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UJBSAS 41
OF THE

NATIONAL COUNCIL

MENTAL HYGIENE

(INCORPORATED)

WITH SPECIAL REFERENCES TO THE MENTAL TREATMENT ACT 1930 AND THE FIRST INTERNATIONAL CONGRESS FOR MENTAL HYGIENE, WASHINGTON,

D.C.

1929 - 1930.



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### The National Council for Mental Hygiene.

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The Proceedings of the Conference on Mental Health held at Westminster, October 30—November 2.

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### AIMS AND OBJECTS OF THE NATIONAL COUNCIL FOR MENTAL HYGIENE.

The activities of the National Council established in Great Britain embrace among others the following objects:—

- (I) The improvement of the mental health of the community. This involves a closer and more critical study of the social habits, industrial life, and environments of the people, with a view to eradicating those factors which lead to mental ill-health and unhappiness, and the education of the public in all matters which militate for and against good mental health.
- (2) The study of the causes underlying congenital and acquired mental defect and disorder, with a view to their prevention. To further this, the Council will promote scientific investigation by competent workers.
- (3) To secure a more important position for the study of psychiatry in the medical curriculum, and the closer association of psychiatry with general medicine; to further the establishment of special clinics and out-patient departments for the early treatment of mental disorders; to raise the standard of care and treatment in the public mental hospitals, and to remove legal formalities which tend to postpone the effective treatment of cases of mental disorder in their early stages, or to divorce the treatment of mental disorders from other diseases. By combating the prevailing ignorance and superstition regarding the true nature of mental disorder, it hopes to assist in removing the stigma which handicaps the future welfare of those who have been thus afflicted.
- (4) The study of criminality, dependency, vagrancy, and prostitution, in so far as they are failures of adjustment by reason of mental disorder or defect. The Council will further investigate the extent to which expert medico-psychological examination of persons charged with crime can be of help in elucidating the problem of habitual criminality.
- (5) The study of mental hygiene of child-life in relation to education and parental responsibility.
- (6) The Council hopes to be the liaison between all societies, associations and other bodies interested in or concerned with mental hygiene, and so far as it can with advantage co-operate with them.

### MEMBERSHIP.

(Extract from Articles of Association.)

There shall be two classes of members, namely: (a) Full Members, and (b) Associate Members.

- 1. A person desirous of becoming a member of the Association shall by notice in writing signify his desire to become a member, and shall in such notice state whether he desires to become a Full Member or an Associate Member, and if the Association shall approve such person as a member, his name shall thereupon be entered in the Register of Members of the Association (to be kept pursuant to Section 25 of the Companies (Consolidation) Act, 1908), as a Full Member or as an Associate Member, as the case may be.
- 2. A Full Member shall pay an annual subscription of One guinea, and an Associate Member shall pay an annual subscription of Five shillings.
- 3. Every new member shall pay the annual subscription appropriate to his class at the time when he gives notice of his desire to become a member.
- 4. The annual subscription shall (except as provided by Clause 3 hereof) be due and payable on the first day of January in each year.
- 5. Any member intending to withdraw from the Association shall signify his intention to do so in writing before the first day of January; otherwise he shall pay his subscriptions for the current year, whether he shall have exercised or enjoyed any of the member's rights and privileges or not.
- 6. Only a Full Member shall be eligible to become a Member of the Committee.
- 7. Only Full Members shall be entitled to vote upon the election of Members of the Committee, each member shall have one vote and no more, whether on a show of hands or on a poll, and all votes shall be given personally.

### ANNUAL REPORT OF THE COUNCIL

1929-30.

The fight sustained by the Council and other bodies with similar interests against the spirit of apathy and almost fatalistic resignation which, until recently, characterized for the most part the attitude of the British public to mental hygiene problems, achieved its first victory in the passing by Parliament of the Mental The Mental Treatment Act, 1930 (20 & 21 Geo. 5, ch. 23). Although Treatment Act, 1930. this Act does not receive the Royal Assent until July 10, and thus strictly comes within the period of our next report, its Parliamentary career falls well within the period under review, and is, therefore, most conveniently and appropriately dealt with now. victory is a signal one, in that since the war two previous attempts by Parliament to establish better provisions for the treatment of early mental disorders and to put the practice of psychological medicine more in line with other branches of medical science had failed.

It is stated in a leaflet recently issued by the Council that "mental disorder and mental deficiency are the only departments of medicine where the law lays down formalities as regards treatment." Although this anomaly remains the Act does, however, lighten its burden and reduces almost to a minimum the legal obstacles hitherto in the way of voluntary treatment and of the temporary treatment of those too mentally ill to seek of themselves the aid of psychological medicine. Thus, the number of recoveries in the case of mental illnesses can now, with some confidence, be expected to approximate in due course to that of other curable diseases, and this without in many cases incurring the stigma of lunacy. But not only does the Act minimize these obstacles, it also greatly extends the opportunities for early treatment which, if provided, will be available to both poor and well-to-do. Such provision may be made at the cost of local authorities or privately.

It is one thing, however, to create these opportunities; it is another thing to induce early cases and those on the verge of mental breakdown to avail themselves of them.

The more hopeful outlook just mentioned depends upon proper use being made of the Act. Thus the Council has now the twofold duty of seeing, on the one hand, that provision for voluntary treatment, which is optional under the Act, is really made by the local authorities; and that the provision for the treatment of non-volitional cases, which is compulsory, is of a suitable nature and likely to achieve its purpose. On the other hand, the Council must educate the public in the signs and symptoms of early mental breakdown and counteract those prejudices which make people hesitate to seek in time the aid of psychological medicine.

The Mental Treatment Act is also unique in that it is the first of its kind to be placed on the Statute Book. All previous legislation in this direction has been mainly for the purpose of protecting the rights of alleged "lunatics" under the common law, of securing humane conditions for them during segregation, and of protecting the public from the anti-social conduct of persons with deranged minds. The greatest of these Lunacy Acts, that of 1845, the creation of Lord Shaftesbury, has rightly been called "The Magna Charta of the Insane." What is now being sought could well be called its analogue, "The Magna Charta of Psychiatry," and the Mental Treatment Act is the first definite step towards obtaining it, for it marks the recognition by Parliament that a mental illness is primarily a matter of medical concern and that the keynote to the situation is no longer detention, but prevention and treatment.

Although the Act may be hailed as a striking advance in such legislation, further concessions from Parliament reflecting a public opinion still more enlightened will be necessary before the Council can rest content that it has achieved its objective in this matter and the practice of psychological medicine comes into its own—unloaded of its legal burdens, and equal in the sight of the law with the other branches of medical science.

