

**CENTRAL ASSOCIATION FOR MENTAL WELFARE**  
[INCORPORATED]

The following Resolution was passed by the Executive Council of the Central Association for Mental Welfare at a meeting held in Caxton Hall, on Monday, 8th July, 1929, and has been forwarded to the Prime Minister, the Minister of Health, the President of the Board of Education and the Chairman of the Board of Control:—

THAT the Council of the Central Association for Mental Welfare, having considered the Report of the Joint Departmental Mental Deficiency Committee of the Board of Education and the Board of Control, and in view of the large number of defectives shewn to exist in the country, of their increasing cost to the community, and of the insufficiency of the existing provision for their proper care, training, supervision and control,

UNANIMOUSLY RECOMMEND:—

- (1) THAT, as for certain types of mentally defective persons the only effective means of care and prevention which is at present practicable, is by segregation of urgent cases in Institutions, Local Authorities be urged to press on the provision of suitable accommodation of this kind.
- (2) THAT a Royal Commission be immediately appointed to make full enquiries into the causation of mental deficiency, into its relationship to other abnormal mental conditions and social problems, and into any measures, including both segregation and sterilisation, by which it might be prevented.

In connection with the above Resolution, the following letter appeared in the *Times* on 22nd July, 1929, and is reprinted here by courtesy of the Editor.

TO THE EDITOR OF *The Times*.

Sir,

Since its formation in 1914, the Central Association for Mental Welfare has on numerous occasions drawn public attention to the social problem presented by mental deficiency and to the grave consequences and serious cost entailed by the presence of mental defectives in the community. These views have received full and striking confirmation in the Report of the Joint Mental Deficiency Committee of the Board of Education and the Board of Control which has just been published.

This Report emphasises the fact that the essential criterion of mental deficiency is the social one and that "if a person is suffering from a degree of incomplete mental development which renders him incapable of independent social adaptation and which necessitates external care, supervision and control, that such person is a mental defective."

The Report further shows that the number of defectives, and consequently the gravity of the position, is very much greater than has hitherto been thought. Whereas in 1908 the number of defectives was estimated by the Royal Commission on the Feeble-minded at 4.6 per 1,000 of the population, equivalent to a total of approximately 150,000 defectives in England and Wales, the number ascertained to-day is not less than 8 per 1,000, corresponding to an approximate total of 314,000 defectives in England and Wales. Doubtless to some extent this increased number is due to more complete ascertainment and to certain other factors, and the Committee are obviously cautious in making a comparison and drawing conclusions; they nevertheless state "it is hard to believe that there has not been some increase in the incidence of mental deficiency during this period."

It is of great importance to realise that although since the Report of the Royal Commission in 1908, the Mental Deficiency Acts have been passed and the education of defective children, formerly optional, has been made compulsory, the conditions, in view of the increased number of defectives now revealed by the Report of the Joint Mental Deficiency Committee, show very little improvement upon those which existed twenty years ago. With regard to children, it is estimated by the Committee that at the present time there are approximately 105,000 in need of, and capable of profiting by, special instruction. Of this number, only 33,000 have been "ascertained" by local education authorities, and educational facilities have been provided for only half of those ascertained. With regard to adults, the Committee estimate that there are at least 175,000 defective persons needing, and who should be definitely under, the care of local authorities. The total number of persons receiving this care by way either of institutions, guardianship or supervision, does not amount to 40,000, *i.e.*, less than one-fourth. These figures fully justify the Committee in saying "The provision made by authorities for the care of defectives, whether in the community or in institutions, is by no means sufficient even for the relatively small number who have been ascertained and is totally inadequate when compared with the far larger number of defectives who, as our investigator has shown, require care and protection under the Mental Deficiency Acts."

It is clear that the problem is much more serious and pressing than has hitherto been thought, and we urge that a vigorous effort should be made to grapple with it without further delay. Its solution naturally falls under two headings and to these we desire briefly to direct attention.

## (1) THE CARE OF EXISTING DEFECTIVES.

The presence of mental defectives in a community and their training, care and supervision, must inevitably be attended with considerable cost, but we are convinced that, in the long run, it is much more expensive to neglect them. There is abundant evidence, based on records covering many years from After-Care and Mental Welfare Associations, that, whilst untrained and unsupervised defectives are in some way or other maintained in large numbers by the public without any economic return, and often under conditions which entail no little menace to the well-being of society, yet a large proportion of those who have received suitable training can subsequently make a material contribution to their maintenance in institutions or colonies, or even in the general community if under proper safeguards. In addition to these economic arguments, the proper care of these defectives is also deserving of consideration on grounds of humanity. We therefore urge that immediate steps should be taken to provide suitable educational and training facilities for all mentally defective and mentally subnormal school children, and that local authorities should, without delay, provide suitable and sufficient institutions and colonies for those needing this form of care, and proper supervision and control for those capable of being left in the general community.

## (2) THE PREVENTION OF MENTAL DEFICIENCY.

This is obviously a much more difficult problem. The segregation in institutions of defectives who are likely to propagate offspring and the prohibition of the marriage of defectives, would undoubtedly have some preventive effect in cutting off that proportion, probably small, of defectives who are the offspring of defective parents. *We therefore press for the adoption of these measures as matters of urgency.* Whilst the sterilisation of certain defectives would also have some preventive effect, it is the opinion of the Council of this Association, based on the extensive first-hand knowledge possessed by its members of all aspects of mental deficiency, that this preventive effect would be comparatively small and might easily be counterbalanced by resulting disadvantages. But the whole Council is convinced that before any preventive measures of real value can be taken, it is essential to have complete and accurate data regarding the many factors concerned in causation.

The matter of prevention is undoubtedly one of great importance to the community and we therefore urge that a full enquiry, by a Royal Commission or other suitable body, should be made into the causes of mental deficiency, into its relationship to other abnormal mental conditions and social problems, and into the value of the above-mentioned and other measures by which it might be prevented.

Whilst we consider such an enquiry for the ascertainment of the right methods of prevention to be essential, we desire to emphasise the urgent necessity for the adequate training, supervision, care and control of all those defectives who already exist. Segregation and efficient supervision are not only necessitated by the social incapacity of these persons, but these are also preventive measures which are of most practical value in the present state of our knowledge.

We are, Sir,

Yours faithfully,

LESLIE SCOTT, *President.*

BURNHAM

CYRIL BURT

IDA DARWIN

NORAH L. COOKE HURLE } *Vice-Presidents*

W. R. INGE

F. C. SHRUBSALL

F. DOUGLAS TURNER

H. B. BRACKENBURY, *Chairman, Education Committee*

F. E. FREMANTLE, *Chairman, Parliamentary Committee*

A. F. TREDGOLD, *Chairman, Medical Committee*

MAY HOPE

F. J. WILLIS } *Hon. Treasurers*

LETITIA FAIRFIELD, *Hon. Medical Secretary*

EVELYN FOX, *Hon. Secretary*

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## News and Notes.

### Board of Control Appointment

On the recommendation of the Minister of Health, the King has been pleased to appoint Dr. Bedford Pierce to be a temporary Commissioner of the Board of Control.

### Broadcast Appeal

An appeal on behalf of the C.A.M.W. was broadcast by the Rt. Hon. Sir Leslie Scott, K.C., from 2LO, on Sunday evening, June 9th, and resulted in the receipt of donations amounting to £629 9s. 7d. Much interest was aroused by the broadcast and the Association has received letters of enquiry from all parts of the British Isles as a result.