News and Notes

Conference on Mental Health

H.R.H. The Duchess of Kent has consented to attend the inaugural session of the Association's Conference on Mental Health to be held on March 17th-18th, 1949, at Seymour Hall, London, W.1. The meeting will also be honoured by the presence of Sir Wilson Jameson, G.B.E., K.C.B., M.D., F.R.C.P., Chief Medical Officer, Ministry of Health and Ministry of Pensions. The Conference has the official support of the relevant Government Ministries of the United Kingdom and Northern Ireland. Papers will be given by the following speakers:

THURSDAY, MARCH 17TH

Subject—First experiences of recent social legislation and implications for Mental Health (National Health Service Act, National Assistance Act, National Insurance Act, and the Children Act).

Speakers—Prof. D. R. MacCalman, M.D., F.R.C.P.
Miss Marjorie A. Brown, M.A.
Miss P. Armstrong.

FRIDAY, MARCH 18TH

Subject—The need for understanding the individual—as part of the training and function of Doctors, Nurses, Teachers and Social Workers.

Speakers—Prof. J. C. Spence, M.D., F.R.C.P.
Prof. Brian Stanley, M.A.
Miss May Irvine, M.A.

Prof. A. N. Shimmin, M.A. (Professor of Social Science, University of Leeds) will preside at the first day's sessions, and on the second day Dr. G. B. Jeffery, M.A., D.Sc., F.R.S. (Director, Institute of Education, University of London) will be in the chair.

The inclusive fee, admitting to all sessions and a copy of the printed Report is £1 5s.; Day Tickets (excluding Report), 11s. 6d.; Sessional Tickets, 6s. each. Reductions in these fees are allowed to Full Members of the National Association for Mental Health. The Association's Mental Health Exhibit, to which reference is made below, will be on view at Seymour Hall during the Conference period.

Copies of the printed programme and all other information may be obtained on application to the Conference Secretary, National Association for Mental Health, 39 Queen Anne Street, London, W.1.

Mental Health Exhibit

An illustrated brochure, containing details of the Association's Mental Health Exhibit, has recently been published, and copies (price 3d. each) may be obtained on application. The Exhibit, which was displayed at the International Congress on Mental Health at Central Hall, Westminster, last August, is available for hire to Local Authorities, voluntary organizations, etc., for display at Health Weeks and other similar functions. The Exhibit comprises six separate box units illustrating some of the main problems of mental health during the different age groups, from infancy to maturity, with particulars of the voluntary and statutory services provided or projected.

N.A.M.H. Forthcoming Courses

The programme of the Education Department of the National Association for Mental Health for the next few months includes the following Courses:

For Medical Officers (in conjunction with the Extra-Mural Department of the University of London)

Three Courses of three weeks each, to be held from February 28th to March 19th; May 2nd to 21st; and October 3rd to 22nd.

Vacancies for all three Courses are now fully booked.

For Teachers (organized for Ministry of Education)

Two Courses of three weeks each, to be held respectively from July 11th to 28th at Whitelands College, Putney, and from September 5th to 23rd at Grove House, Roehampton.

Applications for these Courses must be made through Local Education Authorities.

For Staffs of Children's Homes

At the request of the Home Office, plans for a three weeks' Residential Course to be held from May 30th to June 18th at the Probation Hostel, Draycott Place, London, S.W.3, are under consideration.

For further particulars, apply to the Education Secretary, 39 Queen Anne Street, W.1.

A fourth Course for Local Authority Officers in the Mental Health Service is being held in London as we go to press.

N.A.M.H. Homes and Hostels

For Epileptics

The pioneer Convalescent Home for epileptics at Fairwarp, Sussex, has been so successful that the Association is now planning to open a second Home—Kelsale Court, Saxmundham, Suffolk—during the spring, with the help of a generous grant from King Edward's Hospital Fund. This is a delightful house, able to accommodate at least twenty-five patients, situated in pleasant grounds in the village of Kelsall, about twenty miles from Ipswich. The sea is within a distance of three miles, and the station within a mile. It is hoped to secure the co-operation of the East Anglian Regional Hospital Board. The charge per patient will be £3 13s. 6d. per week. Both men and women will be
admitted, convalescing from illness or operative treatment.

New Agricultural Hostel

The Association has welcomed a request from the Yorkshire (West Riding) Agricultural Executive Committee to open a Hostel in their area for thirty to forty land workers—mentally defective men who have had institutional training. Premises are in view and it is hoped that the Hostel may open in the spring.

