Book Reviews & Abstracts

The Nature and Treatment of Stammering. By E. J. Boome, and M. A. Richardson. Methuen. 1931. 3/6 net.

The collaboration of a doctor in medicine and a teacher, experienced in the treatment of speech disorder, is one of the most perfect one could wish to deal with the subject of stammering. This book, as the wrapper states, is the result of several years of research and practical experience, and, as such, should prove of inestimable value to all who are afflicted with stammering, as well as to those who come into contact with them.

In the first chapters, the authors do much to clear away false conceptions of the origin of this distressing disorder, and give a brief account of the beliefs held by experts of to-day. They do not hesitate to condemn "secret cures" and many methods of treatment practised in the past, some of which, unfortunately, are still in vogue. An extremely interesting and unusual feature of the book is a chapter devoted to the stammerer's own Point of View. Here a dozen cases, of all ages and both sexes, have recorded their own experiences and feelings in regard to their stammer, and the way in which the people they meet react to it. This is the best thing of its kind that has been written and will repay very careful study, affording, as it does, an insight into the mental processes of a stammerer which could be obtained in no other way. The section on Treatment is perhaps the most disappointing in the book. The authors' emphasis on the fact that this disorder must be approached from a physical, psychological and environmental standpoint is excellent. One feels, however, that in their condemnation of methods of "Voice Production," "Speech Training," and "Breathing," rather more differentiation might have been made between a good and bad use of such things. One feels, also, that for the book to be of the greatest possible value to those who stammer, the authors might have given rather more definite instructions for carrying out the exercises they outline. These, however, are minor faults in a book which is a great achievement and a most sane and valuable addition to the existing literature on the subject.

M.F.

Report of Departmental Committee on Colonies for Mental Defectives. H.M. Stationery Office. 1931. 2/- net.

A Departmental Committee was appointed by the Board of Control with the approval of the Ministry of Health in January, 1930, with the following terms of reference:—"To consider and report what are the essential structural requirements of a complete colony for mental defectives of all types and to what extent the cost would be reduced by the adoption of semi-permanent or temporary buildings or other new methods of construction, having regard to the comparative cost of maintenance, as well as the initial capital expenditure involved."

The Committee acknowledge in submitting their Report that the proposals put forward are in no sense startling or revolutionary and that it has been no easy task to cut estimates finer than they have been cut already. Throughout the Report suggestions have been confined to the minimum requirements consistent with the reasonable welfare of the inmates of colonies and the efficient administration of the Mental Deficiency Acts.

The Report is divided into two parts; Part I deals with the essential standard requirements of a complete colony and Part II with the economic effects of adopting other than permanent methods of construction.

In discussing and investigating the question of the minimum size of a colony for efficient working, the Committee give 880 patients as representing the practical minimum size desirable. This number may appear rather high but it must be borne in mind that for the efficient organisation of a colony there must be classification not only of grade of defect but of sex and age. The following table giving the suggested classification for 880 patients is given on page 12:

| Class                  | M. | F. | Total |
|------------------------|----|----|-------|
| ADULTS                 |    |    |       |
| High grade patients, homes for | 60 | 60 | 120   |
| Medium                 | 60 | 60 | 120   |
| Lower                  | 60 | 60 | 120   |
| Selected adolescents   | 60 | 60 | 120   |
| Troublesome patients   | 40 | 40 | 80    |
| CHILDREN               |    |    |       |
| Higher grade patients  | 50 | 50 | 100   |
| Lower                 |   |   |      |
| LOWEST GRADE           |    |    |       |
| Homes for              | 40 | 40 | 80    |
| HOSPITAL               | 20 | 20 | 40    |
|                        | 440| 440| 880   |
The evidence submitted on the subject of the desirable maximum size of a colony varied a good deal. It was submitted that in an institution accommodating over 1,000 patients, the patients tend to lose identity and the Medical Superintendent is unable to keep in personal touch with the progress of each case. This was considered unsatisfactory in view of the fact that the Medical Superintendent is not only responsible for the classification of the cases, and has to prescribe the occupation and training they need, but he is also the only person empowered to sign the certificates upon which the original order in each case is continued. After close consideration the Committee felt that these arguments were unconvincing. They considered that the unit that matters from this point of view is the villa, and not the colony; provided that the number of patients in each villa is not too large (60 or under is suggested), the individuality of each case should be adequately safeguarded, no matter how many the number of villas. In the case of large numbers the Medical Superintendent would act on the reports of responsible officers who in turn would obtain their information from the staff actually in charge of the patients. The Committee see no reason why a colony should not expand to 2,000 beds, though in order to ensure that the visits of relatives should not be unduly difficult or expensive, the general limit would probably fall between 1,000 and 1,500 except in crowded industrial areas.

