

OCT 31 1932

mm - mm/30

As from

"Harley"

143 Macquarie Street,

Sydney. N.S.W.

Omaha. Nov. 24, 1930.

Max Mason Esq.
President.

Rockefeller Foundation,

Dear Mr^r Mason,

100
Mental Health - Noble

At our last interview in New
York you asked me re certain work on
electrical reactions. Dr. Denny Brown
has been carrying out such work at
the National Hospital for Paralytic and Epilepsy,
Queen's Square, London, W. for some time.

The Journal of Mental Science (published
by Churchill, London) July 1930, contains an
article by Dr John R. Beith Robb on "A
Study of Inco-Ordinate Movements in
Epilepsy". I hardly think this is

just what you are interested in, but may have a bearing on the subject.

Much work of this kind has been done by photographing the path of an electric lamp attached to the finger tip in diseases accompanied by incoordination of movement.

I want to thank you for giving me the programme of Professor Elliot Smith. I was able to spend Sunday with him at Iowa City where Dr Houghton and Dr Brown were very kind to us. The State University is doing excellent work and is a type of organisation very suitable for a country like Australia.

Before coming here I had an interesting time with Dean Wintermitz and Professor Kahn at Yale. I am hoping that Professor Elliot Smith will be able to visit there.

³ The work being done in Canada in Mental Hygiene seems to be on sound lines. Their Annual Meeting was a very successful one, and the scientific basis of their work was the main feature of the discussions.

My visit to New York was a very short one, but it was pleasing to find how keen people are becoming about the need for a psychiatric basis for all mental hygiene work. It would have given me much pleasure to have stayed longer, but I must proceed to London by the "Makura" on 26th in order to join my family before Christmas. I found the leading psychiatrists with whom I was able to discuss matters in sympathy with the work of the National Committee for Mental Hygiene and anxious to see its work placed on a true scientific basis.

4. In order to help to form a basis for future work along these lines I make a few notes for the guidance of the committee, and enclose a copy herewith for your perusal as I know that you are interested in the welfare of such work. Of course they are in no sense a definite programme and were hurriedly put together. They might prove suggestive however.

I find that the term "Diploma" is not used for a post-graduate certificate in a special branch of medicine in this country as it is in Britain. Hence I might not have made myself clear with you when discussing the minimum requirements for such a certificate. I meant to infer that the ordinary graduate degree in

5 medicine and surgery was first essential. Psychiatry would be taught throughout this course, but every psychiatrist must be a physician. Then follows the special post-graduate training which would require a minimum of three years. Such a comprehensive and special training is available in only a very few centres at the present time - practically nowhere is it really satisfactory.

The possibilities for advance in this subject seem to me to be very good in this country, and other countries such as Britain are held back mainly because of financial depression.

It is my desire to help to place psychiatry on a sounder basis in Australia and New Zealand in the near

↳ future, and then I might be prepared to throw in my lot with some organisation on this side of the world that has the possibility of accomplishing a good piece of work in this field.

When the policy of your Foundation is defined, would you be kind enough to inform me as to its details?

Wishing you all success in your important office.

Believe me, Yours sincerely,
Ralph A. Noble.

P.S. — You probably know of Dr E. D. Adrian's work at Cambridge. The book "The Conduction of the Nerve Impulse" was a useful contribution (Cambs. University Press.)

1-23'31

100
Mental Health FORM 100

THE ROCKEFELLER FOUNDATION
INTER-OFFICE CORRESPONDENCE

From MM's diary

EEB		Eef Noble	
HAS		HAS	
WSC		WFL	
RAL		RAL	

ag

AG

November 14, 1930.

JAN 23 31

Dr. Noble and TBA.

General discussion of needs in the field of psychiatry. N. named first scientific study in the field of eugenics. Too much propaganda now without real knowledge. In the field of study of the individual N. considers the securing of psychological data as a matter of prime importance. In N.'s thinking medically trained man is the pivot in the situation but he should have working with him well trained psychologist. MM questions possibility of an emotional quotient corresponding to intelligent quotient. N. thinks such to be possible in future. Discussion on possibility of objective tests of efficiency of present methods. N. considers would be possible to make such a survey. Could not use practice of private psychiatrists but could use results in institutions.

In Great Britain there is great need for an effort similar to that of Yale Institute of Human Relations. All groups should be got together. The difficulty with Tavistock Clinic effort is that it would be too much of a one man show under Creighton-Miller's influence. N. questions seriously the advisability of promoting the Tavistock Square Clinic. Thinks the Yale effort very good and that more similar institutes are needed over the world.

