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REVIEWS AND NOTICES

FEEBLE-MINDEDNESS AT THE FOURTH IN
TIONAL CONGRESS OF SCHOOL HYGIENE,
FALO, NEW YORK, 1913

The Present Attitude of the Bureau of Child Hygiene o
of Buffalo Towards the Defective Child. F. W. E
Transactions, Vol. III, Pp. 419-423.

The Medical Inspector and Feeble-Mindedness. W. S.
Transactions, Vol. V, Pp. 609-613.

The Results of Applied Therapeutics to So-called
Deficient Children. J. J. CRONIN. *Transactions, V*
444-485.

e of the School in the Problem of Mental Deficiency. ABETH E. FARRELL. *Transactions, Vol. III, Pp.435-443.*

ormal Child. F. E. FRONCZAK. *Transactions, Vol. III, Pp.* 6.

ersity in Relation to the Problems of Mental Deficiency. SELL. *Transactions, Vol. V, Pp. 614-620.*

Mentally Deficient—How Many Are There—and How They Be Detected? H. H. GODDARD. *Transactions, Vol.* *621-628.*

Mentally Defective Child Be Educated in the Public ols? HELEN MAC MURCHY. *Transactions, Vol. III, Pp. 486-*

ent Factors in the Seeming Increase in Mental Defect. LLE T. SMART. *Transactions, Vol. V, Pp. 532-538.*

nsactions of the Fourth International Congress on School Hy- ned at Buffalo, New York, in August, 1913, are published in of six to seven hundred pages each. The nine papers listed rectly with the subject of feeble-mindedness in the public schools. papers touch on the subject indirectly, but the whole does not ndred pages in all. This represents a rather scant recognition ect as compared with its importance to the schools. It undoubt- the fact that the public schools on the whole still do not realize xtent of feeble-mindedness among public school children and s their presence raises for the schools. However, some of the a hopeful progress, at least in some localities. Barrows argues sentimentality of calling the really feeble-minded by disguised as "backward," "ungraded pupils," etc. He suggests that the m should locate every feeble-minded child in the city by name , and keep these on record. Farrell holds that "The public ld be the clearing house for all knowledge relating to the de- of children which in any way affects the community interest," he school holds the strategic place in solving the problems of ciency." Because the public schools are at present not vested ity to commit feeble-minded children in public schools to special for the feeble-minded the latter are assured further generations . A plan is recommended to establish classes for the feeble- te public schools, where they are to be kept until later childhood, mmitted to the special institution by a state board of physicians, sociologists, and psychologists, which is to pass on all commit- s gives the child a thorough trial, leaves him in the care of the l sexual maturity, and lessens the state expense. MacMurchy

regards the special classes as an indispensable part of the mod system. In addition to their regular functions, they should furni of finding the feeble-minded, for which class they should be th house, to commit them to a permanent home and school of the village type. Cornell discusses the qualifications of the medical The average physician does poor or mediocre work at first with fectives. A special training is required. He should have a knowl factors which cause mental deficiency, and of the clinical evidence deficiency. It involves sociology, psychology and medicine. He mus the right temperament and disposition to handle children. Gesell that the University may deal with the problems of feeble-mindedn ways. (1) Through University research and extension departme nection with institutions for defectives. (2) Through psycho- clinics and normal training courses in connection with University of psychology and education. (3) Through five-year medical co cializing in child hygiene. Goddard accepts the definition of feeb ness given by the Royal Commission. He repeats his statemen per cent. of the public school children are feeble-minded, and tha Simon tests in the hands of one who understands them are a determining whether a given case is feeble-minded or not.