What, then, are the further steps to be taken towards this end? Undoubtedly, in the first place, the extension of temporary treatment as long as such is likely to benefit the patient and, in the second place, extending the advantages of such treatment to early "unwilling" cases, which class under the Act is left to be dealt with under the principal Act. In many of these latter cases the prospects of recovery are good if care and treatment commence early. Much education of the public will be necessary before either or both of these can materialize. A good deal will depend upon the way in which the concessions already made are carried out and the success achieved in bringing about the objects of the new Act before these further concessions may be expected.

Undoubtedly, the material point in this successful issue will be the attitude the newly constructed Board of Control, with its increased authority, will take in regard to its by no means unimportant share in the administration of the Act. Will this be traditional, *i.e.*, in the spirit of previous lunacy legislation, or will the Board frankly forsake tradition and face the new possibilities and opportunities in the spirit of enlightenment shown in the Report of the Royal Commission?

The Act empowers the Board to formulate new rules and to modify and adapt existing rules for the purpose of administering the new Act. These are of vital importance to the success of the Act and will be awaited with interest and justifiable concern.

The Council sincerely hopes that the Board will rise to the occasion and that the new rules besides being a clear direction will be an encouragement and an inspiration to the local authorities and all others interested or directly concerned, in order that the signal victory over tradition in the treatment of the mentally afflicted, achieved by the passing of the new Act, may obtain its full reward.

It will be useful here to describe briefly what are the objects of the new Act.

The main provisions of the Act are based upon the findings of the Royal Commission on Lunacy and Mental Disorder (1924-26). To this body the Council submitted its carefully considered recommendations, which for the most part find a place, in principle at least, in the new legislation. This result in some instances was not obtained without great effort on the part of the special Sub-Committee appointed by the Executive Committee to take all steps necessary to secure the acceptance of the policy of the Council.

This Sub-Committee drew up a memorandum on the Bill which was circulated to all medical members of Parliament and other bodies interested. Lieut.-Colonel J. R. Lord, Joint Honorary Secretary, was given the opportunity of speaking on the Bill at a meeting of medical members of Parliament, and also at a meeting of the London County Mental Hospitals Committee, when it had under consideration the Sub-Committee's Memorandum; in fact, its Honorary Secretary, Dr. Doris Odlum, and all the members of the Sub-Committee, were indefatigable in their efforts to bring about the emendations thought necessary to make the Bill a practical success. Fully seventy-five per cent. of the Sub-Committee's recommendations were ultimately embodied in the Act.

The Act gives State recognition to several great principles:-

(a) The importance in the mental service of prevention and early treatment by enabling local authorities to make provision for out-patient treatment of such cases, and by extending the opportunities of voluntary treatment alike to rich and poor. Psychiatry thus becomes a definite branch of public health which embraces all preventive medicine.

(b) That acute mental illnesses, especially those involving failure of volition, are matters of primary medical concern. This is a step towards a closer union of psychiatry and general medicine. Legal certification is not always a necessary prelude to admission to hospital for treatment. This affects all general hospitals, whether county, municipal, or voluntary, in addition to mental institutions.

(c) That patients leaving mental institutions need temporary "after-care." Local authorities can establish their own "after-care" organisation or support voluntary bodies for this purpose.

(d) That progress cannot be made in the care and treatment of mental patients without adequate provision for systematised

and co-ordinated research.

(e) The severance of the ancient close association of the treatment of mental illnesses with the Poor Law. The Act provides that no person shall be deemed to be in receipt of Poor Law relief, or be deprived of any right or privilege, or be the victim of any disability because he or she is being treated as a rate-aided

patient for mental disorder.

(f) A new orientation within the ambit of the medical services. "Asylums" are given the legal status of "mental hospitals," "voluntary boarders" become "voluntary patients," the fear and laughter-raising term "lunatic" is eliminated, except in regard to "criminal lunatics" and lunatics detained outside England.

The Local Government Act, 1929 came into operation on April 1, 1930. Within a period of six months of that date each local authority was required to submit to the Minister a scheme of the administration for carrying out the Act.

The Council was mainly interested in the fact that among the functions transferred to the local authorities were the duties and responsibilities of the Poor Law authorities under the Poor Law Act, 1927. This manifestly put it within the power of the local authorities to make better provisions for improving, extending and co-ordinating in each administrative area the facilities for the prevention and early treatment of mental disorders among the poor. The steps taken by the Council in regard to this are detailed in its Report for 1928-29.

The Council has good reason to believe that this important matter was not lost sight of in the preparation of these schemes, which also involved the functions of the Poor Law authorities under the Lunacy and Mental Deficiency Acts, over which there was much controversy.

The whole matter has been the concern of both Sub-Committees I and II and a comprehensive review of the position which was again materially altered, even overshadowed, by the Mental Treatment Act, 1930, will materialize in due course. The Council will then be in a position to see how and in what direction further advance can be made to maintain and improve the mental health of the people, and especially the efficiency of those services concerned with the prevention and treatment of mental disorders and with the occurrence of states of mental deficiency, the increase in the incidence of which during the past ten years has given rise to national anxiety.

The next event of importance the Council has to report, International perhaps the most important and far-reaching in the history of Mental Hygiene, is the holding of the First International Congress on Mental Hygiene at Washington, D.C. As the history of the Council is written in its Annual Reports, some description of this conference is necessary as it fell within the year

1929-30.

Early this year notice of the final arrangements were received, together with questionnaires on every aspect of Mental Hygiene and a request for Great Britain's contribution to an International Mental Hygiene Library. The Joint Honorary Secretary, Lieut.-Colonel J. R. Lord, was appointed organizer for Great Britain. He was greatly

assisted in answering the questionnaires by the information supplied by the Board of Control, Dr. William Norwood East, one of H.M. Prison Commissioners, Mrs. Beach, Secretary of the Child Guidance Council, and the Secretaries of Epileptic Institutions. In setting out Great Britain's literary contribution to the movement, he was much indebted to Dr. J. R. Rees of the Tavistock Square Clinic and Dr. Cyril Burt, Psychologist to the London County Council Education Department, for help and advice. The Council desires to record its thanks for the labours of Lieut.-Colonel Lord and the others mentioned in both these matters which were heavy tasks undertaken at very short notice. With the assistance of Messrs. Thos. Cook and Son, Limited, particulars of the Congress Tours, which had been arranged in conjunction with the International Committee on Organization, were circulated and reduced travelling expenses obtained from the Steamboat companies and the American railways. The Study Tour Sub-Committee of the Royal Medico-psychological Association (Honorary Secretary: Dr. A. Edward Evans) joined forces and shared expenses with the Council. The Board of Control (England and Wales) circularised all local authorities urging them to send the medical superintendents of their mental hospitals to the Congress.

It thus came about that May 5—10, 1930, established itself as a memorable and epoch-making period in the history of mental hygiene, Washington being at that time the rendezvous of not less than 3,500 persons—psychiatrists, psychologists, criminologists, educationists, mental hospital governors, social workers almost of every kind, occupational therapists, students of industry, and others drawn from fifty-three countries and all six continents. Never in the world's history has there been such a world conclave of mental hygienists. The total member-

ship enrolled was over 4,000.

