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ON POINTS CONNECTED WITH THE EDUCATION OF FEEBLE-MINDED CHILDREN.

*Being an Introduction to a Discussion in the Section of Psychology
at the Annual Meeting of the British Medical Association,
Bristol, August, 1894.*

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THE NUMBERS TO BE DEALT WITH.

THIS paper is intended to be in the nature of a supplement to the report presented by Dr. Francis Warner on the mental and physical condition of school children. From this it will be seen that of 50,000 children (26,287 boys and 23,713 girls) seen in schools from 1892 to 1894, 101 (50 boys and 51 girls) were classified as "feebly-gifted mentally," but of course there were others falling under the head of "exceptional pupils," including children maimed and paralysed, epileptic, mentally exceptional, and a few (5 in all) classified as idiots and imbeciles, making an aggregate of 16 per 1,000 who seem to require special training. In addition there is a large group of cases reported by the teachers as mentally dull; and although this group may be considered beyond the scope of a committee investigating the subject from the physical side, yet cognisance must be taken of them in connection with any scheme of special educational care for those disqualified by physical or mental incapacity from following the ordinary school curriculum.

INDICATIONS FOR TRAINING.

To quote from the interim report of our Committee, "the same scientific principles as enabled the numbers of such cases to be ascertained may be used to indicate their special requirements in training." On these lines a few of the leading groups will be considered, and the indications for their educational care studied.

DEFECTS IN DEVELOPMENT.

Whilst children with a defect in development form the largest class of cases noticed in every group of schools, it has been observed that "under conditions of less favourable training the proportion with nerve signs and the proportion who are dull rises. It seems, then, that efficient training and education does much good in preventing evils from arising in such cases." Let us now consider some of the indications to be met to render educational care appropriate to these exceptional children.

INHERITED DEFECTS.

Logically, indeed, the educational care requires to have been carried back for some generations to avoid defects in development which are no doubt largely inherited, and so to say accumulated, by injudicious ~~teaching~~; and the omission of all instruction in physiology and hygiene from the educational systems of the past has much to answer for in this respect. But we have, of course, only to deal with the present, and to do what we can to prevent such evils as have now been ascertained from being perpetuated. At the same time, we endeavour to qualify the unfortunate defectives, as far as may be, for the practical duties of life.

CRANIECTOMY OR SENSORIAL TRAINING.

Starting with defects of development, we inquire what can be done by educational means to counteract such defects. As regards cranial abnormality, I am tempted, in passing, to refer to the surgical procedures which have of late years been practised with the view of allowing room for expansion of the brain by cutting strips of bone from the skull (craniectomy). My own opinion is that as a rule the skull is moulded to the brain, not the brain to the skull, and that in the instances in which mental improvement has been recorded, the credit is really due to the educational effect of the special attention and nursing after the operation, rather than to the operation itself. I would rather point out as a physiological antidote to cranial deficiency the doctrine of Séguin, that the volume of the brain, and consequently the skull, is influenced by judicious sensorial training of the child, a remarkable instance having been recorded by him, in which an observed increase of cranial measurements followed "instruction imparted simply through the medium of the senses and the muscles, as in training the eye and hand."

BEAN BAGS AND MUSIC.

Passing now to children with "abnormal nerve signs," or, in other words, presenting evidences of "nerves out of order," we must consider these a little in detail to gather indications for their appropriate educational care. Dr. Warner describes three principal types, the first indicating an over-mobile nervous system, the second characterised by repetitive uniform movements, the third associated with an insufficiency of activity in the nerve centres. It is obvious that different modes must be adopted in dealing with each of these types. Taking the last first, I may refer to the extreme case of the impassive idiot whose educational training starts with a bombardment of bean bags. Such a child is so inert as not at first to put up its hands to protect its face from the bean bag thrown at it by the teacher; gradually, however, the instinct of self-protection asserts itself so far as to ward off the missile. The second step, to catch the bag, and the third, to throw it back to the teacher, mark successive stages of improving mental activity, and from these progress is made in the direction of simple drill, aided by music. With the class of defectives found in ordinary schools bean-bag exercises may be unnecessary—though they would be found serviceable in promoting alertness of the eye and hand—but there is no doubt that musical drill exerts a most beneficial influence, and I

am glad to find the superintendent of special instruction under the London School Board (Mrs. Burgwin) making a point in her report of pianos being supplied as necessary aids for this purpose. Children of the second type—those with the so-called athetotic or choreic movements—are also benefited by specially-adapted physical exercises, for purposeless automatic movements subside as the child's attention is engaged in carrying out, at the word of command, the regular movements of drill. Manual training, too, beginning with simple but attractive Kindergarten exercises and advancing even to the intricacies of macramé work, is of much utility with this class. Then, with the over-active children—those with “twitches,” whether of the hand or forehead—much good is done by judicious training of the muscles. I do not mean of a consciously repressive character, but with the object of directing superabundant nerve energy into appropriate action, controlled by the will. For this there is nothing better than the manual occupations, “Sloyd” work, etc., which have at length been recognised as an integral part of our educational system; and in country schools I would strongly advocate the provision of out-door work. A school garden would be a most useful adjunct in the training of exceptional children.

