient to 600 people, which rule would give Minnesota about 3,000 epileptics for a population of 1,751,39 people is not thus far out of the way.

WHAT IS BEING DONE FOR EPILEPTICS IN MINNESOTA?

Epilepsy is very closely allied to insanity and feeble-mindedness. The- are many persons with this disease who have bright minds and who perfo- their duties in life with ability and conscientiousness. Some of the worl

great geniuses have been afflicted with the disease, and yet about ten per cent of all epileptics become insane, and the general tendency of the disease is to cause mental deterioration, the degenerating process being generally commensurate with the severity and frequency of epileptic seizures. In any aggregation of epileptic people such as are found in the epileptic colonies a very large majority are distinctly and noticeably below par mentally. At the Craig Colony, New York, for instance, about ninety per cent of all the patients are mentally deficient to the extent of being unable to become self-supporting.

It is thus natural that the hospitals for insane everywhere should receive many such patients, and that the institutions for feeble-minded should be sought by the parents and friends of epileptics, children especially, as homes for the latter.

As stated above, about 145 were reported from the hospitals of Minnesota, and they are about equally distributed between the three large institutions of St. Peter, Rochester and Fergus Falls.

Contrary to the rule of exclusion usually attempted in institutions of like kind in this country, the school for feeble-minded at Faribault is required by law to recognize epileptics as eligible to admission therein. The board of directors early recognized the necessity for special provision for them, and in February, 1897, organized a department for boys, and in June, 1898, a department was opened for girls. They include separate day, sleeping and dining-rooms, and in the case of the boys there is a separate dietary. To some extent the school training and shop employment are common to both the epileptics and feeble-minded; of the 167 epileptics at Faribault, ninety-seven are thus separately provided for. The others are of such extreme mental weakness that they are still cared for with other children of like mental condition, regardless of their epilepsy.

On Saturday last, September 29th, the corner stone was laid of a substantial building to be used for the home of a colony of thirty epileptic men who will be employed in farming and gardening. It is situated about one-third of a mile from the main building on the institution farm. A small frame building near the institution, formerly used for detached hospital purposes, is being refitted for a class of twelve boys, who will be largely employed in the shop and upon the grounds of the central building. The rooms now occupied by the epileptic boys and men of all ages will be used by the little fellows who require more school training. These changes will increase the capacity at Faribault to about 150 epileptic patients to be separately provided for.

WHAT IS THE BEST THAT CAN BE DONE FOR EPILEPTICS?

The experience of the medical profession is unanimous as to the very limited number of epileptics curable, even with the best known methods of treatment. From six to ten per cent is the highest estimate of cures even the most optimistic venture to claim. The utter isolation of most chronic epileptics from the ordinary pursuits of life and its social opportunities is well known to all persons who are at all familiar with this disease. This matter was vividly portrayed to this conference last year, at Duluth, by Mr. Hart. These two facts of limited curability and the incompatibility of the life of an epileptic with that of the ordinary family, both as relates to the

welfare of the patient himself and the comfort of the family, have led to the evolution of an institutional system for epileptics.

This is known as the colony or village plan. The colonies are the small groups of companionable patients, separated far enough from other groups to avoid the irritation that close contact would involve, and to carry out so far as practicable the idea of small family homes. The entire collection of colony groups, together with the administrative buildings, schools, shops, storehouses, hospital and chapel, with their corps of administrative medical and clerical forces, form the village community.