Holiday Homes

The Association's two Holiday Homes at Bognor Regis and Rhyl have been fully booked up from March until the end of November, and far more applications for parties of patients from Mental Deficiency Institutions and Occupation Centres have been received than can be accepted. There is, therefore, urgent need for additional Homes, and information about possible premises in seaside towns in the north, east and west will be gratefully received for investigation.

Information and enquiries should be addressed to the Homes and Hostels Department, 39 Queen Anne Street, London, W.1.

Essay Competition for Nurses

The subject chosen for this year's "Lord " Memorial Essay Competition (founded by the Society of the Crown of our Lord in memory of the late Dr. J. R. Lord, C.B.E., and administered by the National Association for Mental Health) is:

"The ways and means by which the Nurse can help the Patient to achieve the fullest possible practical and social re-adjustment."

Essays, of approximately 2,000 words, are invited from nurses holding:

(a) The Certificate issued by the General Nursing Council for Nurses on the Register for Mental Nurses or the Register for Nurses for Mental Defectives; or

(b) The R.M.P.A. Certificates of Proficiency in Mental Nursing and in the Nursing of Mental Defectives

and dealing with cases of mental disorder, or mental deficiency, whether in mental hospitals, mental deficiency institutions, psychiatric clinics and/or allied psychiatric services where mental nurses are employed.

The following prizes will be offered for the two best essays:

First Prize: £3 3s. and a medal.
Second Prize: £1 1s.

The closing date is May 31st, 1949. Copies of the announcement and full particulars of the arrangements may be obtained from the Secretary, Public Relations Department, N.A.M.H., 39 Queen Anne Street, London, W.1.

Prison Commissioners' Report, 1947

In May, 1948, the average prison population exceeded 19,700—the maximum for a period of some forty years and over, and over 6,000 more than in 1946. Part of the rise may be accounted for by an increase in the number of longer sentences, but an increase in actual receptions is also a contributory factor and there is no reason to suppose that the upward curve is nearing its peak.

This state of affairs produces severe overcrowding in existing prisons, and despite every effort it has been impossible to obtain the additional accommodation needed, even by acquiring country houses or camp sites. During the year only one small new camp for about 100 men was opened at Aldington, Kent.

On the other hand, there is a decrease in the number of women prisoners from 7,381 receptions in 1945 to 4,912 in 1946. An interesting new development in connection with women prisoners is recorded under a section headed "Social Assistance" which attempts to allay the anxiety about home affairs (referred to by Dr. Charity Taylor in her talk noted below) so often felt by women newly admitted. With the co-operation of the W.V.S., an experimental scheme was instituted at Holloway. W.V.S. representatives attend every evening in the "reception" to offer help to anyone beset by urgent problems needing immediate attention and to render "first aid" service. A similar experiment was tried at Durham and, although the demand was not found to be large enough to justify the setting up of a regular service, arrangements can be made for dealing with any cases that may arise.

In the chapter headed "Health and Hygiene", the Principal Medical Officer at Wormwood Scrubs reports a development in group psychotherapy made possible by the opening of the "New Ward " in September, 1946, which has had good results. Several cases have been referred to the National Association for after-care on release, and the usefulness of the psychiatric social worker at the prison is fully recognized. Psychiatric treatment given at the Wakefield centre has been extended and has relieved Wormwood Scrubs of a substantial number of cases.

Work with young convicts—mostly youths convicted of murder and sentenced to detention during His Majesty's pleasure—has had some good results. Its members seem to respond to the psychological approach, in conjunction with active rehabilitation measures, so that a noticeable atmosphere of progress can be recorded.

At Holloway, a useful investigation has been begun into mental and physical states of women convicted of child neglect.

A note of warning is, however, given as to the inability of psychological treatment to prevent further criminal activity, and it is explained that its true function is to bring abnormal psychological factors into consciousness in such a way that any
repetition of a criminal act can only take place if willed and intended. More than this it cannot achieve.

The Report records the need of an intake of 900 additional prison officers by March 31st, 1949. To achieve this target, energetic measures have been taken, including the dispatch of a recruiting mission to Palestine early in 1947 offering employment to 368 members of the Palestine Police and Prison Services on demobilization. Hope was expressed that the target might be reached. In the medical staff also a serious shortage is reported, and at the time of its preparation there were sixteen vacancies. During the year, Prison Medical Officers ceased to be a separate departmental class and were assimilated into the general Treasury class of Government Medical Officers.