Faribault, Minnesota. F. KUHL

THE BINET-SIMON TESTS AT THE FOURTH IN TIONAL CONGRESS OF SCHOOL HYGIENE BUFFALO, NEW YORK, 1913

Recognition of Mental Defect in the Higher Grades. W. NALD. *Transactions, Vol. III, Pp. 543-552.*

The Degree of Mental Deficiency in Children as Expre Relation of Age to Mental Age. F. KUHLMANN. *Vol. V, Pp. 629-636.*

The Value to Be Derived from Giving Mental Tests to Children. W. H. PYLE. *Transactions, Vol. V, Pp. 63*

Some Theses Regarding the Scientific Use of the Bine Measuring Intelligence. O. BOBERTAG. *Transact Pp. 642-644.*

Some Requirements of Graded Mental Tests. CARRIE *Transactions, Vol. V, Pp. 645-648.*

mitations of the Binet-Simon Tests of Intelligence. S. S. BERRY. *Transactions, Vol. V, Pp. 649-654.*

rison of White and Colored Children Measured by the Scale of Intelligence. J. MORSE. *Transactions, Vol. V, 5-664.*

ns on the Extension of the Binet-Simon Measuring E. A. DOLL. *Transactions, Vol. V, Pp. 665-669.*

of the Binet Scale with Delinquent Children. GRACE M. ALD. *Transactions, Vol. V, Pp. 670-677.*

Misconceptions in Regard to The Functions of Binet ng and of Amateur Psychological Testers. J. E. W LIN. *Transactions, Vol. V, Pp. 678-689.*

tch Experiences with the Binet Scale. A. J. SCHREU- *Transactions, Vol. V. Pp. 690-692.*

bility of the Binet-Simon Measuring Scale of Intelli- H. H. GODDARD. *Transactions, Vol. V, Pp. 693-699.*

ns for Revising, Extending, and Supplementing the Intelligence Tests. L. M. TERMAN. *Transactions, Vol. V. 9-707.*

Fernald outlines a plan for a clinical examination to determine f intelligence. He believes the Binet-Simon tests to be inade- e determination of the grade of intelligence of adolescents near e of normal intelligence. Kuhlmann points out that the mental r the difference between age and mental age does not alone grade of intelligence in the case of children, and discusses nce quotient, or mental age divided by age, as a truer index intelligence. Pyle argues that group tests might be used to mine all the children of a school system, and that those found up tests to vary much from the average normal might then ividually. He discusses some group tests used by him for this e test results should be used as a guide in adjusting kind of thod of teaching to individual children found to vary from the Bertag notes that but little of the results of the extensive work e Binet-Simon tests is of scientific value, and lays down a num- that users of the tests should observe to remedy this. Squire ome defects of the tests. The chief defect, she thinks, lies in the same or similar tests are not kept from one age group thus not making the tests comparable, age for age. Secondly, uired knowledge as well as native ability. Thirdly, they are

affected too much by language ability. Fourthly, they should te
capacities and functions. Fifthly, the procedure in giving them
standardized. Berry thinks that in order to make the tests of e
those depending largely on experience should be eliminated.
for the higher ages are too difficult. The absence of tests for t
eleven, thirteen, and fourteen makes it impossible to estimate
from ten to fifteen accurately. The mode of procedure should
ardized. Morse reports the results of an examination of 123
225 white children by a graduate student. Children of varying a
selected by the teachers to make them representative. He finds te
of the white, and twenty-nine per cent. of the colored children ret
one year, and eighty-four per cent. of the white, and seventy p
the colored satisfactory. Dividing the white into "mill" and
dren, shows the mill children inferior to the city children, but
the colored. Doll notes that the scale of tests can not measure
beyond the mental age of ten. He discusses a number of rea
might by supposed that tests of intelligence of adolescents and
not be devised, but does not consider them insurmountable.
tests the following should be considered: (1) There should b
knowledge, or clear hypothesis of the psychology of the age
sidered. (2) There should be a careful selection of those m
tions essential or contributory to intelligence, and then sub
experimentation. (3) Objective tests should be selected accor
out, and the satisfactory ones standardized. He gives a li
characteristics such tests should have. Grace M. Fernald thi
tests may work well with the average school case, but that th
so with the delinquent with little or no school training.
motor-game type should be added in place of those of the a
type. The absence of tests for ages beyond twelve particular
testing of delinquents. Wallin discusses what he thinks are m
ings about what the tests can accomplish, and about the ability
examiners to use them. Schreuder reports the results of e
Dutch school children, aged six to twelve years. They show t
too easy at the lower end and too difficult at the upper end. It
that boys vary more from an average intelligence than do gi
argues for the accuracy of the scale for practical purposes an
for the ages of three to twelve the tests hardly need improv
uniformity in the use of the scale by different testers is cal
man discusses (1) the selection of children for standardiz