As to the advantages of the colony plan, your committee begs leave to quote the statements of experienced observers (Dr. Kölle in Letchworth's "Care and Treatment of Epileptics," pages 50-51):

"It has ever been an especially difficult task to train sick children properly. In the family circle it is often impossible to accomplish this end in the case of epileptics. A clear understanding of the physical condition of the child is, above all, necessary; and how many parents, however well educated, can fulfill this requirement? It might prove no more advantageous for the child if the directions of his training was given over to the family doctor, either in whole or in part. The troubled parents indulged the little patient in many ways for the rule given them for guidance is, 'on no account, any excitement.' Yet epileptics, more than all others, should be strictly brought up. The so-called epileptic character, with all its repulsive sides, must be combated by carefully planned methods of training from earliest childhood. Experience teaches that this is possible. There are very attractive, even charming, characters among epileptics, when the disease has not wrought too great ravages of mind and soul; and there are, on the other hand, epileptics with a milder form of disease who are unbearable; who are disinclined to any work; who are moody, obstinate, suspicious and selfish,—in fact, classical types of egoism. The causes which have operated to produce such a character are easily comprehended. Each attack makes the patient wish to find means to prevent the next,—makes him introspective and desirous of managing himself in his own way.

"It is easy to see that an institution has various means of training at its command to facilitate the work of education. In it the child becomes accustomed to regularity from morning to evening, without effort. Arising, dressing, washing, eating, going to school, working, playing, all have their appointed time of day. A child who was disobedient at home obeys the command of the institution bell and learns to carry out the daily program without dispute. The association with other epileptics can in no way be deemed disadvantageous. It may happen that a specially sharp cry coming from one patient overcome by an attack may so frighten another as to cause a convulsion to occur in his case as well, but such a point is insignificant in comparison with the drawbacks entailed upon an epileptic by home life. It sometimes has a good educational effect for an epileptic to see attacks in others. The first impression is necessarily very depressing, but he comes to the healthful comprehension of how much those who care for him have to bear in his own case. Modesty and gratitude are thereby aroused in him, instead of the traits which form the epileptic character. In some forms of this disease he is incited thereby to combat and suppress certain kinds of attacks. It is a pretty outgrowth of the community life of epileptic children,

that, as soon as one is overcome by an attack, the others hasten to his aid, and lay him tenderly on a mattress. If we remember how epileptic children outside of an institution are avoided by others in the schoolroom or at play, and think of the happy times which such children have together in institutions, we come to believe in the saying, 'No one is happy save in the company of his own kind.' As soon as an institution has acquired the suitable tone for its sick children, and the proper atmosphere is felt within its doors, the casual visitor will, with a few exceptions, see happy faces and often hear merry songs.

"The means employed in the colony system to cure, to educate,—intellectually, morally and industrially,—and to teach self-support are so intimately interwoven that they must be considered as one, and all at the same time. When they enter the colony the patients' education should be begun along two lines,—one to give them a common school education, the other to put a means in their possession whereby they can become producers as well as consumers, and at the same time become themselves the effective agent in the application of a remedy of untold value in the treatment of their disease.

"Nothing tends to build up the epileptic so rapidly as congenial, healthy employment, especially that out-of-doors, where the sunshine, fresh air and surroundings of nature draw his mind from himself and his disease, and inspire within him mental activity and hopefulness in the place of despondency and gloom. Among the various kinds of employment in which it has been found practicable to engage epileptic patients may be mentioned as first in importance that afforded by agricultural and horticultural pursuits. The benefits derived from the cultivation of fruits and garden products cannot be overestimated. Besides the immediate physical benefits to be derived in recuperating or building up the general health of the epileptic, the labor involved in such occupations furnishes an abundance and variety of those kinds of food most desirable in the treatment of his disease. The care of stock and the dairy affords much to be desired in the way of health-giving labor. If the property of the institution includes a bed of good clay, brick-making is an industry that should receive early attention, and the cost of buildings may be lessened by using brick made by the patients, aided by skilled assistants and brick-making machinery. If there is a good stone quarry on the place, it should be early developed for the same reasons. Carpentering, blacksmithing, the making of tinware, painting, tailoring, brush-making, printing, and bookbinding are indoor occupations that have also been followed with advantage.

For women, light garden work, the care and cultivation of fruits and flowers, nearly every kind of domestic work, including washing, making and mending wearing apparel, knitting, and fancy needlework, may be mentioned. At Bielefeld some thirty different callings are followed by the men and women patients.

