MENTAL HEALTH

Obituary

Dr. C. CHARLES BURLINGAME
Psychiatrist in Chief of the Institute of Living, Hartford, Connecticut

The sudden passing of Dr. Burlingame on July 22nd, whilst attending the Annual Meeting of the Royal Medico-Psychological Association in Leicester, was a tragedy for all of us who are concerned with psychiatry and mental health. Dr. Burlingame, despite his 65 years, flew regularly to this country to attend the meetings of the R.M.P.A. and to many other countries in Europe, Asia, and South America, to help wherever he could with psychiatric activities.

Charles Burlingame always poked fun at himself and declared that he was President of the Hypomanics' Club, and it certainly is true that he had an immense restless driving force and energy which took him into an almost unheard of number of activities of all kinds in addition to running his own hospital at Hartford.

He began his work as a psychiatrist in a State Hospital in 1908 and worked in State Hospitals until 1915. He then became the first psychiatrist to do a whole-time job in industry, and later was in the U.S. Army until the end of the 1914-18 war, where he demonstrated his tremendous organizing capacity. On his return to the United States he was Executive Officer of the Board which was responsible for collecting funds and for building the Columbia-Presbyterian Medical Centre in New York, a gigantic project which few people could have tackled so well. From then up to 1931 he was in private practice in New York City, and in 1931 took over the Hartford Retreat, one of the oldest mental hospitals of the United States, which was later renamed the Institute of Living. Under his guidance it grew from 167 beds to 436, and many outstanding advances were made, particularly through the concept of resocialization of patients.

Dr. Burlingame's interests in psychiatry, neurology and in general medicine were very wide, and he moved from one office of responsibility to another all through his career. He had contacts with psychiatric societies in a number of countries, but we felt that his contact with the R.M.P.A. in this country was especially close. He had just been made an Honorary Member of the Association, and incidentally he had for a year or two given an annual prize for the best original work done by a member of the R.M.P.A. in the field of psychiatry.

He was an admirable "ambassador" for the United States. His friendly, kindly manner won him friends wherever he went, and a very real modesty underlay his impressive figure and his extremely active life. He was always greatly impressed with the need for research and for sound progress in the field of mental disorders and of mental health, and he is certainly one of those who can be said to have worn himself out in the service of his ideals. Everyone who knew him, and indeed many who only knew him through the publications that issued from Hartford, notably the Digest of Neurology and Psychiatry, will feel a sense of personal loss. Our deepest sympathy goes out to his wife, Mrs. Ruth Burlingame, in her bereavement.

J.R.R.

W.H.O. and Mental Health

A report on the First Session of the World Health Organization's Expert Committee on Mental Health was published in September.

The Chairman of the Committee is Dr. William C. Menninger (U.S.A.), and its other five members come from China, Czechoslovakia, the United Kingdom, Brazil and India.

In dealing with priorities in mental health work, special attention is called to the wide divergence in level and scope of the development of treatment facilities in the various countries. Thus:

"The United States, with approximately 160,000,000 people, has over 5,000 psychiatrists and about 700,000 psychiatric beds. India with a population of 350,000,000 has at the most 80 psychiatrists and 20,000 beds, including accommodation of all types, and China with a population of 450,000,000 has probably not more than 10 psychiatrists and less than 2,000 psychiatric beds."

News and Notes

The most important single long-term principle for work in the world mental health field is therefore considered to be:

"the encouragement of the incorporation into public health work, of the responsibility for promoting the mental health of the community as well as its physical health".

The Report goes on to cover a wide area, including such subjects as medical and nursing education, research, alcoholism, maternity and child welfare, venereal disease, delinquency, homeless children. On each of these, recommendations are made.

With the World Federation for Mental Health, the Committee recommends close co-operation, particularly in its use as a channel for obtaining information needed on specific subjects.