estion of age grouping; (3) the per cent. of correct responses or placing a test in its age group; (4) the needed shifting of criteria for the elimination and substitution of tests; (6) desir- of tests per age group. The scale of tests should be extended ds, and other tests added throughout. The value of a scale of tests to aid in interpreting the results of the intelligence tests d.

lt, Minnesota. F. KUHLMANN.

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al Health of the School Child. The Psycho-Educa- Clinic in Relation to Child Welfare. Contributions new Science of Orthophrenics and Orthosmatics. WALLACE WALLIN, Ph. D. New Haven: Yale University 1914. Pp. XIII+463.

ook of nineteen chapters is a collection of twelve reprinted ar- id papers not published before, and two new chapters. Four with clinical psychology as a new science, its nature, functions, and contributions. Four others discuss mental examinations, the Binet-Simon tests, and the mental examiner. Four chapters physical welfare and physical defects of school children. Two cal inspection, and two others of what the schools are doing in of promoting child welfare. A final chapter gives a scheme al examination of children. These collected papers "aim to measure the aid which the practical psychologists and expert nsultants hope to render in the important work of diagnosing, udying and training feeble-minded, backward and mentally dren in the schools." A history and survey of the work in logy in this country leads to the conclusion that the field is defined, and that the necessary qualifications of the psycho- not sufficiently understood. Psycho-clinical work is largely in physicians, and psychologists with no special training for it. nation in the public schools is in the great majority of cases use of the Binet tests by amateurs not at all qualified for the nction of the psychological clinic is given as fourfold.. (1) osis of mentally deviating cases and expert prescription and (2) "The second purpose of the psychological clinic is to serve house for mentally exceptional cases." It has no special in- mal children. (3) "Research, particularly with a view to perfecting diagnostic tests and to extending our knowledge causes and treatment of mental abnormalities." (4) "The of reliable information and knowledge regarding the condition the mentally abnormal classes." The organization of the clinic

for large cities includes six classes of workers. (1) One dire
clinic and department of special education directly responsible to
intendent of schools. (2) One supervisor of special education,
to the director. (3) One or more social workers. (4) "One or
tal testers for some of the routine testing." (5) "One medic
serve as a 'clearing house,' or general utility man on the medical
One or more clerks. Which of the above functions of the clinic
each of these six members of the clinic's staff is not specifically sta

A mental diagnosis involves both a laboratory and clinical
results must give the general mental level, and a comprehens
clinical picture of the case. It must differentiate types and trac
to causes. There are many aspects of mental deviation which fo
alone does not reveal. To become a clinical psychologist requir
training. "The general practitioner, pediatrician, orthopedist,
psychiatrist, educational, experimental, genetic or abnormal psy
lacking in some of the essentials which the expert psycho-clinicia
sess." He must have an expert knowledge of general, experime
tional, genetic and abnormal psychology, and of child study. He
in addition a thorough training in psycho-clinical procedure, inc
in a laboratory clinic and a year's interneship in the first-hand stu
ward, feeble-minded, epileptic, psycho-pathic and disciplinary c
thorough training in educational therapeutics, the differential, co
agogics of the educational expert on mentally deviating children.
Simon scale is only one of many diagnostic devices at the com
trained clinical psychologist, and no system of formal intelligen
devised can be used as an infallible measuring rod of intelligenc
have many imperfections, but are a step in advance, and of consi
to the trained examiner. "They provide a fairly impersonal
method by which to grade or classify, with a fair degree of ac
tutional and school cases relatively to one another." In the h
expert it is "a surprisingly serviceable means of classifying
masses or groups of individuals." The 1908 scale should be us
ence to any of the several revisions that have appeared, "until
mass of clinical data is available for a thoroughly scientific re
scale." The manner in which these revisions have been made
criticised, calling forth the statement that "Superficial work lik
leading and tends to arouse contempt for the slipshod standa
tific work obtaining in this field of applied psychology. Worm
scales, because of the claims made as to their reliability, are
and used by large numbers of uncritical Binet testers who ar
chologists nor scientists and thereby pupils are judged or stig
basis of unproved assumptions." The number of tests for e
should be increased to ten. The present number measures to
insure our striking a fair average for the whole. For the y