These and similar observations, from other unquestioned authorities and experienced workers among epileptics, afford undeniable evidence of the necessity for regular colony institutions for epileptics.

WHAT SHOULD MINNESOTA DO FOR HER EPILEPTICS?

The consideration of the care of insane epileptics does not concern your committee at this time, as they represent a hopeless class, whose care is practically identical with that of other chronic insane: it being understood, of course, that they should not be associated with the acute insane, to whom their presence is very detrimental.

The epileptic children of the state are being cared for and trained at Faribault, so far as the capacity of the institution will permit, along lines that are in harmony with colony ideas, and without material detriment to the interests of either the epileptic or the feeble-minded; but in the opinion of your committee the time has arrived when the state should provide more generous accommodations for the former class than it has so far done. The older states of New York, Ohio, Massachusetts and New Jersey have established separate institutes for epileptics. In California, at the school for feeble-minded, with nearly 2,000 acres of land, it is proposed to colonize the epileptic on the same estate.

It is the opinion of your committee that the coming legislature should be urged to take steps looking towards a more generous provision for the state's epileptics, according to the colony idea, at the earliest possible date consistent with a well-matured plan for the same, which might be proposed and developed by a commission appointed by said body. It is the recommendation and earnest desire of your committee that the members of this conference through their representatives in the legislature use their utmost influence to this end. Respectfully submitted, W. W. Folwell, C. E. Faulkner, W. B. Douglas, T. C. Clark, C. E. Riggs, A. C. Rogers.

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DISCUSSION.

CAPTAIN FAULKNER: Mr. President, Ladies and Gentlemen: At the conference last year a committee was designated to consider the needs of the epileptics and to make report to this conference, the committee consisting of the honored president of the conference, Dr. Folwell, Bishop Gilbert, Attorney General Douglas, Dr. Clarke of Stillwater and myself. As you are aware, Bishop Gilbert passed away,—a man who was in hearty sympathy with the cause of these unfortunate people,—and Dr Riggs was appointed to fill his place. I may say that it was through the zeal and the courtesy of the honored superintendent of the school for the feeble-minded that the committee are indebted for so much of their information and are able to make this report which is submitted to-night.

PRESIDENT FOLWELL: Three thousand epileptics in Minnesota! Something ought to be done right away. What may be done,—one of the plans,—we shall learn about from what Dr. Riggs will say to us.

DR. C. EUGENE RIGGS, St. Paul: Mr. Chairman, Ladies and Gentlemen: I should like to preface the few remarks I shall make by emphasizing what Captain Faulkner has said with reference to the great work that has been done along this special line of altruism by Dr. Rogers. The medical profession of the state have felt for years that we should follow the example set us by other states which have been more speedy in taking up this work than we; and, as has been said, had it not been for Dr. Rogers' earnestness and desire, born of a kinder spirit than simply that of scientific progress, we should be just where we were five years ago. In my reports to the governor for the past five years I have urged that some special action be taken to provide proper care for epileptics.

From the earliest periods epilepsy and epileptics have been known both to the profession and the laity. Hippocrates devoted a special pamphlet to epilepsy, and Origen, a noted writer of the church, and one of the early fathers, was ingenious enough to suggest that Paul's "thorn in the flesh" was an expression of epilepsy. Epilepsy was very greatly dreaded by the

Romans. It was called the "comitial sickness," because if, in any assembly, it mattered not how important, or what issues of state were involved, anybody happened to have an attack of epilepsy the assembly was immediately dissolved; and so serious was the trouble that very radical measures were pursued to bring about a recovery. One of these was the drinking of blood, and we are told that after the gladiatorial contests the poor miserable victims of epilepsy could be seen wending their way in the arena and drinking the blood of the dying or seriously wounded gladiators, believing it would prevent a recurrence of the attacks.

Society has extended its hand to the leper and the insane, to the feebleminded and to the indigent; but only of late years has it expressed or shown any tendency to help epileptics.