OCT 31 1930

EEB JAN-1 11
H.A. SEP-2 31
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Mental Health
FORM 106

THE ROCKEFELLER FOUNDATION
INTER-OFFICE CORRESPONDENCE

From MM's diary

WSC	JAN-5 31	100	Noble
RAL		RR	
WHL		17 3	
EB		14	

November 17, 1930.

Dr. Ralph A. Noble and TBA.

N. described principal difficulties in field of psychiatry. Medical curriculum is too full. It is very necessary to get psychiatry into the medical schools. There are not enough chairs. N. is doubtful of value of child clinic expansion. Child guidance has been stressed enough for the present. Medical students should receive some training in psychiatry (psychology) - lectures and clinical contact. The student would then continue as postgraduate in psychiatry. Not necessary to have separate clinic. A small clinic attached to a general hospital is adequate.

At the present time students may obtain good training in psychiatry at Hopkins, Boston, Toronto, New York, and Yale. — Also Michigan, Iowa & Colorado, — which

A first desideratum is fellowships, and possible assistance of a N. probably few central training clinics. *Did not work*

N. feels that the National Committee of Mental Hygiene is able to study the field. He seemed to look with favor on his own participation for this purpose; also volunteered if the Foundation wished to produce such a survey he would be interested in the possibility of conducting it. He thought a man from outside the country would be indicated.

N. brought forward claims of Sydney for consideration. They have a chair in psychiatry. Medical school is good. They have no building or staff for a psychiatric clinic. They have received a grant of \$100,000, which, however, is not sufficient for support. At the present time they must use for teaching the psychopathic hospital, five miles away from the medical school.

Mention having been made of Jacobson's work on neuromuscular effects, N. is of the opinion that previous work has been done by Professor Bouman

at the Psychiatric Institute at Amsterdam, similar work at the Psychiatric Institute, Utrecht, previously under Professor Winkler's direction, and also at the Institute of Brain Research in Amsterdam by Ariens Kappers, but it is not clear whether N. is not confusing work similar to the old psychogalvanometer work. J.'s work refers to reactions in the muscles taking place in a fraction of a second after mental activity while the old psychogalvanometer work concerned itself with chemical changes in the skin from perspiration occurring several seconds after emotional stimulus.

COPY

100
Mental
Health -
- Noble

"Harley"
143 Macquarie Street,
Sydney, N.S.W.

Omaha Nov. 24, 1930

Max Mason Esq.
President
Rockefeller Foundation

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Wishing you all success in your important office,

Believe me,

Yours sincerely,

Ralph A. Noble (Signed)

P.S. You probably know of Dr. E.D. Adrian's work at Cambridge. The book "The Conduction of the Nerve Impulse" was a useful contribution. (Camb. University Press).

POINTS FROM PRELIMINARY DISCUSSION WITH VARIOUS
MEMBERS OF THE NATIONAL COMMITTEE FOR MENTAL
HYGIENE IN REFERENCE TO THE PROJECTED DIV-
ISION OF PSYCHIATRIC EDUCATION AND
RESEARCH

(For office use only in the National
Committee).

Note:- This is not a complete program, as it has been impossible
in the few days available to do justice to the same.

1. The most important development in the Mental Hygiene program for the immediate future is in the field of Psychiatric Education and Research, particularly in medical schools, psychiatric clinics, mental hospitals and centers for the training of nurses.
2. The development in this field will relieve the present deficiency of well trained teachers and workers.
3. The methods of psychiatric treatment must be continually under critical investigation.
4. The development of psychiatric education and research in the United States and Canada will lead to international benefits.
5. The National Committee for Mental Hygiene in this country is the best organization through which such education and research can best be developed. A Department of Psychiatric Education and Research should be established in The National Committee for Mental Hygiene. The Director of this Division should have the cooperation of an advisory council composed of representatives of
 1. The National Committee for Mental Hygiene
 2. The American Foundation for Mental Hygiene
 3. The International Committee for Mental Hygiene
 4. The American Psychiatric Association
 5. The American Medical Association
 6. The American Association for the Study of the Feeble-minded
 7. The American Council on Education, and other professional groups.
6. The program recently announced by Dr. C. M. Hincks, the General Director-elect of The National Committee for Mental Hygiene, in regard to the promotion of Psychiatric Education and Research, is

an outstanding and vital present need with reference to further progress in this field.