President Hoover gave official recognition by becoming Honorary President of the Congress and by receiving the members at White House

on May 7.

Sir Hubert Bond, K.B.E., was the official representative of the British Government. The Council was deeply gratified when its Chairman, Sir Maurice Craig, decided to attend the Congress as one of the representatives of the National Council for Mental Hygiene. The others were Lieut.-Colonel J. R. Lord and Dr. Doris Odlum.

The Minister of Health's message to the Congress took the form of

a letter to Sir Hubert Bond, the text of which is as follows:-

Ministry of Health, Whitehall, S.W.1.

15th April, 1930.

DEAR SIR HUBERT BOND,

His Majesty's Government wish to convey to the First International Congress on Mental Hygiene, through you as their delegate, a cordial message of

goodwill and sincere wishes for the success of the Congress.

It is well recognised that the movement, which recently celebrated its majority, and to the strength of which this International Congress is powerful testimony, was initiated in Connecticut, and is the outcome of one who possessed the genius of applying the lessons of personal illness to the needs of others. Firing

the imagination of an enlightened public, it gathered in the United States of America an impetus which has been the originating force of nearly twenty National Societies for Mental Health which have been formed since in various parts of the world. Lively satisfaction, therefore, was felt when it was learned that Washington had been selected as the place in which to hold the First

International Congress on Mental Hygiene,

It is a commonplace that disease, whether physical or mental, knows no frontier, and it behoves everyone to bring into the common stock all the knowledge and experience that he may have acquired. So far as Mental Hygiene is concerned, the Congress will open the way for a systematic and world-wide interchange and examination of that knowledge and experience, and by so doing will, it is hoped, mark an important stage in the campaign against one of the saddest and most distressing afflictions known to mankind.

Yours sincerely,

(Sgd.) ARTHUR GREENWOOD.

On the fourth day of the Congress Sir Maurice Craig delivered a most striking address on "Mental Hygiene in other departments of Medical Practice" in the Constitution Hall, at which at least 3,000

people attended.

In the course of his address Sir Maurice Craig said that it was becoming increasingly evident that the mental hygiene movement was one of the greatest medical movements of modern times. The work that the National Councils and Committees had initiated was already proving its value in saving many persons from the severer forms of mental disturbance. But its value did not end there; it extended far beyond the sphere of pathological states and found a place, and often an important place, in all human relations and interests. The custom in the past had been to place mind disturbance in a water-tight compartment by itself and thus to divorce it from the field of general medicine. The effect of this had been on the one hand to develop a warped idea of mental disorder, and on the other to fail to appreciate that in many cases of physical disease the mental attitude towards the disorder might be even seventy per cent. of the illness for which relief was sought. And the importance of it might not end here, for the bodily disorder itself might have been determined by a minor mental disturbance.

The whole trend of modern medicine was towards the prevention of disease and to do this the beginnings of disease must be understood. This meant that the laity had to be let into some of the secrets of medicine. Therefore, it was of infinite importance to be able to observe the beginnings of early phases, and what was true of physical disorder was equally true of mental disorder. It was there that the Mental Hygiene movement played so important a part.

"A great responsibility rests upon us to be ceaseless in our endeavour to advance the subject which has brought us together to-day. Mental Hygiene has its place, and no insignificant place, in health and disease; it touches upon all the activities of life, and in consequence, it must play a

great part in bringing about human happiness."

Lieut.-Colonel J. R. Lord addressing a large audience on "World View of Mental Hygiene" on May 7, said that never had the position

and prospects in Great Britain in regard to mental hygiene been brighter than now. An amended Local Government Act had transferred all the responsibilities and duties of the Poor Law authorities under the Poor Law Act of 1927, the Lunacy Acts and other Acts of Parliament to the County and County Borough Authorities. Thus, one statutory authority in each local Government Administration area would, for the first time, be able to review the whole field in regard to the care and treatment of the sick poor, including those mentally afflicted or defective of all ages, and to take such steps as seemed desirable to reorganise and, if necessary, supplement existing provisions.

But the Mental Treatment Bill would be, when it reached the Statute Book, if properly administered, a still greater step forward in

the prevention, care and treatment of the mentally afflicted.

The State administration of the welfare of the mentally deficient, which took its origin in the Mental Deficiency Act of 1913, was second to none in the world. It was aided by thoroughly efficient and up-to-date voluntary associations in every administrative area. The position in England regarding the provisions for dealing with the backward, maladjusted or exceptional child was not so favourable, but a great step had recently been taken to improve matters by the establishment of a Child Guidance Council in London. The first fruits of this enterprise had been the founding of a really up-to-date Child Guidance Clinic. It was due to the generosity of the Commonwealth Fund that such an important branch of sociological work had made this great advance in England.

Dr. Doris M. Odlum spoke on the "Evils of Alcoholism" and

dealt with the subject from an aspect new to most of her audience.

Miss Evelyn Fox gave a telling address on "The Organisation of

Mental Hygiene Work."

The proceedings during the Congress consisted in discussing the mental and emotional situations underlying behaviour in all its phases, normal and abnormal alike. Children, adolescence, adult maladjustments, and marriage, education of parents, crime, economic dependence, were among the chief topics discussed.

The greatest world event of the Congress was the founding on May 6 of a permanent International Committee for Mental Hygiene. Sir Maurice Craig was appointed a Vice-Chairman and Lieut.-Colonel

J. R. Lord a member of its Executive Council.

It was unanimously agreed that the Second International Congress on Mental Hygiene should be held in 1933 and, if possible, in Paris, where the First European League for Mental Hygiene was established in 1920.

The Foundation was aphorized by Lieut.-Colonel Lord in the telling words which have since been circulated to the world by the Congress

Executive Committee:-

### "THINKING INTERNATIONALLY."

"The establishment of a permanent International Mental Hygiene Committee marks for all time the recognition that the highest conception in

human relations is the dominance of reason over emotion in the moulding of personality, in such a fashion as to bring out the finest traits of human character. There can then come about an understanding between nations free from the domination of national pride, prejudice or economic factors, and one in which Social, Moral and Spiritual values will have first place. We have been thinking individually and nationally. We have now to learn to think internationally. To bring these international thoughts to bear upon individuals and nations is the mission of the International Committee for Mental Hygiene. Its establishment is thus the commencement of a new era in the progress of humanity."

The recommendations arrived at by the Special Committee appointed by the International Committee to consider the findings of the world survey on mental hygiene, made during the past twelve months and completed during the Congress, will be published at an early date under the following headings: Statistics, Institutions, Legal measures and laws, Clinics, Psychiatric Work in Prisons and among Delinquents, Dependency, Psychiatric Social Work, Industry and

Mental Hygiene.