Epileptics may have one attack a day (I have known them to have twenty-five), or they may have one attack a month, or only one a year. This simply shows how absolutely unreliable they are for the exigencies of life,—for the winning of a livelihood,—for what Roosevelt calls a "strenuous life." When the tension is too much, the ill-balanced nervous centers explode, and as a consequence the victim has an epileptic convulsion. Many notable characters in history have been epileptics: Petrarch, Napoleon and Cæsar were examples. The disease is not always associated with mental or moral degeneracy, but most frequently evidences of mental deterioration will be found which unfits the person to take his position in the struggle for existence.

Shortly before the year 1866, in Southwestern France, Pastor Post, deeply affected by the sufferings of this class of individuals,—their incapacity to mingle in the social and school life, to enter the various avenues of employment that are open to those who are well and perfectly competent to enjoy the pleasures and occupations of life, established a home for epileptics. This was one of the highest expressions of altruism. It was a missionary spirit. The fame of this man's work spread, and some years afterward the Lutheran Church in Germany took an interest in the matter, and called a missionary conference at Bielefeld. After discussion, it was decided to establish, at Bielefeld, a home for epileptics. It opened with four occupants. For five years, until 1872, it met with a great many discouragements. It seemed to make no advance; there was every prospect of the endeavor resulting in failure. But it had made a profound impression upon Baron Frederick von Bodelschwing, whose father was minister of finance in Prussia, and was also prime minister of Prussia, and belonged to a Westphalian family. His heart was touched, his attention having been called undoubtedly to these two attempts which apparently were of slight avail and of but ill success, and he took hold of the work at Bielefeld. Bielefeld, in Westphalia, is a town of about 3,000 inhabitants. Baron Frederick von Bodelschwing's father had been a companion of Emperor William of Germany, and royalty was influenced to bring its powerful prestige to the aid of the work. The Emperor Frederick laid the corner stone of the beautiful little church, on the side of the hill, in the beech woods, and the present emperor has given gifts; and they take great pleasure, when they show the church, in pointing out what the emperor has given, as showing his favor and good will towards the colony.

Under the inspiration and the power of this very remarkable man the colony grew and developed, until it now occupies a position such as none other occupies in the world; indeed, it is the parent colony, and from it has come our American colonies.

I remember that, a good many years ago, my friend, Dr. Peterson of New York City, wrote an article upon the Bielefeld colony, and it was largely through his efforts and persistence that the Craig colony was established, and through his perseverance the attention of the medical profession and of the philanthropists of the United States was called to this supremely important question, so that colonies have since been established in other states of the Union.

When I visited Bielefeld, in December, 1894, the colony was a flourishing institution. There were about 1,400 epileptics. In the Massachusetts colony, and I think in the Craig colony also, they do not take the violent insane, nor the criminal, nor the inebriate; but my recollection is that, at Bielefeld, they took all persons who were epileptic. Unfortunately, the wife of Pastor von Bodelschwing had died a few days before I arrived, and I was unable to see him, but I met Pastor Stürmer, who had charge of the epileptic colony proper, and from him I received all the information necessary. From what I saw of the work and from the contact I had with that remarkable man I received inspiration enough to last me as long as I live.

At Bielefeld they have also a large community of tramps and alcoholics. The scope of the colony is much greater than simply the care of epileptics. All the various trades are represented, those of each trade being grouped together in a cottage. There are carpenters, masons, tailors, brickmakers, bricklayers and bakers. The bakers' cottage is called the "House of Bethlehem," certainly a very appropriate name. In those homes there is what is called a "house father," and he with his wife oversees the residents or the patients living in his particular cottage. He is also called a deacon, and there are subdeacons who sleep in the dormitories and act as foremen in the workshops. It is most interesting, in passing through these buildings, to see the earnestness and the kindly spirit which is manifested everywhere. Of course, many of these cottages do not pay; but some of them do. The stamp industry attracted my attention, and much pleased me. They told me that they realized about a thousand dollars a year from it.