The Report in English may be obtained through H.M. Stationery Office or direct from W.H.O., Palais des Nations, Geneva, Switzerland, price 2s. 3d.
British Epilepsy Association. Tylor Fox Memorial

The British Epilepsy Association came into being in July, 1950, when an inaugural meeting was held. This was attended by about 80 people representative of social agencies, government bodies, local authorities and the medical profession. The speakers included: Dr. Macdonald Critchley, President of the International League against Epilepsy; Dr. Russell Brain, President of the Royal College of Physicians, and representing Maida Vale Hospital for Nervous Diseases; Dr. Fairfield, Chairman of the Sub-Committee for Epileptics, National Association for Mental Health; and Dr. Denis Williams, Secretary of the British Branch of the International League against Epilepsy. The proposal to form such an association was very warmly received, not only by those present, but by a number of people who were unable to be there; and offers of assistance, particularly with regard to the formation of local units, were received from many areas, including Scotland and the North of England.

The first Council Meeting was held on September 5th, 1950, and the Provisional Council formed at the inaugural meeting appointed Lady Cynthia Colville Chairman, Miss Sybil Campbell Vice-Chairman, and Miss Gairdner Hon. Secretary for the time being. It is hoped that the Executive Committee of the National Association for Mental Health will continue to allow their address to be used until the new Association has been able to raise some funds. It was agreed that the main objects of the Association should be:

1. to educate the public as to the social acceptability of the epileptic in the community;
2. to co-operate with other bodies to promote the welfare of the epileptic in education and industry so as to permit him to take a normal place in society;
3. to encourage the formation of local units.

The immediate programme is designed to carry out these objects and will include the setting up of an advisory and information bureau and the holding of a school for workers. Plans for a financial appeal are in hand and an attempt will be made at an early date by every means available to bring before the public the true facts regarding epilepsy and its effect on the individual.

Enquiries for further information should be addressed to Miss Gairdner, at 39 Queen Anne Street, W.1.

Racial Discrimination—a Bugbear

UNESCO has recently published a pronouncement summarizing the most recent findings on "race" reached by an international panel of scientists, including psychologists, sociologists and anthropologists.

These findings should effectively cut the ground from the feet of those who profess to base their ideas of racial inferiority on scientific data, for they demonstrate categorically that:

(a) There is no proof that races differ in intelligence, temperament or other innate mental characteristics.
(b) The social results of race mixtures are caused by social factors alone, and there is no biological justification for prohibiting inter-marriage between persons of different ethnic groups.
(c) Race is less a biological fact than a social myth—"a myth which has in recent years taken a heavy toll in human lives and suffering and still keeps millions of persons from normal development, and civilization from the full use of the co-operation of productive minds".

Here we have a scientific vindication of the Christian, and ethical championship of the rights of the coloured people. It would seem that the reasons for racial discrimination that remain are therefore either frankly political and economic, or due to psychological inability to deal with deep-seated fears and superstitions due to old, unhappy, far-off things.

Disabled Persons

It is disappointing to find, in the section of the Ministry of Labour's Report for 1949 which deals with the resettlement of disabled persons, that there is no reference to psychiatric or mental disability as constituting a special problem. All that we are told is that out of the 935,007 persons registered as disabled at the end of October, 1949, 5 per cent. were in the "psychiatric group", but the proportion of members of this group admitted to Remploy Factories is not recorded.

It is stated that at the end of the year, 64,200 registrants were unemployed and that some of these may prove to be unemployable, but we are not told the reasons for unemployability and it would be interesting to know what proportion of mentally disabled persons is included in this "hard core".

The National Advisory Council on the Employment of the Disabled has recommended a " stricter application of the Regulations in the acceptance of future registrations or renewals ".

"The Register", it is stated, "is primarily a means towards giving the disabled the satisfaction, wherever possible, of playing their part as productive members of the community, and there would be no purpose in having on the Register persons who have no reasonable prospect of undertaking remunerative work. Registration of such persons could only lead to disappointment."

There would seem to be an indication here that the people to whom this statement alludes, could be more suitably provided for by Welfare Services under Section 29 of the National Assistance Act, which includes, it will be remembered, the provision of workshops and home employment.

It is encouraging to know that there is now a total of 72 Remploy Factories but at the end of the year they were not yet working to full capacity, for if they were to develop as efficient production units, workers had to be taken on gradually.
Mental Health Advisory Committee

The first Report of the Central Health Services Council constituted under Section 2 of the National Health Service Act, has recently been published.