It now becomes the duty of each National Council or Committee to see that in its own territory the International Congress is not barren of results. What message then has the Congress for Great Britain? Having regard to ties of race and language, the question naturally becomes, "What message has America for Great Britain?" Lieut.-Colonel J. R. Lord, in his report to the Council, says: "Does America realize the seriousness of her problem, and do we realize the seriousness of ours? Without this realization nothing can be done. Comparing the two countries, the one thing that most greatly impressed me during my visit was the depth and breadth and sincerity of America's mental hygiene movement. America for the most part has not only realized the nature and gravity of the problem, but America has made up her mind as to how best it should be met."

In regard to prevention and early treatment, he remarks: "One thing is certain, and it is that America intends to attempt the solution of its psychiatric problems, not along the now archaic line of 'bricks and mortar,' or by treating end-products only, but by child guidance and social welfare work of all kinds, organized for the prevention and early treatment of mental disorders; eugenic measures and parental education. These and such curative, educational and directing agencies as psychiatric out-patient departments, pschopathic hospitals, wards and clinics, etc., are to have the drive of America's dollars for

the future."

Speaking of Mental Hygiene in the field of Public Assistance, he says: "I ask you to give the new branch of social psychology and its psychiatric implications a chance to develop, for I am convinced much good can come of it. Public assistance will inevitably go to satisfying those unconscious forces which condition the individual's emotional reactions to money and, if these are not in accordance with his real needs, and are allowed to operate undiscovered and unchecked by

trained supervisors, and without psychiatric aid, no possible good in the long run can come of public assistance, and there will be no solution of the social problem of economic dependence."

He lays great stress on the necessity for Mental Hygiene in schools, colleges, and universities. "I want to draw attention to the introduction of the psychiatrist as an integral part of a university organisation. . . . Experience in America shows that there is plenty of work for the psychiatrist. In American colleges ten per cent. of the students voluntarily consult the psychiatrist when given the opportunity. The mental hygiene of the freshmen is the most useful field, his abilities and capabilities, peculiarities, emotional control and the danger-points of his personality. . . In the lectures it is every-day, difficult problems in mental life, such as we all have to meet, which are discussed, and care is taken not to lead students to be morbidly interested in themselves. Thus all reference to mental diseases is avoided."

"Some recent behaviour occurrences in our Universities point strongly to the need there for an active mental hygiene programme. Apart from such sensational happenings, if one only reflects on what college or university means to the students—on the ordeals of constantly occurring competitive examinations, on the intense study in preparation for them, on the fears and anxieties as to the results; on the occurrence of mental fatigue, insomnia, mental depression or excitement or bizarre behaviour—one cannot fail to realize that there is there a rich field for the psychiatrist. The student's reaction to what his mind takes in for the first time may not be all that could be desired. Emotional conflicts, strange notions, ill-digested conclusions may have a damaging effect, and be contrary to sound character development and normal social trends. These and errors in the selection of vocations may account for there being so many university failures or 'duds' with pass degrees, and who have little or no productive or wage-earning capacity. Much of this waste of youth could be avoided if the services of psychologists and psychiatrists, specially trained for college university work, were available."

Finally, he says: "America is seeing to it that the moulding of its future citizen through pre-school, school, high school, college, and university shall not suffer by reason of neglect of the aid that psychiatry and medical psychology can render. Could we be persuaded to do likewise I feel we should be well on the way to the solution of many distressing social problems in this country and the end to much economic waste in manhood and wealth."

In all these directions the Council feels that the Congress has sent a message, almost a command, for it to take a strong lead in regard to Great Britain.

General Work. In reviewing the work in respect of the past years, the Council is only too well aware that many of its projects have not materialized owing to lack of means to carry them out.

Nevertheless, the Council has been able to achieve several of its ambitions.

The holding of a series of lectures in the spring and autumn is now a permanent and popular feature of the Council's activities, and the

warmest thanks are offered to the honorary lecturers.

The unqualified success of the First Mental Health Conference organized by the Council has rendered possible the contemplation of similar Conferences biennially. Bulletins have been issued as occasion demands, and a considerable amount of informative literature on mental by since has been distributed.

hygiene has been distributed.

But to dispel public prejudices and invite a real and active interest in mental hygiene problems is a slow and laborious task, and members of the Council who have nevertheless remained steadfast and loyal to its service cannot, therefore, be sufficiently commended. The Council also desires to express its particular thanks and appreciation to those who by donations have assisted in its work.

Owing to such donations the finances of the Council are in a somewhat better position than in previous years, though not by any

means sufficient for its high purposes. The Council feels Finance. that it has now reached a maturity which warrants the possession of an adequate fund permanently secured to its existence and routine activities. Such a bequest or donation could well commemorate the passing of the Mental Treatment Act and the holding of the First International Congress on Mental Hygiene, and the establishment of that permanent International Committee for Mental Hygiene to which reference has already been made. The Council. therefore, once again makes a special appeal to its members and other supporters for financial help, hoping thereby to render possible still further progress in bringing about better mental health and efficiency in respect of both the individual and the race. Membership forms, which when completed should be sent to the Secretary, are appended to the Reports, and donations, however small, will be most gratefully received by the Honorary Treasurer, the Right Honourable Lord Southborough.

Vice-Chairman. The Council created earlier in the year the position of Vice-Chairman, who, among other duties, will preside when the Chairman is unable to be present at meetings of the Council. It is with great pleasure that we are able to inform our members that

Mr. Walter F. Roch has consented to act in this capacity.

Hon. The Council has increased the number of its Honorary Secretaries. Secretaries from two to three, the additional appointment being mainly for the supervision of the Foreign and Colonial work of the Council, which has expanded considerably during the past two or three years.

Changes in Membership. The total membership of the Council is now 307. During the period July 1, 1929, to June 30, 1930, 18 Full Members and 21 Associate Members have joined the Council, and

7 Members have resigned.

The Seventh Annual General Meeting was held in the Hall of the Medical Society of London, 11, Chandos Street, Cavendish Square, W.1, on March 21, 1930, at 5 p.m. Sir Maurice Craig, Chairman of the Council, presided. Lieut.-Colonel J. R. Lord, Joint Honorary Secretary, having read the notice convening the meeting, and the Minutes of the Sixth Annual General Meeting having been signed, the Chairman announced that owing to the recent occurrence of the Mental Health Conference, the Annual General Meeting would not be followed by a public meeting.

The Honorary Treasurer, the Right Honourable Lord Southborough, seconded by Lieut.-Colonel J. R. Lord, moved the adoption of the Report and Accounts for the year ending June, 1929, and the

motion was carried unanimously.