The epileptic colony at Bielefeld has taken a strong hold in Germany. It has touched the great German heart. The people, from peasant to nobility, give their pennies and their pounds to help forward this work. This instance was related: One poor German woman could give no money, but she saved all the corks she found. After a while she had her attic full of corks, and wrote to the pastor: "I can't give anything, I haven't anything to give, but I have an attic full of corks." The corks were used in the large linoleum factory there, and a considerable sum of money was realized. Everything that can possibly be transformed into money is sent, taken care of, and finally sold.

Life in Bielefeld is very simple. The church is one of the strong features of the town. Twice on Sabbath they have their meetings, to which the patients love to go.

If a patient has an epileptic attack during service, he is taken by attendants and other patients to one of the two little rooms on either side of the church, where he remains until the fit passes. The kindness of one patient to another, as has been referred to in the report, is perfectly beautiful. They exhibit to one another the same care and attention that a sister has for a younger brother.

There are patients at Bielefeld from all parts of the world. There were some from Minnesota, and I think from almost every state of the Union. There is no reason why Minnesota should not have a colony of this sort, where patients might go for treatment and care; not only those who from necessity must be the wards of the state, but those who can afford to pay for care, and who want freedom from the anxiety and strain of life.

Up among the trees, where it can hardly be seen there is an insane asylum, there is also an imbecile asylum,—imbecility due to epilepsy. I shall never forget the impression this asylum made upon my mind. It was one of the most pitiable sights I have ever seen.

Now, as to their care of epileptics. I am not a therapeutic nihilist. I fully believe in medicine, but I also believe in using all the constructive and reconstructive forces of nature, and that is the theory upon which they do their work at Bielefeld. They bring everything pleasant possible into the life of the individual. They surround him with kindly influences; they keep him out of doors as much as possible; he has something to take up his mind, so that it does not corrode itself and react and interact upon itself. The food is simple, milk entering largely into their diet. The only medicine given is

bromide of potash of a very pure quality. The percentage of adulteration in the bromide of potash made at Bielefeld is one-fourth of one per cent. An immense quantity of the pure drug is sent out without cost all over Germany and all over the world. One-half ton is made every month, of which three hundredweight is used in the colony itself.

Now, from this colony at Bielefeld, which was really the offspring of a divine altruism,—from this one focus has arisen the different colonies found in various quarters of the world. There is one a short distance from London, and you have already been told of those in this country. You cannot conceive of the value of this kind of care for this class of individuals, and I certainly hope that as the result of the work of your committee this matter may be brought so forcibly before the legislature, that these poor sufferers may receive the care and attention they so sadly need. Were you in my position, were you to receive the letters I receive asking if there is some place to which they could go; were you in Dr. Rogers' position, receiving letters asking what to do, or if he could not receive them, you would feel deeply interested in this matter. These people themselves have learned that there is a better way, that there is a chance for them to enjoy a fairly comfortable life.

PRESIDENT FOLWELL: I felt sure in saying to you that this was one of the most interesting institutions in the world. There is, of course, not time to discuss this paper to-night, but we will wait a moment if there is any lady or gentleman that wishes to be heard. If there be no discussion the chair desires to allow Dr. Rogers an opportunity for explaining a chart or a map which you may have seen on the wall on the left of the stage. This subject of care for epileptics is perhaps the most important matter which has come before this conference, and if the doctor can take a few minutes and explain that map to us and make other remarks, I think our time will be well spent.

