Book Reviews and Abstracts

MENTAL HYGIENE IN THE COMMUNITY. By Clara Bassett. Macmillan. 1934. 15/- net.

This 400-page book contains a detailed account of mental hygiene and its application to medical, social, intellectual, legal, theological, industrial and recreational, among other activities. So comprehensive a study can have but one aim, "to show the breadth and scope of mental hygiene" as set forth in the introductory chapter.

Its main purpose is that of a reference book to which those who are interested in organising and improving the facilities in their own branch of work may turn. No new material is introduced, but existing material is correlated and arranged in such a manner as to be easily accessible and readily digested by the casual reader.

As might be expected from a non-medical writer, the medical section is the least satisfying, for while much of what the writer says with regard to paucity of teaching on mental hygiene in medical schools is unfortunately true, little or no mention is made of the contribution that the medical profession has made to the study and advancement of mental hygiene during the present century.

The section on mental hygiene and nursing, on the other hand, is particularly adequate, and might well be read and utilised by those who are responsible for the education and training of the nursing profession. The contrast between the handling of a patient under controlled hospital conditions and in his own home where the nurse must be able to adapt to what is often a difficult family group is well brought out, and emphasises the need, by those who follow the nursing profession, for a real understanding of the mechanisms which lie behind human relationships.

The author rightly stresses the need for close co-operation between social agency and psychiatric clinic if mental hygiene is to progress, and perhaps the best chapter in the book is that on mental hygiene in relation to delinquency and the law, in which the arguments in favour of individualised study and treatment rather than the handling of offenders on theories of revenge and punishment is set forth. The conception of the clinical classification centre for delinquents is a significant one, stressing as it does the theory that the "sentence" should be based upon the therapeutic needs of each case with the necessity for knowledge rather than force as the deciding factor in the solution of individual problems.

The treatise forms a practical, scientific and constructive statement of the present position with regard to mental hygiene and is eminently readable. It is limited in one direction only in its usefulness in that it deals solely with conditions and facilities as they exist in the United States of America, and to that extent is of less value to workers in countries such as Great Britain where working conditions are so different.

With the exception of a few carelessly written passages such as that on page 46 which contains a series of split infinitives, the book is written in a clear, flowing style, is easy to read, and owing to its freedom from scientific terms will be readily followed by the general reader.

Although full attention is paid to the theory and practice of mental hygiene as a science, the importance of vocational fitness, selection and adequate training of workers in this field is never overlooked. The general impression is that of a writer who, although she has turned to many different authorities for her information, is also expressing views which are based upon a wide personal experience.

Each chapter concludes with an appendix in the form of suggestions for the scientific development of mental hygiene in that particular subject, and should prove a valuable aid to those who are undertaking reorganisation and development of existing facilities.

The book is one which should find its place on the shelves of every well-equipped sociological library.

M.B.H.

A POINT SCALE OF PERFORMANCE TESTS. Vol. II. THE PROCESS OF STANDARDISATION.

By Grace Arthur, Ph.D., Psychologist, St. Paul Child Guidance Clinic. The Commonwealth Fund, and Humphrey Milford, Oxford University Press. 1933. Price 6/6 net.

This volume concludes Dr. Arthur’s valuable contribution to the measurement of I.Q. by use of performance tests. The use of the scale has demonstrated that intelligence as
measured by the Binet scales can also be measured by performance tests.

The point scale is derived from the following performance tests:—

Form I. Knox Cube I.
   - Seguin Form Board.
   - Two-figure Form Board.
   - Casualt Form Board.
   - Manikin and Feature Profile.
   - Mare and Fowl.
   - Healy Picture Completion I.
   - Porteus Maze (including Adult Mazes I and II).
   - Kohs Block Designs.
   - Knox Cube II.

Form II. Knox Cube I (tapping from left to right).
   - Seguin Form Board (inverted).
   - Triangle Test (Gwyn).
   - Five-figure Form Board (Paterson).
   - Ship Picture Form Board (Glueck).
   - Healy Picture Completion II.
   - Porteus Maze (rotated 90 deg. to the left).
   - Kohs Block Design (inverted).
   - Knox Cube II.

These tests are standardised on more than 2,000 children, ages 5 to 15 years. The work of standardisation extended over a period of two years. For determining whether the groups represented a sampling of an average American population, the 2,000 children were classified according to the occupation of the fathers, and compared with known norms. The various performance tests were examined in great detail for the most discriminative scoring procedure, and data is supplied in the present volume which should be useful to other psychologists who are interested in the discriminative value of these tests. The volume is a veritable mine of information on the matters just recorded, as may be judged from its 43 tables.