"Imprisonment"

Members of the National Association for Mental Health who had the privilege of hearing, at its Annual Meeting in January, the talk given by Dr. Charity Taylor, Governor of Holloway Prison, must have gone away inspired by her conception of what imprisonment may achieve even if it is undergone in one of London’s oldest and most forbidding-looking prison buildings.

Dr. Taylor said that she and her staff tried not only to reform prisoners but to send them out “nicer people” than they were when admitted—to teach them to be kind to one another, and to make them realize that their enforced and unwelcome association could be turned into a real community life. The hard core of “old lags” presented, of course, special problems. Untroubled by anxieties as to happenings outside (in this presenting a striking contrast to the first offenders who so often were deeply concerned about home affairs), their whole attention was concentrated on what was happening “inside”, and though they were ready enough to accept authority, they regarded their fellows as fair game for malice and uncharitableness.

At the same time, however, it was elicited from Dr. Taylor in answer to a question, that she did not advocate the close segregation of this group of prisoners which, in her opinion, only intensifies the evil. She felt that a careful dilution of the classification by very carefully selected other prisoners might yield good results.

Psychiatric treatment, in her experience, was useful in certain cases—particularly in those of neurotics suffering from obsessional and anxiety states—but frequently treatment of this kind was too late, and it was, of course, repudiated by the “old lags”. Nor does it necessarily affect the patients’ criminality.

The question of employment—so vital in men’s prisons—was not, in Holloway, an acute problem. The majority of the women were needed at home on their release, and industrial training would be of no interest to some of them.

One problem was touched upon by Dr. Taylor with which she said she was powerless to deal—that of the stigma attached by society to those who had been in prison. Nor had she any easy solution to offer in regard to it.

Those who heard this delightfully unofficial and “human” account of prison life will read with heightened interest the Report of the Prison Commissioners, a note on which appears above.

An Inquiry into Punishment

The Home Secretary has appointed a Committee to review existing methods of punishment in prisons and Borstal Institutions (excluding, in these cases, corporal punishment), and in Approved Schools and Remand Homes; to consider the procedure adopted in inquiries into breaches of discipline, and to recommend whether any changes in the methods and procedure are necessary or desirable.

Its Chairman is Mr. H. W. F. Franklin (Headmaster of Epsom College, Surrey), and included in its membership is Dr. Desmond Curran who holds the post of Psychiatrist at St. George’s Hospital.

Anyone interested in the work of the Committee is invited to communicate with one or other of the Joint Secretaries, Mr. D. Pettigrew, Prison Commission, Horseferry House, Thorney Street, London, S.W.1, and Mrs. M. G. Kewley, Children’s Department, Home Office, Whitehall, S.W.1.

Lunacy and Mental Treatment in 1947

The Report on the Mental Health Services previously published by the Board of Control will, in future, be included in the Annual Report of the Ministry of Health, but meanwhile there has been issued separately the Annual Report of the Board to the Lord Chancellor, on the Lunacy and Mental Treatment Acts.

At the end of 1947, there were 144,736 patients under care (compared with 146,444 in 1946). Of this number, 128,817 were in public mental hospitals, and such hospitals were then overcrowded to an extent of 14,668 (in 1946, this figure was 16,662). The incidence of mental illness has not increased, but the increase in the general population has led to a growing demand for accommodation which has not been overtaken since 1939, when building stopped. Moreover, at the end of 1947 there were still 5,509 mental hospital beds diverted to wartime purposes, and of those set free during the year, 3,965 could not be used owing to the need of restoration or re-equipment. Shortage of nursing staff also resulted in inability to use 1,981 beds which could otherwise have been made available, but it is pointed out that this figure represents less than 1·6 per cent. of the whole, and that the shortages are highly localized.

Voluntary admissions constituted 54·5 per cent. of the total admissions during the year (compared
with 50.8 per cent. in 1946) but it is noted with concern that many mental hospitals now limit admission to certified cases and decline to receive voluntary patients. This is obviously an effect of the pressure on accommodation, but one which must be regarded as most disturbing and retrograde, and in the long run likely to lead to even more overcrowding in its denial of early treatment. It is therefore to be sincerely hoped that it is only a very temporary expedient.