lf years should be included. To establish reliable norms not less dred cases of each sex for each age-group should be tested, and must be normal children. The tests should be given to the chil- dually, for group tests do not give reliable norms. The tests need ion of administrative procedure. In order that the results ob- be reliable the tester must have the training of a clinical psycholo- ta of testing by amateurs are probably not more reliable than or- -room standards for determining pedagogical retardation.

neral program for the promotion of child welfare is given chiefly th chapter, on "The Euthenical and Eugenical Aspects of Infant Orthogenesis." The physical and mental development of every its entire growth period should be in charge of the community, hrough the schools and other public institutions. To accomplish measures are laid down. (1) Every child on entering school iven physical and mental examinations by expert examiners. (2) treatment should be given all children deviating from the nor- "Specially trained teachers and special classes or institutions ovided for the mental and physical deviates." (4) For all chil- and mental education should receive equal emphasis. (5) So- mentally incompetent children should be permanently segregated unless adequate protective oversight is insured in the home. (6) psychological work should aim to prevent more than to cure de- measures usually advocated by eugenecists are for the most part ideal from the eugenical standpoint, but a number of difficulties re pointed out. (1) The sexual emotions are the subjective side that are biologically fixed. There is no instinctive repulsion to l matings, and it is questionable whether this can be aroused hings and prohibitions. A racial instinct of sexual modesty op- health examinations, and maternal and filial instincts oppose tion of the eugenically unfit. (2) Public sentiment will not colonization of all misfits. (3) There are no adequate means ng who are eugenically fit and unfit. (4) Eugenical research Following chapters are on "Experimental Oral Orthogenics," n of Oral Hygiene to Efficient Mentation," "Methods of Meas- Orthophrenic Effects of the Removal of Physical Handicaps," Dental Inspection in the Cleveland Schools." The first of these results of an experimental study on the mental effects of ent of a group of children, and will be considered further in A chapter on "Efficiency in School Organization and the Con- the Mental Health of Children" gives twelve case histories of es of deviates among school children, and comes to six conclu- which, however, have already been noted in connection with other ter XVIII on "Public School Provisions for Mentally Unusual usses results obtained in answer to a questionnaire sent to pub-