Upon the motion of the Chairman, the following members of the

Committee, retiring by rota, were unanimously re-elected :-

Dr. J. L. Birley,
Sir Hubert Bond,
Dr. R. D. Gillespie,
Professor C. S. Myers,
Sir Humphrey Rolleston,
The Countess of Chichester,
Sir Leslie F. Scott,

Sir Maurice Craig, Sir Courtauld Thomson,
Lord Dawson of Penn, Miss Ethel Vickers,

Miss Evelyn Fox, Dr. Reginald Worth, and Mr. Walter F. Roch was elected a member of Committee.

The Honorary Solicitors (Messrs. Charles Russell & Company), and the Honorary Auditors (Messrs. Barton, Mayhew & Company) were unanimously re-elected, and a cordial vote of thanks for their services passed.

Dr. Doris Odlum, the Honorary Organiser to the Executive Committee, spoke on the work of the three Sub-Committees, and mentioned that it was hoped to undertake a big forward movement in order to carry the propaganda of the Council into the Provinces.

The proceedings terminated with a vote of thanks to Sir Maurice

Craig for presiding at the meeting.

As the Council felt that its members would wish to have an account at the earliest opportunity of the proceedings of this Conference, which was held at Westminster from October 30 to November 2, 1929, an appendix to the Annual Report, Conference. 1928-29, was published containing full particulars. The large attendance at each day's session was a compliment to all those who worked so hard in connection with the organisation of the Conference. The Council's thanks are due to the Chairman (Dr. J. R. Rees) and other members of the Joint Committee, and especially to Dr. Doris Odlum and Miss M. A. Payne, its Joint Honorary Secretaries, who spared no efforts to make the Conference the success it proved to be.

Mental An announcement was recently made by the Child Guidance Council to the effect that six scholarships of £181 Ios. each were offered to students desiring to take

a course of training in mental hygiene work, and we are glad that such opportunities are being created in order to obtain qualified

workers in this important branch of social service.

Acknow-ledgments.

The Council once more is grateful to Sir Maurice Craig and Miss V. M. Dale for their hospitality to the Committees and Sub-Committees, and to all honorary officers, not omitting the Honorary Auditors, for their voluntary labours in the interests of the Council.

The Secretary.

The Council appointed on January 10, 1930, Miss Mary de Vere Hunt as its Secretary, in succession to Miss Evelyn Griffith, whose resignation was announced in its last report, and her work during the year has been to the entire

satisfaction of the Council.

JOHN R. LORD | Joint Hon. R. D. GILLESPIE | Secretaries.

### THE HON. ORGANISER'S REPORT TO THE EXECUTIVE COMMITTEE.

Tavistock Square Clinic Extension Scheme. The propaganda work of the Executive Committee for the six months from June to December, 1929, was chiefly carried on in conjunction with the Tavistock Square Clinic Extension Committee for the establishment of an Institute of Medical Psychology. A Joint Com-

mittee was formed in May, 1929, composed of members of the National Council for Mental Hygiene and of the Council of the Tavistock Square Clinic as follows:—

Sir Maurice Craig, C.B.E., M.D., F.R.C.P. (Chairman of the National Council for Mental Hygiene).

H. CRICHTON-MILLER, M.A., M.D. (Hon. Director, Tavistock Square Clinic).

OWEN HUGH SMITH, Esq. (Acting-Chairman, Tavistock Square Clinic Executive Committee).

J. R. REES, M.D. (Chairman).

H. M. Abrahams, Esq., B.A., LL.B. E. A. Bennet, M.C., M.B., D.P.M.

A. Helen Boyle, M.D.

J. Culme Seymour, Esq. Dame Katharine Furse, G.B.E., R.R.C.

R. D. Gillespie, M.D., M.R.C.P., D.P.M. Noel G. Harris, M.B., B.S., D.P.M.

R. A. Howden, Esq.

J. R. Lord, C.B.E., M.D., F.R.C.P.E. Miss M. Stopford, B.A., S.R.N.

Hon. Treasurers.

THE RT. HON. LORD SOUTHBOROUGH, G.C.B., G.C.M.G., G.C.V.O., K.C.S.I. DOUGAL O. MALCOLM, Esq.

Hon. Secretaries.

Dr. Doris M. Odlum, M.A., D.P.M. Miss M. A. Payne, S.R.N.

It was made plain that the Memorandum of Association of the Council did not permit of more than an alliance for promotion purposes and that the Council could not possess or undertake the administration of the Institute. The objects of the Joint Committee were fully set out in a pamphlet published in July, 1929.

The activities of the Committee included an appeal for funds for the provision of a Hostel for the use of patients under treatment either at the Tavistock Square Clinic or in any other psychiatric out-patient clinic in London. This was issued as part of the National Thanksgiving

Appeal for the King's recovery.

The Council in association with the Tavistock Square Clinic organised a Conference on Mental Health, which was held at the Central Hall, Westminster, at the end of October. A detailed account of this has appeared elsewhere, and the Report of the proceedings, edited by Lieut.-Colonel J. R. Lord, is now available, price 2s., and may

be had either from the office of the National Council for Mental Hygiene,

the Tavistock Square Clinic or any bookseller.

The Joint Committee also organised a Charity Ball, which was held at Grosvenor House on November 5, 1929. The proceeds from this, after defraying the organisation expenses, were allocated on an agreed basis, to the constituent bodies of the Joint Committee. The very generous donation of £50 by Lord Wakefield towards the expenses of the Conference, enabled the National Council for Mental Hygiene to receive £229 16s. 10d. as its share, after all the expenses in connection with the Conference and Ball had been paid. The audited balance sheet of the Joint Committee's activities is published in this report.

Lecturers. The usual series of lectures was held in the autumn. Though a little overshadowed by the Conference, the

attendance was, on the whole, good.

The Spring series was held in the Hall of the Medical Society of London, II, Chandos Street, Cavendish Square, W.I.

Subjects.	Speakers.
"The New Psychology and the Parent"	Dr. H. Crichton-Miller.
"The Child and the Teacher"	Dr. Letitia Fairfield.
"The Delinquent Child"	W. Clarke Hall, Esq.
"The Difficult Child at Home and at School"	Dr. William Moodie.
"Sex Education"	Mrs. Neville-Rolfe.
"Choosing a Career"	Dr. R. D. Gillespie.
The Lectures were well attended.	L. R. Bennet, M.C., M.B.

Public Addresses were given at the Annual Conference of Meetings. Educational Associations in January, 1930, by Dr. Crichton-Miller, Dr. William Moodie and Dr. Doris M. Odlum. The Honorary Organiser also gave addresses at meetings of the Croydon Women Citizens' Association, at which there was an attendance of over 800 people, the Cambridge Child Study Association, The Aldershot Women Citizens' Association, and the Annual Conference of the Royal Institute of Public Health.

Two very successful Drawing-room Meetings were organised by Mrs. FitzAdam-Ormiston and addressed by Dr. W. A. Potts and

Dr. R. G. Gordon.