Mental Health Advisory Committee

The Central Health Services Council, set up in accordance with the provisions of Section 2 of the National Health Service Act, is instituting nine standing advisory committees, one of which is to be concerned with mental health.

The members of this Committee are as follows:

*Appointed by Central Health Services Council*

Mr. C. F. Comer (Confederation of Health Service Employees), Sir Allen Daley, Professor Aubrey Lewis, Dr. W. G. Masefield, Sir Cecil Oakes.

*Representing Organizations*

Mr. Claude Bartlett (Male Nurse), Dr. John Bowby, Dr. W. Russell Brain, Dr. Noel Burke, Dr. Desmond Curran, Dr. Wm. Sutherland Macdonald, Mrs. McDougall (P.S.W.), Alderman Mervyn Payne, Dr. J. R. Rees, Dr. J. Ivison Russell, Mr. Philip E. Vernon (Psychologist), Miss B. J. Wall, S.R.N.

The National Association for Mental Health was one of the bodies invited to nominate two persons to serve on the Committee, and Dr. J. R. Rees was nominated by it, as well as by other organizations.

Disabled Persons, Some Facts and Figures

In the chapter of the Ministry of Labour’s Report for 1947 dealing with this subject, it is stated that of the 828,666 disabled persons registered as at October 20th, 1947, “nervous and mental disorders” accounted for 66,832.

The total number of disabled persons recorded as unemployed on December 15th, 1947, was 74,343 (70,943 males and 3,400 females), compared with 72,799 in December, 1946. Of these, 63,555 were classified as capable of employment under ordinary conditions, and 10,788 as being severely disabled and in need of sheltered employment.

During the year, 7,356 disabled men and 674 disabled women were admitted to training courses, under Section 2 of the Disabled Persons (Employment) Act, under the Ministry of Labour's Vocational Training Scheme. In some of the courses, places for disabled workers were specially reserved. Information as to the types of disability from which the trainees suffered is not given in the Report, so it cannot be ascertained to what extent psychiatric patients have responded to the training given. At the end of 1947, 6,812 persons had completed training and 3,784 were still undergoing it.

In addition to the Egham Industrial Rehabilitation Centre, it was planned to open others, but owing to difficulty in obtaining suitable premises it was decided instead to establish in Government Training Centres having accommodation available, non-residential units and one unit to be partly residential.

At Sutton, Surrey, a special psychiatric centre was established to provide short-term rehabilitation for men and women disabled by psychosis or psycho-neurosis.

For the seriously disabled, the Disabled Persons Employment Corporation opened, during 1947, 11 new “Remploy” factories, making a total of 15 in the country as a whole. At the end of the year, a further 29 were in course of erection or adaptation. As a long-term policy, the Corporation has fixed as its target 100 factories. In connection with the Bridgend and Edinburgh factories, 58 home-workers were employed and surveys on the opening for a Home-Workers’ Scheme were being made in other areas.

Out of 625 “voluntary undertakings” employing 625 severely disabled persons, only 5 had found it necessary to make claims for financial assistance in respect of working deficits. Capital assistance was given in one case.

The Sheltered Employment Committee of the National Advisory Council gave special consideration to the question of employment for epileptics, and at the Salford Remploy Factory six epileptics were employed as an experiment.

A follow-up enquiry, after a period of six weeks of placement, showed that of the 26,225 cases placed in ordinary or designated employment during the quarter ended September 30th, 1947, 57.1 per cent. were satisfactorily resettled, 24.4 per cent. were not satisfactory, and in about 18.5 per cent. of the cases information was not obtainable.

Some additional information is given in a more recently published report issued by the Standing Committee on the Rehabilitation and Resettlement of Disabled Persons (1949).

From this we learn that on August 16th, 1948, about 905,000 were registered as disabled. A classification of these, as at April 4th, 1948 (it is stated that there is no reason to think that there is appreciable variation in the relative proportions found on any specified date), shows that psychiatric disability accounted for 5-7 per cent. of persons on the Register, as compared with 42.7 per cent. in the surgical group, 34.9 per cent. in the medical group and 16.7 per cent. grouped as “others” which included the blind and deaf.

Joint Research into Child Development

An interesting example of “combined operations” is to be seen in the recently-instituted research project for a training and research centre
in connection with a residential and day nursery, a nursery school and a maternity and child welfare centre, provided in Bloomsbury by the Governors of the Foundling Hospital. The Medical Officer of Health for St. Pancras is deeply interested in the scheme, and associated with its operation is the Institute of Child Health (whose Director is Prof. Alan Moncrieff), the Institute of Education (London University), the Child Guidance Clinic at Great Ormond Street Hospital, and the Central Council for Training in Child Care (Home Office).