It is stated that the outstanding task of the Standing Health Advisory Committee of the Council during this first year was the preparation of a report on the care of the aged; other mental health matters occupy only four short paragraphs of its report and it must have been disappointing to its members—all recognized for their eminence and energy—that they did not find it possible to give any constructive lead. Thus, on the subject of “Prevention and After-Care” all that could be said was:

“Very little in the way of organized effort in the field of preventive psychiatry exists in this country, but it is difficult to advise what should be done as so little is known of the exact causes of mental illness.”

This is surely a rather pathetic statement and it is remarkable that the Committee does not seem to feel free, if the position is correctly described, to make the obvious recommendation that more opportunities of research should be provided.

The paragraph continues:

“Local Authority after-care services are also far from fully developed; in particular, further consideration is required of the arrangements for those discharged for mental health reasons from the Fighting Forces. The Committee proposes to keep these subjects on its agenda.”

Psychiatric social workers are, it is noted, in short supply and the Committee accept the fact that “some dilution may have to be faced”—a neat understatement! It must have been distressing for them to have to study the Mackintosh Report and yet to be debarred, for financial reasons, to recommend its implementation.

Referring to the “Boarding Out of Mental Patients in Family Care”, the Committee commend the system and would “welcome an experimental scheme on these lines in this country under expert organization and direction”. On this subject it is hoped to report at a later date.

Have the Voluntary Associations an opportunity here?

British Journal of Delinquency

In publishing a quarterly Journal, the Institute for the Study and Treatment of Delinquency has taken an important step forward.

The Journal’s object is described as being to collate all available information in the field of delinquency and to keep its readers in touch with the latest advances and researches. Its Editorial Board consists of Dr. Edward Glover, Dr. Hermann Mannheim and Dr. Emanuel Miller, and on its Advisory Board are serving psychiatrists, psychologists and sociologists and other experts.

Articles on such subjects as “Capital Executions in the United States”, “Dorothy: the Psycho-Analysis of a Case of Stealing”, “The Dutch Prison System: a New Psychiatric-Observation Hospital”, with Notes, Reviews and Abstracts.

The annual subscription for four numbers is 27s. 6d. ($4.00), which should be sent direct to the publishers, Ballière, Tindall & Cox, 8 Henrietta Street, London, W.C.2.

Juvenile Delinquency

In a Paper issued jointly by the Home Office and the Ministry of Education in July, 1950, it is recorded that 73 of the 145 Local Authorities in the country have now held local conferences on Juvenile Delinquency, in accordance with the suggestions made in the Memorandum of April, 1949. A further 15 have announced their intention of holding conferences in the near future. In 58 areas, committees composed of representatives of the local services concerned with the welfare of children and young persons, have been formed.

Figures so far available show a downward trend in juvenile delinquency. In 1948, the number of children under 14 found guilty of indictable offences in England and Wales and dealt with by magistrates’ courts was 28,715; in 1949, 24,872; and for the first five months of 1950, 11,175. Comparable figures relating to delinquents aged 14 and under 17 were 16,991, 15,054 and 7,116.

Senior Child Care Course

We have been asked to state that the note which appeared in our Spring issue about this Course organized by the London Institute of Education, may have been misleading “in describing the Course as leading to a qualification for particular posts although posts of the kind stated have been obtained by students”.

“‘There is’, the statement continues, ‘no approved qualification for appointment as Inspector in the Children’s Department of the Home Office; such posts are open to candidates of varied qualification and experience’.”

 Provision for E.S.N. Children

On July 13th, in reply to a question, the Minister of Education stated that 27,577 children had been ascertained by Local Education Authorities as requiring education in special schools for the educationally subnormal. Of these, 15,030 were actually attending such schools and 63 were being maintained in independent schools. The remaining 12,484 were awaiting admission to special schools.