Five hundred and seventy-four of the subjects were also tested for Binet mental age, and the final point scales were compared with these Binet measurements. The point scales were reported in Volume I, but are again printed in the present volume. The standardisation for Form II is admitted to be less satisfactory than that for Form I.

Correlation tables, for correlation between Binet I.Q. and Point Scale Performance, are given in detail for each chronological age. It is a pity, however, that the actual product-moment correlations are not reported. This seems to be the only weakness in the otherwise excellent record of standardisation data.

The final Chapter (VI) gives a short account of a study on the race and sex differences shown in the comparison between the Binet and the Point Scale Performance I.Q. measurements. The racial differences are only suggestive, for a group of 18 Italians, and 38 Jewish children. The Jewish children succeed better at the Binet Simon than at the Performance, whereas the opposite is the case of the Italian children. There are no significant sex differences for the Performance tests for the 2,000 data, except a repetition of the well-known fact that girls earn slightly better ratings on the Binet scale, on the average, than do boys. Any differences between boys and girls on the Point Scale Performance test are probably due to this fact.

The whole is a thorough exposition of the standardisation procedure followed by Dr. Arthur and Dr. Herbert Woodrow. It is a book of facts only, which, of course, can appeal only to those interested in test construction and standardisation.

W.S.

The Oxton Group Intelligence Test. Devised by G. Perrie Williams, M.A., D.Litt. G. G. Harrap and Co., Ltd. Forms 6d. each, 25 for 6/-, 100 for 21/-.. Key 1/6 net.

The test is apparently meant for junior children, although this is a matter for surmise, since there is no information to this effect on the test itself. It has five subtests, and takes half-an-hour to apply. Perhaps its most commendable feature, if not its only one, is that three of the subtests are comprised of pictorial test-units.

Page I, a sheet 10 by 16 inches, requires the usual information as to the child’s name, age, and school. The page might have been put to much more use by providing, for instance, forepractice in one or more of the subtests. Pages 2 and 3 contain 20 picture test-items (questions) of a simple classification kind. Thus, in one test-unit, a drawing is shown of a beet-root, and the child has to select from eight drawings two which are "most like"
the beet-root—in this case a drawing of a turnip, and one of a malformed carrot or parsnip. Subtest II, on pages 3 and 4, is again pictorial, but only has seven test-units of a selective series kind. The subtest is far from satisfactory. I know it to be unreliable, and is easily misunderstood by children. The seven test-units are too few, and they appear not to be in order of difficulty. Subtest III, on pages 5 and 6, also pictorial, is in analogous form.

These three pictorial tests may appeal to some children, but they have been shown, many years ago, to offer no advantages over verbal tests in point of measurement of "intelligence." They suffer, indeed, from the same disadvantages as verbal tests. There is a vocabulary of pictures as well as of words.

Subtest IV merely requires the child to strike out the largest number in a line of six numbers. Under most circumstances this subtest will have a g-saturation (an index of the test's fitness to measure intelligence) of negligible amount, more especially as applied in this group test. On the same page (page 7) there is subtest V, a verbal selective opposites test. One word is given, and the child has to select its opposite from a list of five words.

No norms or reliability figures are given. The 30 minutes' testing time is for the test as a whole. That is, the children work their way through the test as they list. This technique, used also by Professor G. H. Thomson in his Northumberland tests, has little to commend it, and very much can be said in its disfavour. The tests might, I suggest, be standardised for 9 to 10 year olds. Otherwise its use is limited.

W.S.

Cleft Palate Speech. By Joan H. van Thal. With an appendix on kindred disorders. Allen & Unwin. 3/- net. 1934.

The subject of Cleft Palate Speech is, undoubtedly, not one of universal interest, such interest as exists probably being confined, chiefly, to surgeons, dentists and speech therapists, each of whom play their part in the treatment of this distressing condition. Among the general public, the majority would not recognise the speech for what it is, even if they heard it, with the possible exception of a few who had encountered some unfortunate person "with no roof to his mouth"—the popular description of this defect. The only people who are, naturally, deeply concerned are those who are actually in contact with such a case, either among their friends or in their own family.