DR. ROGERS, Faribault, then exhibited to the conference a large map of the grounds of the Craig Colony, and said: This is a hasty sketch which was gotten up yesterday to illustrate the arrangement of the buildings. One of the features is that the men are on this side of a deep ravine, with this creek flowing through. The banks are stony and precipitous. The women are on the other side. The only means of communication is by this little pathway and bridge. The farmstead group are all arranged over here, so as to bring all the barns and everything pertaining to the farm life entirely away from the center. The railway communication is very good. Here is one railroad running through the grounds and another over here (pointing on the map), with men stationed at this point here. The station agent gives his time particularly to the interests of this colony. Here is the administration building, and here is the hospital building, and here are the other buildings. The whole tract comprises 968 acres of land, of which about 600 acres are primeval forest. Up here is a clay territory that is used now for brick-making. Here is the lake which furnishes a portion of the water supply. The water tower occupies the highest point of ground, which is here. At the time I visited the colony there were about 575 inmates. One of the pretty things, to my taste, is the nomenclature. Each of the buildings is named after a flower, that is, the buildings in this group; this is the Villa Flora group. The plan is to extend the rows of cottages as shown here. These will be more especially for private patients. Over here the buildings are all named after the Indian tribes and nations. This group here was named after Mr. Letchworth, who was one of the active men in the organization of the colony. A great many things I would like to tell you about, but I think under the circumstances we had not better take any more time now. This colony is in the town of Sparta, Livingstone county, New York,—38 miles from Rochester. There are some disadvantages even in the possession of some very good things. This railroad, while convenient for transportation, has resulted in the death of four boys who were run over by the cars, although the trains run very slowly through the grounds.

PRESIDENT FOLWELL: It would be a misfortune if the next legislature should not make a beginning of these things for these unfortunate people.

THE PROBATION LAW IN MINNESOTA.

PRESIDENT FOLWELL: The conference will come to order. It was announced that a short time would be given to the matter of the probation system, which was established by the last legislature. The subject was before the conference at its last annual meeting—last but one—and received the endorsement of the conference in a general way. The last legislature passed a law establishing a probation system for the three large cities of the State, and it has been on trial a little over a year in one of the cities. I presume it is understood by all who are present what is the intention of the operation of this law. It is to arrest first offenders and put them on probation—give them an opportunity of straightening things up without going to prison. I have here a sheet showing statistics under the operation of the probation law in Hennepin, Ramsey and St. Louis counties for the twelve months ending Sept. 1, 1900. The information was kindly furnished by the probation officers of the three cities, and Mr. Cowie has consolidated it. Very briefly, the number of cases brought up in Hennepin county was 349, of which 67 were placed on probation; discharged from probation, 31; revoked, 7; otherwise disposed of 4, and remaining in care of probation officer, 25. There is a table showing the nationality of the persons charged, which is quite interesting. The Americans are in the majority 38; next come the Irish, 27; the Scandinavians, 24; the Germans, 19, and the rest are scattering; 12 Russians, however, among them. Little sneak thieves, I suppose, most of these boys. So far as the State Board of Corrections and Charities is informed, this probation system is working very well, indeed, and promises excellent results. Mr. Holt of Minneapolis wrote me that he finds little difficulty in getting the parents on his side; almost always the parents are delighted to have that law in operation, and they cooperate with him; and he is generally successful, as I presume the other officers also are, in securing the friendship of the boys, and very little trouble has been had in getting reports from the young fellows themselves. They are obliged to report periodically to the probation officers. I see Mr. Withrow of St. Louis county is present. He is the probation officer of that city. Perhaps he can enlighten us a little more, particularly in regard to the operation of the law in that county. Mr. Bingham has not yet come in; he was to be here this morning.

MR. WITHROW, Duluth: I am the executive agent of the Duluth Humane Society, the truant officer for the Duluth public schools, and the probation officer for St. Louis county—the largest county in the great State of Minnesota. I am pretty well acquainted with the juveniles of our city. As probation officer I now have 22 children on probation, 21 boys and 1 girl. Twenty-one are from the city of Duluth, and one from Tower. They have all been paroled for a period of one year. These children are interesting characters, and are among the brightest children of our fair city. If adults can be kept at work on the farm through the day, juveniles ought to be kept night and day without running away, and entirely separate from the paupers. As Gov. Lind stated last night, one of the best preventatives against crime is the compulsory education law when it is strictly enforced.

In my truant work I use a pamphlet with extracts from three statutes, namely, "An act requiring the education of children," Chap. 226, Laws of 1899; "Cruelty toward children," Chap. 96, Laws of 1893; and "An act to