OVER-PRESSURE AND UNDER-FEEDING.

“Low nutrition,” in the sense in which it is used in the report, does not necessarily imply deficiency of food. It has been said that with elementary school children “over-pressure” often means “under-feeding,” and it has been urged that “free meals” are in many cases an essential preliminary to “free education.” Whilst far from denying the educational value of good feeding (and no doubt the Scotch diet of oatmeal porridge helps to evolve superior brain power as compared with the English stewed tea and scraps), our inquiry has shown that the pale, thin, and delicate children at school are so, for the most part, because they are defective in make. Even in Poor-law schools, where presumably the diet is physiologically sufficient, it was found that no less than 3.3 per cent. of the children seen suffered from low nutrition, the explanation being that these children were “of lower general constitutional power, and tended to an ill-nourished condition under the stress of life.”

DEFECTIVE VISION AND HEARING.

Time forbids the discussion of the special care necessary for the education of children suffering from defective vision and hearing, but it is satisfactory to note that the Legislature has lately provided for the blind and deaf, whilst the Education Department has been roused to the necessity of taking some account of minor degrees of these sensorial defects, the need for the early recognition of which forms an additional argument in favour of the appointment of medical inspectors of schools.

FITS.

A few words may not be out of place with regard to the children with history of fits during school life. Though the number noted in our report is comparatively small (boys, 20; girls, 35; total, 55) there is good reason to believe that the

number of children suffering from epilepsy is by no means insignificant, and that the majority are kept at home uneducated. We have the high authority of the late Sir Andrew Clark to the effect that the doctrine formerly held that epileptics should be allowed to lie fallow, and should not learn lessons, is "a fearful mistake." Let us therefore inquire under what conditions their education can best be carried on. It seems to me that ordinary school life is inappropriate, for the mental condition of epileptics varies so much that they could not be expected to keep pace with the ordinary curriculum, and if not specially guarded they would be liable to serious bodily accidents. Even in special classes, such as those now established in London, they would be unwelcome pupils, as their fits would disturb discipline and inspire terror in the minds of nervous and weakly children. I am of opinion, therefore, that such children would be better educated in special boarding schools in the country, where regular routine, judicious diet, and a happy combination of school instruction, outdoor work, and systematic recreation would co-operate in the amelioration both of the bodily and mental condition.

MISCHIEVOUS CHILDREN.

There is a small class tabulated in our report, designated in a special sense as "mentally exceptional," not so much mentally deficient as utterly wanting in moral sense, and subject to strange impulses to mischief. These form a very trying class, and perhaps test the tact of the teacher to a greater extent than any other. Mrs. Burgwin reports with reference to the London classes for special instruction, that "many of the scholars are untruthful, in fact seem utterly devoid of conscience, and a great deal of time is spent in inculcating the virtue of truth and honesty in word and deed." There is no doubt that most of these poor children suffer from the "damnosa hereditas" of nervous instability, and their extraordinary impulses are in many instances akin to the explosions of epilepsy. It is hardly necessary to point out that great care is called for in their association with other children at school.

THE FEEBLY-GIFTED.

In conclusion, a few general considerations may be useful in connection with practical methods of dealing with the mentally feeble (in which term I include the "feebly-gifted," the *schwach-befähigte* of the Germans). It will be conceded that special modes of education adapted to special defects are called for in the case of exceptional children. It will be further admitted that recognition and study of the individual defects are necessary for the success of the special teacher; in other words, teachers grounded in the general principles of education should have special training for this special work. The training of the Kindergarten is no doubt a step in the right direction, but Fröbel's system presumes too much upon the spontaneous activity of child life to be altogether applicable to the more inert classes of the mentally feeble. Useful hints may, no doubt, be derived from the system which experience has shown so serviceable in the ameliorative training of idiots and imbeciles, the fundamental note of which, struck by

Séguin fifty years ago, is that the education of the senses must precede the education of the mind. Nerve signs, that is, signs of abnormal nerve action, must be noticed, special incapacities investigated and counteracted, and undue strain guarded against. In cases where the nervous system is overmobile this precaution is specially necessary, for if the teacher unwittingly pushes instruction beyond that which is prudent mental breakdown results. Hence the necessity of teachers being taught to recognise the physical signs of nervous over-action and to adopt precautions before the stage of St. Vitus's dance, or chorea, supervenes. Dr. Octavius Sturges has recorded 9 cases of school-bred chorea, in 5 of which the children had been kept at school in spite of morbid restlessness, the significance of which had not been understood until St. Vitus's dance incapacitated them for school work. A painful example this of "evil wrought by want of thought," and failure, through ignorance, to act on the maxim *Obsta principiis*. Special training for the children, based on physiological principles, and special training, including such principles, for the teachers may, therefore, in a few words, summarise the practical suggestions of this paper.

8