The Committee urge that in every case the proposal to erect a colony should be preceded by an exhaustive enquiry into the number of defectives requiring institutional accommodation in the area or areas to be served. After a suitable site has been acquired and the general lay-out agreed upon, it is then possible to determine the order in which the scheme shall be developed. The tendency during recent years has been to space homes or groups of homes, which are the most important units, widely apart, imitating the scattered village. The Committee, however, are of opinion that fairly close grouping of units can be carried out without rendering the colony unattractive and that this would result in greater economy and efficiency.

After careful consideration on the second part of their reference the Committee have concluded that there is little likelihood in general economy resulting from the adoption of semi-permanent or temporary methods of construction, except in the case of workshops, farm buildings and similar structures, for which any light and especially cheap type of building might be adopted.

Suggestions for reducing cost have been made with regard to detailed equipment and general administration, such as the use of semi-detached instead of detached homes, the limitation of the number of single rooms, etc.

Several plans, illustrating the various suggestions made are given in Appendix B of the Report. The Committee do not suggest that these should result in any standardisation of design, but hope they may prove useful to local authorities.

The Manual for Mental Deficiency Nurses. Compiled by Royal Medico-Psychological Association. Bailliere, Tindall & Cox. 1931. 6/- net.

This book, produced under the authority of the Royal Medico-Psychological Association, is a happy event in the History of Mental Deficiency Work, for it appears to put a seal on the ever-widening gap between Mental Deficiency nursing, and nursing in Mental Hospitals.

There is much to praise, but chapters one and five stand out above the rest.

Chapter One on the duties and qualifications of a nurse is especially fine, both for simplicity of phrasing and lucidity of arrangement, while Chapter Five is notable for the ease with which it explains and makes interesting, a very difficult subject.

There would appear to be some over- elaboration of teaching in some of the other chapters, and it is extremely doubtful whether nurses, either male or female, are vitally interested—or admitting the interest—in any way improved as nurses by such things as a knowledge of the microscopic structure of a motor neuron, the intermedio-precentral area of the left cerebral hemisphere, or even the pyramidal (supragranula or association) cortical level; personally, I think a Mental Deficiency Nurse can be quite efficient without a knowledge of these things.

This is perhaps cavilling at very fine points, but I feel that the Royal Medico-Psychological Association would do well to avoid in the curriculum for its examinations, any over-
burdening of candidates, with knowledge of medicine at the expense of pure nursing. The advice given on how to prepare for the nursing examinations is excellent, but many of the questions, taken from recent Final Examination papers would surely feel more at home in the Final Year paper of a medical student.

The Manual on the whole is a worthy contribution, admirably set out, and with one or two exceptions, the chapters will be understood by probationer nurses without much explanation.

The book should obtain immediate and lasting success and in its production the Royal Medico-Psychological Association has fulfilled a long felt want.

N. M. H.

Some Recent Books and Reports

THE EDUCATION OF THE ADOLESCENT. L. Hollingworth. Partridge. 1930. 6/-.

THE EDUCATION OF CHILDREN UNDER 7. Mary Sturt. Kegan Paul. 1931. 7/6.

LONDON COUNTY COUNCIL, Reports on Education. Vol. V. 1931. 1/-; Public Health, Vol. IV. Part I. 1931. 2/6.

MANUAL FOR MENTAL DEFICIENCY NURSES. Compiled by Royal Medico-Psychological Association. 1931. Bailliére, Tindall & Cox. 6/-.

THE MIND IN ACTION. A. Campbell Garnett, M.A., Litt.D. Cambridge University Press. 1931. 5/-.

RECENT ADVANCES IN THE STUDY OF PSYCHO-NEUROSIS. Millais Culpin. Churchill. 1931. 12/6.

LE SERVICE SOCIAL A TRAVERS LE MONDE. Dr. René Sand. Librarie Armand Colin. 1931. fr. 25.

SOUND FILMS IN SCHOOLS (Report of an Experiment in Middlesex Schools). Schoolmaster Publishing Company. 1931. 1/6.

Reviewed in this issue.

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List of Additions to the Library.

(For insertion on the interleaved pages of the Catalogue).

ADLER, A. The Neurotic Constitution. 1921.

CULPIN, MILLAIS. Recent Advances in the Study of Psycho-Neurosis. 1931.

DREVER, J. Psychology of Everyday Life. 1929.

GESSELL, A. Infancy and Human Growth. N. Y. 1928.

HOLLINGWORTH, L. Psychology of the Adolescent. 1930.

JENNINGS, H. S. The Biological Basis of Human Nature. 1930.

MANUAL FOR MENTAL DEFICIENCY NURSES. Compiled by Royal Medico-Psychological Association. 1931.

MILLER, EMANUEL. Modern Psychotherapy. 1930.

NUNN, T. P. Education, its First Data and Principles. 1930.

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