lic school superintendents, replies from 302 cities having been

The reader who has been following developments along which this book treats will have some things to criticise. As treatment of one central theme the book is disappointing, as all reprints and old unpublished papers are apt to be. It lacks plan and unity, and is full of needless repetitions. It repres miscellaneous collection of personal opinions of the author whe has been rather too brief and limited in the many fields of inq to command the weight of authority. The author's failure to literature previously published, and the copious advice, sug plans given leave the impression of the unscholarly and amateu references to literature is given in only three out of the nine and only several of those in the list are referred to in the text. for these chapters are: "The New Clinical Psychology, and clinicist;" "Individual and Group Efficiency;" and "Medical a spection in the Cleveland Schools." Why the reader should b literature on these particular topics and not to literature on the clear. A chapter on "The Present Status of the Binet-Simon of Intelligence" gives no list of references, and only three fou erature, all of which refer to a study previously published, an this book, by the author. Out of several hundred publicatio have been consulted for this chapter one of the author's own to which more than half of the nine pages of this chapter is study gives the results of examining 333 *epileptics*, and from of the tests is judged. The author's strong and continuous p standards of scientific work in mental diagnosis, and for a for mental examiners is in itself commendable enough, but it leading, and involves some erroneous assumptions. To quali mental examiner one must be an expert clinical psychologist, when we note his enumeration of the qualifications of the psychologist it becomes obvious that either no such person a or else "expertness" is taken in a rather loose sense. The au qualify as an expert according to his own definition. We a Binet-Simon tests is only one of many means the expert h making a mental diagnosis: that other mental tests, and of the case must be made to constitute a reliable diagnosis other tests with established norms are given by the author come to his final chapter presenting his schema for the c children we find nothing essentially different from a score in which the literature has abounded for years, but which ha of great value in practical work. If the author had prese tests, with their manner of use, and had shown us definitely data called for in his schema could be gathered and utili mental diagnosis some contribution would have been made. instead the assurance simply that this matter may be left

psychologist. Practically all other psychologists of experience Simon tests who give their opinion testify that the tests should great aid to any teacher in arriving at a better knowledge of ligence. Dr. Wallin, however, is convinced that the results of testers are not of much greater value for this purpose than the l records already existing. He insists that the general and ing of the psychologist are necessary to make a reliable Binet- a kind of dogmatism that he severely criticises in other stu- Binet-Simon tests. The reviewer's actual experience, agreeing others, positively and emphatically disproves this assumption. visions of the tests that have appeared by different authors are as unreliable, and apparently as poorer than the original that since the fact is lamented that the revisions, because of the to their reliability, are used by uncritical and uninformed test- a serious charge. It is unfair to the revisers if the inference is they are making great and immodest claims for their revisions. hat he has made an improvement over the original, and no im- will deny that this much is proven. But let us note the author's garding the revisions all as unreliable. They are because (1) l children have not been used to obtain the norms; (2) there extensive number of cases examined for every age; (3) the not just passed their birthdays at the time of examination; (4) ide range method of testing was not used. We may grant all nts as true. They are mostly irrelevant and all misleading in ons. That the author should regard them as proof that the unreliable and no improvement over the original shows rather followed the analysis of the results on which the revisions are he is lamentably ignorant of the theory and technique of a like that of Binet-Simon.

contains two chapters on the results of two experimental gives the results of examining 333 epileptics with the Binet- e other gives the results in the use of special mental tests be- dental treatment of 27 school children. These two chapters ns of noting how the author lives up to the high standards in other chapters. It has already been noted that a num- re devoted to discussing defects in the Binet-Simon tests on sults obtained in examining epileptics. These epileptics were le-minded, and he has only 333 for all ages included. The special type of mind which causes exceedingly irregular o-Simon testing. Apparently the author has not discovered gards it as irrelevant. I have always excluded results from worthless in discussing accuracy of the Binet-Simon tests. laments that "in one case a revision has been made on the feeble-minded persons." (If he had said that in the case of few of the changes made were based on the performance of

feeble-minded this statement would have been correct), and th
case are they (the revisions) based on the performances of *selec*
children." A comparison made between the epileptics and feeb
and conclusions as to the relative frequency of the different gra
telligence in each is also interesting. He has examined the inm
institution for epileptics and compares them with the inmates of th
(N. J.) School for Feeble-minded. He concludes that "The typic
·ategory is that of the condition of moronity. * * * * while
feeble-minded station is that of imbecility," because morons ar
merous of any grade among the epileptics of this institution, an
are most numerous among the feeble-minded at Vineland. Af
profession that this should come from the "expert clinical psy
That the epileptic sent to an institution might be selected cases in
degree he does not think likely, and that possibly moron feeble-
not sent to an institution with the same relative frequency as ar
grades he does not mention.