Mr. Tomlinson added, in answer to a further question, that although the problem was proving difficult to solve, some progress had been made. During the last four years, 1,750 additional places had been provided, and by the end of 1951 another 2,000 should have been added.
Neglected Children

In a Circular issued jointly by the Home Office, the Ministry of Health and the Ministry of Education (No. 943,863/28, July 31st 1950), attention is called to the needs of children who are neglected or ill-treated in their own homes, and some suggestions are made for dealing with the problem.

After enumerating the various statutory and voluntary services from which the necessary help may be obtained, the outstanding necessity for their co-ordination is urged, and Local Authorities are asked to consider the following suggestions:

(a) That a special officer should be designated to be responsible for enlisting the interest of those concerned, and for devising arrangements to secure full co-operation.

(b) That the designated officer should hold regular meetings of officers of the local authority and other statutory and voluntary services concerned.

(c) That to the designated officer should be reported all "significant" cases of child neglect, and all cases of ill-treatment coming to the notice of statutory or voluntary bodies; such cases would be presented by him to the meeting so that after a consideration of the needs of the family as a whole, agreement on how to meet its needs might be reached.

It would seem that co-operative action on these lines would go far towards remedying a situation frequently found by workers of Family Service Units, in which the advice given by officers of Authorities and voluntary agencies, to mothers of "problem families" is contradictory.

But however efficient the machinery of the type indicated above proves to be, there will remain a "hard core" of families where children are neglected, which can be dealt with only by means of the intensive and exceedingly "costing" social work carried on by the Family Service Units.

Thus the First Annual Report of the Kensington and Paddington Unit formulates its basic principles as follows:

"The work is based on the belief that the problem can only be dealt with by means of an intimate friendly relationship between the case-worker and the whole family. This relationship must be one of respect and mutual confidence, of patient and persistent goodwill. It must not, however, be allowed to degenerate into sentimentality. The family must be inspired to change, shown the way and supported through times of crisis until rehabilitation is effected."

Such work, if adequate financial support is forthcoming for its extension and stabilization, should provide the scientific basis needed if ways of preventing the future development of problem families are to be discerned.

Mental Hygiene and the Dog

In an issue of the American journal, Mental Hygiene (July, 1944), an article was published on "The Mental Hygiene of Owning a Dog". In the current issue (July, 1950), the writer—Dr. James H.S. Bossard, University of Pennsylvania—gives an illuminating and diverting account of his experiences as a result of that article.

In addition to comment upon it in editorials of three widely-read newspapers, its reproduction in four veterinary journals, its circulation as a pamphlet by animal protection societies, and the sale of large numbers of reprints, over 1,000 letters were received from people of every type and class (including psychiatrists and neurologists), ranging from a high-ranking government official to a farm boy in Delaware and a child of 14 wanting veterinary advice about a poodle!

This extraordinary response is noteworthy, the writer suggests, as revealing certain basic human interests and needs, "leaving no doubt that the love of animals by humans is one of the universals in the existence of both". Thus the part played by household pets in family life must, he contends, be seriously taken into account by all students of mental hygiene.

Royal Commission on Capital Punishment

At its twenty-third sitting (June 1st, 1950), evidence before this Commission was given by Dr. Henry Yellowlees, and on behalf of the Institute of Psycho-Analysis by Dr. Dennis Carroll, Dr. W. H. Gillespie and Mr. Roger E. Money-Kyrle, Ph.D.

A verbatim report of the evidence submitted by these psychiatric experts may be obtained from H.M. Stationery Office (price 2s.). The Memorandum submitted to the Royal Commission by the British Medical Association was published in the British Medical Journal of August 5th.

Mental Health Service in Hampshire

The Health Department of the Hampshire County Council has recently issued a useful little booklet for the information of medical practitioners in the area, giving short summaries of procedure under the Mental Deficiency, Mental Treatment and Lunacy Acts, in so far as this need be known for dealing with patients. Lists of psychiatric clinics, Area Welfare and Duly Authorized Officers, and Occupation Centres in the county, are included in the pamphlet.

Easily accessible information of this type should prove a great boon to doctors who lack the time to make a detailed study of the intricacies of the Mental Health Service, but who should be familiar with its outstanding features.