Among the projected activities of the Council are further public lectures and meetings and a Conference in May, 1931, at which the subjects to be dealt with will come under the heading of "The Human Factor," and will include politics, education, criminology, industry, and other sociological aspects of mental hygiene.

Warmest thanks are due to all those who have helped the propaganda work by speaking or by taking the Chair, by the organising of meetings or by giving donations. Miss Gordon Holmes has assisted most generously by her annual gift of £50 and in other ways, and Mrs. FitzAdam-Ormiston has, as in former years, been extremely generous in her hospitality. Miss Helen G. Thomson also

deserves our gratitude for having organised such an excellent meeting at Croydon and for arranging another at Reigate which is to be held in the coming winter.

As in other years, lack of money has been the great drawback to the extension of our work. The impetus that the Mental Treatment Act will give to early and preventive treatment of cases of mental breakdown, and the universal interest that has been aroused in mental hygiene as a whole, will open out more and more opportunities for work on the part of the Council. It is most disappointing to see these opportunities being missed for lack of money.

At a time of national and even international economic depression it is naturally difficult to obtain funds, but we are convinced that our appeal for them is justified by the necessity for the maintenance of a high standard of mental health and efficiency in order to meet

the exacting demands of modern civilization.

DORIS M. ODLUM, Hon. Organiser.

### REPORT OF THE SPECIAL SUB-COMMITTEE APPOINTED BY THE EXECUTIVE TO CONSIDER

THE MENTAL TREATMENT BILL, NOVEMBER, 1929.

A special Sub-Committee was appointed by the Executive Committee to consider the Mental Treatment Bill and advise the Chairman of the Council as to any action that it might consider desirable to be taken, the Personnel of the Committee being:—

Dr. A. Helen Boyle
Dr. J. R. Lord
Dr. Doris M. Odlum
Dr. G. F. Barham
Dr. G. W. B. James
Dr. E. Mapother

Dr. A. Helen Boyle
Elected members.

Co-opted members.

Dr. Doris Odlum was appointed Honorary Secretary and Convener. The Sub-Committee met on three occasions and drew up a list of suggestions and proposed amendments. These were forwarded to Sir Maurice Craig who obtained the promise of Lord Dawson of Penn to bring them before the House of Lords should occasion arise during the debate on the Bill. Lieut.-Colonel F. E. Fremantle kindly undertook to support them in the House of Commons.

The greater part of the amendments suggested by the Sub-Committee were adopted and subsequently incorporated in the Act.

DORIS M. ODLUM,
Hon. Secretary and Convener.

### REPORTS OF SUB-COMMITTEES.

### SUB-COMMITTEE No. I.

On the Prevention and Early Treatment of Mental Disorders.

Terms of "To secure for psychology and psychiatry a position in Reference. the medical curriculum more commensurate with their importance, and to further the closer association of psychology and general medicine.

To combat the prevailing ignorance and superstition with which the laity regard mental disease. To educate medical students and nurses as to the true nature of mental disorder, and its intimate

relationship to disorders of the body.

To further the establishment of clinics and out-patient departments for the early treatment of mental disorders, and to encourage social service in connection therewith.

To remove formalities and prejudices which tend either to postpone the effective treatment of mental disorder or to divorce its treatment from that of physical disease.

To encourage facilities for prophylactic treatment.

To study the mental hygiene of child life in relation to parental responsibility and education, and to emphasise the importance of a knowledge of psychology among school medical officers and teachers."

The Year's The Sub-Committee has met monthly at 4, Cambridge Work. Gate, Regent's Park, N.W.I, by kind permission of Sir Maurice Craig. Dr. Crichton-Miller was elected Chairman and Dr.

Doris Odlum Honorary Secretary for the year.

International The enquiry circulated by the Sub-Committee to various Questionnary. European countries and the United States of America, asking for information as to the official and voluntary facilities available for the treatment of nervous breakdown and minor mental disorders, produced replies from the United States of America, France, Belgium, Holland, Poland, Switzerland and Austria. In view, however, of the fact that a comprehensive international enquiry was carried out at the First International Congress on Mental Hygiene at Washington, U.S.A., with the co-operation of more than fifty-three countries, it was decided to hold over the consideration of the reports received.

The Mental Treatment appointed to consider the Mental Treatment Bill were co-opted on to the special Sub-Committee appointed for that purpose by the

Executive Committee.

The Treatment of the Attempted Suicide. An enquiry was instituted into the attitude adopted by the law, the police and the Board of Control in relation to cases of attempted suicide and a memorandum drawn up, based on the replies received from the competent

authorities.

Registration of Nursing Homes. As the result of enquiry a ruling was obtained that all places wherein a single patient is received for profit, whether suffering from physical or mental illness, are Nursing Homes within the meaning of the Nursing Homes Registration Act, 1927. Thus, such houses receiving a single patient suffering from mental disorder come under the jurisdiction of the Board of Control and of the local authority. It was felt that such duplication of bureaucratic control was both uneconomic and undesirable, and a letter to this effect, signed by the Chairman of No. 1 Sub-Committee and Dr. R. D. Gillespie, was published in the "Times" in May, 1930.

Prevention of The Sub-Committee considered and adopted the following Delinquency. Resolution from the Howard League for Penal Reform:—

"That the National Council for Mental Hygiene is of opinion that the protection of society against crime can largely be secured by scientific research into its causes, and believing that progress in this direction can most effectively be achieved by international co-operation, it urges the League of Nations to include the study of mental hygiene in relation to crime and delinquency in the sphere of its activities."

This was forwarded with the approval of the Council to the Secretary-General and to the Medical Director of the League of Nations with the request that the Resolution should be submitted for consideration to

the Council of the League.

Minor Mental An enquiry was made into the conditions obtaining in Disorders. hospitals and clinics providing facilities for the treatment of minor mental disorders with a view to ascertaining the character and scope of the treatment available. This should prove valuable in view of recent legislation in respect of early and preventive treatment of mental illness and should form a guide as to the best and most practical methods to be adopted in the development of such provisions for the future.

An enquiry into certain conditions of school life is in course of preparation with the object of obtaining information as to preventable causes of nervous strain affecting both the children and the teaching profession. It is hoped that this enquiry will produce valuable information upon a subject which is of the

greatest national importance.

HUGH CRICHTON-MILLER, Chairman.

DORIS M. ODLUM,

Hon. Secretary.

### SUB-COMMITTEE No. II.

ON THE CARE, AFTER-CARE, AND TREATMENT OF THE INSANE.

"To study all questions connected with the care and Terms of treatment of patients in mental hospitals. Reference. To raise the standard of general and medical education of all those engaged in nursing the insane. To investigate the existing arrangements for visiting in mental

hospitals, and to facilitate the organisation of After-care.

To assist in removing the stigma which handicaps those who

have been mentally afflicted.

To promote a closer liaison between the medical officers of mental

hospitals and the general body of the profession."