The Central Council’s first training course for supervisors and tutors held in connection with the new scheme, began in January, with Dr. Agatha Bowley as senior lecturer and Miss J. E. Cass (also acting as honorary educational supervisor of the day nursery) as tutor. A part-time medical assistant and two assistants in educational research have also been appointed.

The children in the nurseries and the nursery school will be the subject matter for the research and if possible babies and young children in the area who do not attend them, and it is hoped thus to evaluate the advantages and drawbacks of the various types of provision.

The research may, as a long-term policy, be extended to a follow-up of the children concerned, through their school life until, as adolescents, they may become members of the Youth Centre in the Harmsworth Memorial Playground on the Foundling site.

Marriage Guidance

The Report of the Departmental Committee on Grants for the Development of Marriage Guidance provides an interesting new example of the scope and value of purely voluntary enterprise leading, after its pioneer stage, to recognition and financial support by central and local government.

The Committee has recommended that the three organizations mainly concerned—the National Marriage Guidance Council, the Catholic Marriage Advisory Council and the Family Welfare Association—should be given Government grants, and that in the setting up of local centres Local Authorities shall be empowered to give help under Section 136 of the Local Government Act, one half of any expenditure so incurred being recoverable from the Government.

It is further recommended that the three organizations should join together to devise schemes for selecting and training Marriage Guidance Counsellors, and that they should appoint nine representatives to a training body to be set up, with a Chairman and two other members appointed by the Home Secretary, one member appointed by the Minister of Health and one by the Minister of Education. The whole cost of training, during an experimental period of five years, should, it is considered, be borne by the Government.

Children Act, 1948

The Advisory Council provided for in Section 43 of the Children Act has now been appointed by the Home Secretary. Its members are as follows:

Professor Alan Moncrieff (Chairman), Lady Allen of Hurtwood, Dr. Muriel Barton Hall, Mr. R. Beloe, Miss S. C. Bertie, Mrs. F. M. Brown, Mr. P. B. Dingle, Mrs. K. W. Jones-Roberts, Mr. P. T. Kirkpatrick, Mrs. G. R. Morrah, Miss L. M. Rendel, O.B.E., and the Hon. David Smith.

On the Council will also serve departmental representatives of the Home Office and the Ministries of Education, Health, and Labour.

Mental Health in South Africa

The Report of the South African National Council for Mental Health for the year ended March 31st, 1948, describes a year of vigorous and expanding activity on the part of the Central Office, and of its local Mental Health Societies in Durban, Pietermaritzburg, Cape Town, East London, Port Elizabeth, and Johannesburg. In addition to other forms of mental health work, it is interesting to note that all these Societies are responsible for Psychiatric Clinics. In Johannesburg there is an old-established Occupational Centre for boys, and one for younger children is planned. A seventh Society was founded in Bloemfontein in March, 1948, which gives good promise of rapid progress.

In its survey of the field, the Report notes the following subjects: Occupational Therapy, Training of Mental Nurses and Social Workers, institutional accommodation for Mental Defectives, the lack of suitable mental tests for non-European children, the Inter-Departmental Committee on “Deviate” Children and the Bill for the education of children who are handicapped, the shortage of mental hospitals and the need for bringing private mental homes under the Mental Disorders Act.

An accompanying leaflet refers to public apathy as being the greatest enemy of the Mental Health Movement, but the fact that street collections in 93 places throughout the Union produced the sum of £1,488 shows that the existence of the Movement must now be widely known, and demonstrates that some response to its needs can be evoked.

The National Council’s Organizing Secretary is Miss Una Fischer, and its postal address: P.O. Box 2587, Johannesburg.

Music in Mental Hospitals

In a recent issue of The Hospital there is an interesting report of some preliminary experimental work undertaken at Warlingham Park Hospital, for the purpose of ascertaining the value of music as a method of group therapy. To a selected group of patients—consisting of manic-depressives and schizophrenics with a few neurotics and psychopaths—various types of gramophone records have been played and discussed over a period beginning in
July, 1947. The results are recorded as follows: "Romantic" music often produced emotional release but did not tend to facilitate group cohesion; serious contemporary music brought repressed emotional forces into consciousness, in the case of some inhibited schizophrenics, classical music appeared to give a greater feeling of security; but quite the most effective music for increasing the harmony of the group proved to be traditional and folk songs from different countries.