We may turn to his experimental study attempting "to de
controlled, objective, mental measures the influence of hygienic an
dental treatment upon the intellectual efficiency and working cap
squad of twenty-seven public school children." The following five
used: (1) Memorizing ten three-place numbers for forty-five sec
on a cardboard to the class. (2) A spontaneous association tes
each pupil a column of thirty simple words, and telling the pupi
the first suggestion for each word for eighty-five seconds. (3) A
association test, in which the pupils wrote for each word of twen
that meant just the opposite. (4) An adding test in which the pu
columns of ten one-place digits. (5) The "A-Test," in which
crossed out the A's of a pied page for 100 seconds. Six series
these tests were made up. The first and second series of each
before dental treatment. "The last two tests (series) were given
to five months after the dental treatment had been completed
pupils, while tests 3 and 4 were given only one or two months a
ginning of the treatment for more than half the pupils." All we
group tests by the author "or by proxy." Besides the dental trea
these pupils were given instruction on oral hygiene and corre
eating, and a nurse followed up the cases, giving individual in
parents and pupils, and noted whether the instructions were bei
This is the experiment and its conditions. Does it meet the
accurate scientific work set up for others by the author? Let us
First, as to the tests themselves. Are they of such a nature as
small differences in intellectual efficiency and working capacity?
have to measure small differences, equal to considerably less tha
normal mental development, for no one would expect very lar
ments in the course of several months following dental treatme
do not know whether they measure intellectual efficiency at all,

ven. That any one of them alone reliably measures small dif- surely an unwarrantable assumption. Only five different tests We recall the author's statement that in the Binet-Simon scale of tests for each age-group should be increased from five to ten make those tests reliable. Yet the Binet-Simon scale does not measure differences smaller than that between two consecutive of normal development, and it measures this difference not with of one age-group alone, but with several age-groups, or twenty- tests. Second, the procedure in giving the tests. These tests ven to the pupils individually, but were group tests. The author us before that the results of group tests are not reliable. He that in order that the results of any test may be reliable the given by a trained psychologist. These tests were given by the y proxy, and he does not tell us anything further about the statement as to the time interval between dental treatment and the several series of mental tests is very indefinite. If these ried irregularly from one to two months for the third and fourth from three to five months for the last two series, it was a poor this factor. Third, the pupils tested. Pupils with dental defects before and after dental treatment, but no similar group without ment were tested for control. What can we infer at all from sults without such a control? Only twenty-seven pupils were he author told us that in order to establish reliable norms for mon tests not less than a hundred cases for each sex for each e tested. Fourth, the elimination of other factors that might ne influence as the dental treatment. The aim of the experiment mine the degree of influence of the dental treatment. But these ed not only dental treatment, as was noted. Can we assume that effort in both school work and in the tests, and the assistance gement from parents and home would be left entirely unaffected uch ado is suddenly made over them? If the tests after the ment showed improvement, to what can we attribute it? Possibly treatment, possibly to these other changed conditions, possibly improvement that would have taken place if nothing had been he pupils at all, and so the results can prove nothing. Yet from eriment, made under such conditions, and in the midst of scath- ns from the author of the methods of others, several pages of are drawn. These are, in a word, that the beneficial influence eatment on mental efficiency has been demonstrated; that there ortant sex differences; that there are no important age differ- the improvement is sometimes general, and sometimes along one only, as shown by the different results of the five different ally, that "The conclusions which follow from the results of this of far-reaching importance to the state and nation." The reader ter cannot help but be reminded of the following statement in

the Preface: "Owing to these misconceptions (as to the value o
of amateur Binet-Simon testers) we are today tolerating and fos
of work in applied psychology which often is scientifically barre
times positively pernicious." Or again, in a later chapter when
different revisions of the Binet-Simon tests that others have
"Superficial work like this is misleading and tends to arouse c
the slipshod standards of scientific work obtaining in this fiel
psychology."

Faribault, Minnesota. F. KUHL

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