This organic defect is, happily, comparatively rare, although one cannot give statistics to show how often it occurs. Where such a condition is present, the speech is very ugly, and, often, completely unintelligible to those unaccustomed to it, and anybody who has dealings with such cases would do anything within his power to help them to correct it. It is not only a great handicap in everyday intercourse, but also in the way of finding employment, which is a serious consideration in these days of reduced incomes. What is just as important, in a different way, is the psychological effect, upon an individual, of being unable to speak normally. If this inability is not removed, his whole mental and psychological development is liable to be affected. It is, therefore, urgent that speech training should be given as soon as the child is old enough to benefit, and such training should be in the hands of an expert who has made a special study of this particular branch of the subject. There may, however, be children who live far from a town and out of reach of such an expert. In any case, the expert will probably see a child two or three times a week only and for short periods. Is he to continue to speak in the old, faulty way between these visits, and is the child who is out of the expert's reach to have no chance of improving his speech? The answer to these questions is that much may be done by the parent or teacher, or by the sufferer himself, and it is to help these people that Miss van Thal has written her book. She has specialised, for many years, in the treatment of Cleft Palate Speech and can, therefore, speak with authority. The book is excellent—simply written, so that it may be understood by anybody. She has deliberately avoided the use of technical terms. It is divided into four chapters:—

1. A description of what Cleft Palate is.
2. How Speech is affected.
3. Treatment (with a table of exercises).
4. Advice to Pupils, Parents and Teachers.

There are, also, two short appendices, one on kindred disorders, and one describing a simple apparatus used in the treatment and devised by Miss Elsie Fogerty, who contributes a Foreword to the book.
The first chapters, which give a description of Cleft Palate and explain why it should affect speech, also tell how surgical or dental treatment may be given, and ably answer the anxious question of parents as to "What can be done." Without surgical or dental treatment first, it is not possible to improve the speech to any great extent.

The exercises, given in later chapters, are interesting and very well graded. They really go back to the foundations of speech and keep in mind the precept, quoted by the author, that we must walk before we can run, gradually working up to more advanced practice. The three "Slogans" express what is required, but might, perhaps, have been worded in a way which would appeal more to a child and so remain in his memory more vividly. Slogan 3 is the best in this respect:—"Keep your mouth shut, unless you are putting something in or letting something out," but Slogan 1:—"You must practise at least twenty minutes every day" might be expressed in a more interesting form. We do not altogether agree with the author's definition of a continuant and a fricative as the same thing (on page 61). That, however, is a minor point, and one which would not trouble the average reader. It does not, in any way, detract from the merit of the book as a whole, which is excellent and to be very warmly recommended to all who are interested in the subject of Cleft Palate Speech.

D. M. Fleming.

Social Work for Mental Hospitals and Out-Patient Clinics. By St. Clair Townsend. Published by Child Guidance Council, Woburn House, Upper Woburn Place, W.C.1. Price 3d.

With the passing of the Mental Treatment Act, and the subsequent developments in the establishment of Out-Patient Clinics and the increase in early and voluntary treatment, the necessity for specially trained psychiatric social workers is being increasingly recognised. Miss Townsend has in this pamphlet given a brief but comprehensive account of the work there is to be done by the social worker both in Out-Patient Clinics and Mental Hospitals. Cases illustrating the valuable assistance which can be given by a worker are quoted. The question of the type of worker most fitted to undertake work of this nature is also dealt with and stress is laid on the need for special training.

Social welfare organisations, whether directly connected with mental health work or not will find this an informative pamphlet which will help them in answering enquiries on this branch of social work.

The Care and Training of Mentally Defective Children. By Jennie Benson. Law & Local Government Publications, 1934. 3/6 net.

As we go to press we have received a copy of this book, the publication of which we have awaited with great interest. Unfortunately, it is too late to include a review of it with this issue but it will appear in our July number.

Some Recent Books and Reports

*Care and Treatment of Mentally Defective Children. J. Benson. Law and Local Government Press. 1934. 3/6 net.
†The Chances of Morbid Inheritance. (Edited by C. P. Blacker, M.D.) Lewis & Co. 1934. 15/- net.
*Cleft Palate Speech. J. H. van Thal. Allen & Unwin. 1934. 3/- net.
[Introduction to Social Science for Health Visitors. F. Wilkins. Arnold. 1934. 4/- net.
*Mental Hygiene in the Community. Clara Bassett. Macmillan. 1934. 15/- net.
A New Physiological Psychology. W. Burridge. Arnold. 1934. 7/6 net.
*Oxton Group Intelligence Test. Harrap. 6d. each, 25 for 6/-. 100 for 21/-,. Key 1/6.
*A Point Scale of Performance Tests. Grace Arthur. 1933. Oxford University Press. 6/6.
Psychology and Psychotherapy. W. Brown (new edition). Arnold. 1934. 12/6 net.
Psychological Analysis Today. Sandor Lorand. Allen & Unwin. 1933. 18/- net.
*Reviewed in this issue.
†To be reviewed in next issue.

List of Additions to the Library.

Basset, Clara. Mental Hygiene in the Community.
Gillespie, R. D. The Mind in Daily Life.
Joan H. van Thal. Cleft Palate Speech.