The Sub-Committee has met during the year at 63, The Year's Work. Eccleston Square, S.W. I, by the kind permission of Miss V. M. Dale. Dr. Reginald Worth was re-elected Chairman, and Dr.

Doris Odlum Honorary Secretary for the year 1929-30.

An enquiry was sent out to all Medical Superintendents Social Work of public Mental Hospitals in reference to the facilities in Relation to Mental for social work. The enquiry took the form of a Hospitals. questionnaire. Seventy-three replies were received, and a survey of the information is appended.

I.	Have you a paid and qualified Almoner?	Yes: 2
	minur anguist disorders arithms of the relation	No: 71
2.	Have you any social workers, paid or unpaid?	Yes: 9
	salahin vites in rapper ni municipal stessor la vispe si	No: 64
	(Paid: 3; un	paid: 6.)
3.	Have you any Hospital Lay Visitors?	Yes: 14
		No: 59
4.	If you have these or any other facilities for social	
	work, have you an office and a definitely organised	
	system?	No: 73
5.	Do you make use of any existing voluntary	ing Har
	associations in your area	Yes: 55
	such as:—	No: 18
	(a) The Central Association for Mental Welfare	Yes: II
	(b) The Mental After-Care Association	Yes: 39
	(c) Any other organisation	Yes: 9
6.	Do you consider work of this kind is :—	** "
	(a) Necessary	Yes: 66
	71 77 71	No: 3

The Mental After-Care Association state that they deal with patients from 91 public mental hospitals annually.

) (No reply: 4)

(b) Useful

The bulk of this work is, therefore, being carried out by voluntary organisations and is almost wholly defrayed by voluntary contributions. In view of the financial support which will be possible under the Mental Treatment Act by Local Authorities with regard to such social services, it is hoped that there will be a great extension of this work which is of undoubted value and promise. It is significant that 66 out of 73 Medical Superintendents declared it to be both useful and necessary.

Observation Wards in The Report on the Observation Wards in what were formerly Poor Law Infirmaries is being held over in view of the changes that are contemplated in respect of the accommodation and treatment under the Lunacy Acts of cases of mental illness sent for "observation." The whole position has been materially altered by the Local Government Act and the Mental Treatment Act, and it is to be hoped that much that was extremely unsatisfactory under the old régime will be swept away.

Activities. During the coming session the Sub-Committee is hoping to deal, among other things, with the question of the classification of patients suffering from mental disorder, the treatment of the disturbed patient and the training of the mental specialist.

REGINALD WORTH,
Chairman.

DORIS M. ODLUM, Hon. Secretary.

### SUB-COMMITTEE No. III.

ON MENTAL DEFICIENCY, CRIME, ETC.

Terms of "To study the causes and prevention of mental disorder Reference. (in co-operation with other Sub-Committees as found necessary) and of mental deficiency.

To study criminality, dependency, vagrancy, prostitution, and allied social problems, in so far as these are failures of adjustment by

reason of mental disorder or defect.

To enquire into the working of the Mental Deficiency Act and, where necessary, into such legislative measures as might have a bearing on these subjects, with a view to their amendment or revision."

The Wood During the past year the Sub-Committee has spent most of its time in the examination of the Wood Reports and recommends them as a valuable survey of the whole problem of Mental

Deficiency in England to-day.

The seriousness of that problem is undeniable and its Numbers of solution urgent. According to the Wood Committee Defectives in England and there are to-day, in England and Wales, at least 30,000 Wales. lower grade defective children, and some 150,000 adult defectives, the large majority of whom require some form of care, supervision or control by a Public Authority. Some 14,000 of these lower grade children and some 62,000 of these adult defectives the Wood Committee believes could be left in the general community under either supervision or guardianship. But for the majority, that is, for at least some 17,000 lower grade children and some 84,000 adult defectives, or 101,000 mental defectives in all, some form of institutional treatment will have to be provided.

Committee on Colonies for Defectives.

In this connection it should be noted that a Departmental Committee has been appointed by the Ministry of Health to enquire into the cost of building and staffing colonies for mental defectives. The Report of this Departmental

Committee should prove to be of considerable help to those Local Authorities who are anxious to fulfil their responsibilities in this matter; nor should those responsibilities be shirked should the expense

of providing colonies be greater than anticipated.

The Hostel The Sub-Committee has also considered the value of the System. Hostel System in the treatment of mental defectives, and the relation of this system to the general Colony Scheme. The Sub-Committee hopes to be able to report fully on this subject at a later date.

Powers of The powers of the "Visitors of Institutions" with regard to the discharge of mental defectives attaining their majority has been the cause of considerable anxiety to the Sub-Committee. In many cases which came directly under its notice, the Sub-Committee found that these powers were being wrongly used, and defectives requiring care and supervision were being deprived

of necessary institutional training and control. The following Resolution, accordingly, was sent to the Prime Minister, the Minister of Health, the President of the Board of Education, and the Chairman of the Board of Control :-

"That, in the opinion of the National Council for Mental Hygiene, the present method of discharging Mental Defectives on their Coming of Age, now in the hands of Visiting Justices, is

unsatisfactory and requires alteration."

Royal Commission on of Mental Defect.

In its Report last year the Sub-Committee suggested that the Ministry of Health in England was peculiarly the Causation fitted to undertake the task of an exhaustive enquiry into the causation of mental deficiency, and the value of various methods advocated for its prevention. The

recent publications of the Wood Committee, set up by the Board of Education and the Board of Control, have shown how useful Government Departments can be in the promotion of these enquiries. A Royal Commission on the Causation of Mental Defect is now a national necessity, and the Sub-Committee has taken steps to submit the following Resolution for consideration in the proper quarter:—

"That a Royal Commission be appointed immediately to make full enquiries into the Causation of Mental Defect, and into any measures, including both Segregation and Sterilisation, by which the incidence of Mental Defect might be diminished."

Questionnaire With regard to Sterilisation, the Sub-Committee has on Sterilisaprepared a Questionnaire to determine the number of mental defectives that could be discharged from Colony to Communal Care on their being sterilised and without danger to the community or cruelty to the defectives. It is hoped that this Questionnaire will be able to provide some useful information.

> W. A. POTTS, Chairman. H. FREIZE STEPHENS. Hon. Secretary.

# THE NATIONAL COUNCIL FOR MENTAL HYGIENE (INCORPORATED).

BALANCE SHEET, 30TH JUNE, 1930.

7

Cr.

By Cash at Bankers and in Hand 310 14 9 By Colonel J. Waley-Cohen Fund	£50 5% War Loan 1929/47 at cost (Market value, £51 108. od.) 49 17 6  By Telephone Deposit 1 0 0  By Office Furniture and Equipment, at	Cosr—As at 30th June, 1929 41 9 10	£403 2 I	tution of the color of the colo
111	To Colonel J. Waley-Cohen Fund 49 17 0 (Note.—This Fund was created by a gift of £50 5% War Loan 1929/47, the Income to be applied to Subscriptions.)	To Accumulated Fund—  As at 30th June, 1929 95 11 4  Add Excess of Income over Expenditure for the year, per attached Account 159 1 10  254 13 2	SOUTHBOROUGH,	Hon. Treasurer. M. de Vere Hunt, Secretary.