"This music, based on the most deep-seated human and cosmic relationships, strikes a universal chord which binds people together, whether they are normal or emotionally disturbed."

It is interesting to note that, despite popular ideas, programmes of purely sedative music given at bedtime in the hope of quietening refractory patients, merely bored and irritated them—sometimes even leading to fighting! Mixed programmes, however, were appreciated, producing temporary beneficial effects on moods although no noticeable on sleep.

The article concludes with an account of the service offered by the Council for Music in Hospitals. Particulars of this may be obtained from the Organizer, Miss Sheila McCrery, 20 Deering Road, Reigate, Surrey, who also has for disposal a few copies of the report on the Warlingham Park experiment reprinted from The Hospital. A stamped addressed envelope should accompany applications.

An American looks at English Mental Hospitals

An interesting survey of sixteen Mental Hospitals in this country made in the summer of 1947 by Dr. Dallas Pratt has been circulated by the National Mental Health Foundation, Philadelphia. (Dr. Pratt's article on American Mental Hospitals (Mental Health, Vol. VII, No. 2) will be remembered and should be read in this connection.) Here he has roughly assessed the progress attained by the hospitals visited, classified less than a quarter as "progressive", more than half as "average" and a quarter as "backward". Judged by the same standard he would say that in America one-half to three-quarters of the State Hospitals were "backward", most of the rest "average", and "very few indeed" could be considered as "progressive". His findings are most clearly set out under various heads, and some of the many interesting comparisons made are as follows:

In England, expenditure on maintenance is about 50 per cent. higher than in the States, and the minimum rates are twice as high as their lowest.

In America the care of patients in the wards is largely in the hands of untrained and often ignorant attendants, the proportion of graduate nurses to patients in 1946 being only 1 to 143, whereas it has "apparently not occurred to the British that the nursing care of the mentally ill could conceivably be entrusted to anyone except a nurse."

Mental Hospitals in America are usually much larger than those in England, i.e. containing an average of 2,658 beds as against our own average of 1,261.

Dr. Pratt, in recording his impressions of the wards in the hospitals visited, notes the atmosphere as being "that of a home-y old fashioned boarding-house" with "gleaming wood and brass testifying to the English passion for polishing and the omnipresent vases of fresh flowers to their devotion to gardening". He was specially struck by the fact that the disturbed wards were (apart from the patients) indistinguishable from the others, with the same quantity of exposed glass, furniture, pictures and flowers. Compared with American hospitals, Dr. Pratt refers to the general impression of observers that English hospital patients are less disturbed, which is sometimes attributed to the phlegmatic British temperament. He suggests, however, that:

"the less disturbed character of English refractory wards is owing rather to a combination of: intelligent and humane nursing care; the frequent use of occupation and recreation (particularly out-of-doors activity); the absence of mechanical restraint and other violent methods; and finally, active physical treatment, including shock therapy and, in some hospitals, prolonged narcosis."

Besides Mental Hospitals, there are sections of the survey dealing with certain neurosis centres, and with public relations.

Dr. Pratt states at the outset that his survey was intended to be nothing more than "a friendly gathering of information and impressions, an effort to learn about advances in care and treatment, and a mutual sharing of problems". But the facts and figures assembled in it give such a clear picture of the present position that it will be read with profit and interest on both sides of the Atlantic.

Copies may be obtained from Messrs. H. K. Lewis & Co. Ltd., 136 Gower Street, London, W.C.1 (price 3s. 6d.) or direct from the National Mental Health Foundation, 1520 Race Street, Philadelphia, Pa., U.S.A., price $50.

Occupation Centres and Parents

The importance of interesting parents in the training of their children who are attending an Occupation Centre is an axiom which cannot be stressed too often, and we are glad to call attention to a successful enterprise with this end in view.

The East Leeds Occupation Centre has formed a Parents' Association which holds a monthly meeting on the Centre premises. To it, fathers as well as mothers gladly come, and every effort is made to encourage their taking an active part in the proceedings, e.g. by proposing votes of thanks. Speakers have included the Medical Superintendent of the local Mental Deficiency Colony, and a local Magistrate. The meetings also afford an opportunity for the staff and parents to discuss individual problems connected with the children, as time for social intercourse is always allowed.