We have audited the above Balance Sheet, dated 30th June, 1930, and have received all the information and explanations we have required. In our opinion such Balance Sheet is properly drawn up so as to exhibit a true and correct view of the state of the Council's affairs according to the best of our information and the explanations given to us and as shown by the books of the Council.

BARTON, MAYHEW & Co., Chartered Accountants,

Hon. Auditors.

Alderman's House, Bishopsgate, London, E.C. 2. 11th September, 1930.

## INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED

30TH JUNE, 1930.

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# THE JOINT COMMITTEE OF THE NATIONAL COUNCIL FOR MENTAL HYGIENE

### AND

### FOR THE PROMOTION OF THE INSTITUTE OF MEDICAL PSYCHOLOGY. THE TAVISTOCK SQUARE CLINIC

RECEIPTS AND PAYMENTS ACCOUNT FOR THE PERIOD FROM 9TH MAY, 1929, TO 12TH MARCH, 1930.

	20	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	" Deficit on Conference as IIO 16 I Per account attached IIO 16 I MENTAL HYGIENE— One-third of net £ s. d. proceeds of Ball as per account attached 305 II 8 Add Specific Donations per contra II II 6 Half General	Donations per viz., f24 1 9 12 0 10  Less Share of deficit on Conference as per account attached 55 8 0  Half expenditure
To Guarantee Fund £ s. d. £ s. d.  " £ s. d.  " £ s. d.  " £ ii5 o o  " Specific—  Specific—  To the funds of the undermentioned institutions—  The National Council for Medical  The Institute of Medical	Psychology 26 3 10 Do., King George's Thank Offering Fund 571 0 5 The Tavistock Square Clinic 20 15 8 General 24 1 9 account attached 916 15 1 1,570 8 3	TO SECRETARY AND PROPERTY OF THE PARTY OF TH

as above, viz.,

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											815 9 64			326 7 5	£1,685 8 3
One-third of net	of Ball	305	Add King George's Thork Offering	A T	Half General Donations per	contra, viz., £24 1 9 12 0 11	Less Share of Deficit 914 16 10	on Conference as per account	attached 55 8 r Half expenditure	as above, viz., £87 18 4½ 43 19 2½	-	". THE TAVISTOCK SQUARE CLINIC— One-third of net proceeds of Ball as ner account	305 11	contra 20 15 8	TKUOSC
															£1,685 8 3

We have prepared the above Statement of Receipts and Payments, and the Ball Account and Conference Account attached from the books and vouchers relating thereto and certify them to be in accordance therewith.

HARPER & BROOM,

Incorporated Accountants,

3-4, Clements Inn, London, W.C.2. 25th March, 1930.

### BALL ACCOUNT.

£ s. d.		916 15 1	£942 11 7
£ s. d. 25 0 0 . 0 16 6	305 11 8	305 11 8	
By Amount Paid to Mrs. Maclean on account of Sundry Expenses Printing	". BALANCE transferred to Joint Committee Receipts and Payments Account—One-third to The National Council for Mental Hygiene	One-third to the Institute of Medical Psychology One-third to The Tavistock Square Clinic	Mary Control of the C
To Ner Proceeds as per Honorary Treasurer's certified statement 950 19 7  Less ticket money not yet accounted for 11 11 0	" Donations 3 3 0		£942 11 7

### CONFERENCE ACCOUNT.

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### SUBSCRIPTIONS AND DONATIONS

FOR THE YEAR ENDED 30TH JUNE, 1930.

					Subscri	ptions.	Dona	tion	15.
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Allen, Miss D. H					I I	0 1	-	_	
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Armstrong-Jones, Sir Robe									-
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Ashby, Mrs. Corbett					5		-	-	
Bain, Dr. John					I I	0	-	-	
Baird, W. H., Esq					I I	0 1	-	-	
Balfour, John, Esq					I I	0 1	-	-	
Balfour, Mrs. W. J					1 1	0 1		_	
Barham, Dr. G. F					II	0	_	_	
Barkas, Dr. Mary R					I				
Barnes, Mrs									
Barnett, Dame Henrietta					I	0 1	-		
Barton, Miss L. K			****			5 0	22	-	
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Buzzard, Sir E. Farquhar,	Bart.				1 1	0	-	-	
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Carthew, Miss A. G. E.  Caston, Miss A. R.  Caton, Miss A. R.  Caton, Miss A. R.  Caton, Miss H. C.  Caton, Miss H. C.  Caton, Miss H. C.  Caton, Miss H. C.  Coeil, The Lady Gwendolen  I I I O  Chambers, Miss B. A.  I I O  Chambers, Miss B. A.  Chambers, Miss F. E.  Chambers, Mrs. H. Polhill  I I O  Chambers, Dr. James  I I O  Chambers, Dr. James  I I O  Chibb, Miss A. M.  Chibb, Miss A. M.  Clark, Miss A. M.  Clark, Miss A. M.  Clark, Miss A. M.  I I O  Cohen, Col. J. Waley  Cooper, Miss Bertha H.  Coreth, Countess Rudolf, 1929/30  Cowie, Miss J. C.  Cowie, Miss J. C.  Cowie, Miss J. C.  Cowie, Miss Gertrude  Craig, Sir Maurice  Crayen, Miss C. M.  I I O  Craven, Miss C. M.  I I O  Crowbey, Dr. R. H.  Crowby, Dr. R. H.  Crowby, Dr. R. H.  Crowby, Dr. R. H.  Crowby, Dr. R. H.  Crowber, Miss C. M.  I I O  Crowlen, Miss C. M.  Crowber, Miss C. M.  I I O  Crowlen, Miss C. M.  Crowber, Miss C. M.  Das, Dr. Barnarsi  I I O  Catern, Miss C. M.  Dawson of Penn, The Rt. Hon. Lord  Dawson, Dr. W. S.  de Peyer, Miss Hilda  Dett, Mrs. Leonard  Devine, Dr. F. H.  I I O  Evans, Dr. F. H.  I I O  Fallik, Mr. and Mrs. G. (*General and Propaganda, per Sir Maurice Craig)  Fallik, Mr. and Mrs. W. J.  Fallik, Mr. and Mrs. W. J.  Fallik, Mr. and Mrs. W. J.  Firth, Mr. and Mrs. W. J.  Fleming, H. A., Esq.  Fowler, J. S., Esq.  Cowler, J. S., Esq.  Cowled, Miss.  Complement, J. S., Esq.  Complement, J. S., E									ovel mild_go	
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