7. A psychiatrist of the highest training and international experience is required to direct and develop Psychiatric Education and Research. To attract such a man, a salary of \$20,000 per annum should be guaranteed for five years. Such an appointee should have a professional association with a significant piece of university medical education.

8. Necessary expenses for travel and secretarial assistance for the Division on Psychiatric Education and Research of the National Committee for Mental Hygiene must be provided for and an assistant director will be required soon after the work of the department is commenced. The Division will, therefore, require a budget of at least \$50,000 per annum, and more as its activities develop. This amount should be guaranteed over a period of at least a few years with the knowledge that the results accruing from the work will lead to further financial requirements and support.

9. The salary of the Director (or Executive Chairman) of this Division should not be drawn from too many different sources, as this might lead to dissipation of his energies..

10. He should keep in touch with International developments in Psychiatry and Research and should make the results of the work of The National Committee for Mental Hygiene available to other countries.

11. He should develop the program of the International Committee and should be Director of the Division on Psychiatric Education and Research of the International Committee as well as of the National Committee.

THE EFFECTS THAT SHOULD ACCRUE FROM THE
FINANCING AND DEVELOPMENT OF THE PROJECTED
DIVISION ON PSYCHIATRIC EDUCATION AND RE-
SEARCH OF THE NATIONAL COMMITTEE FOR MENTAL
HYGIENE.

Through the activities planned under the Division on Psychiatric Education and Research a greatly increased and sorely needed number of medical students will become interested in the psychological approach and will be led to adopt psychiatry as their life work.

All medical students will be trained to look upon the patient as a personality and not as a diseased organism.

At present the majority of medical graduates who take up psychiatry do so because they find an immediate and better income as a member of the staff of an institution than as an interne of a general hospital.

For the most part, such students are not really interested in the subject, and having lost the opportunity of further experience as house physicians or house surgeons in general hospitals have become less and less qualified to carry out successful general practice or to take up any speciality in medicine. They, therefore, drift along and become fit only for routine institutional work and incapable of making any valuable contribution in psychiatric education or research.

If psychiatry is presented as it should be in an interesting way, it will attract some of the more brilliant undergraduates and, if facilities are available after graduation for them to be given further insight into, and knowledge of, the subject in mental hospitals where efficient postgraduate training is available, the problem of finding efficient staffs for the excellent institutions and clinics that are being built in this country will be solved.

When and as the problem of staffing of such institutions and clinics is solved, research work in psychiatry will be placed on an

efficient basis and this most important branch of medicine will make such great advances that many of the present baffling problems in this field will ^{also} be solved.

To secure the necessary teachers of psychiatry it will first be necessary to make sure that there are at least several efficient training schools in connection with leading universities.

An investigation of existing clinics is necessary so that those which approximate the high standards necessary should be recommended to various foundations for assistance and for fellowships. When a few efficient centers are created good material will be attracted to them, and other universities will strive to reach similar standards. In the end, all universities should have efficient psychiatric clinics and teaching facilities for psychiatry.

The mental hospitals also should be made efficient centres of post-graduate training in psychiatry and for the training of nurses.

The standardization of mental hospitals, as has been done with general hospitals, would lead to much improvement in teaching and research.

The various universities will be required, in order to keep up to the standards of others, to have efficient teaching staffs of such quality that they will be able to interest all undergraduates and nurses in the subject of psychiatry, and also to give further training to graduates.

Standards of essentials in the teaching of psychiatry in the medical curriculum will be prepared and also the requirements for a recognized diploma or certificate in psychiatry will be set down for the guidance of teaching centres.

At present, the universities of this country have not made provision for such a certificate and once established, with a standard approved by a recognized body, it will be to the advantage of all members of the staffs of mental hospitals, psychiatric clinics, etc., who specialize in psychiatry, to obtain this certificate in order to secure advancement.

It will be essential to check up the effects of various methods of treatment and to analyze these results from an impartial viewpoint. The reasons for success or failure in various hospitals and clinics will be ascertained and recommendations will be made to the responsible bodies.

The general status of psychiatry will, therefore, be so raised and the results in this field so increased that American psychiatry will have wide-world influence. The advances in psychiatry in other countries will be studied by the Division on Psychiatric Education and Research and advanced in this country will be made known abroad through the activities of the International Committee for Mental Hygiene, whose secretariat is located in this country.

In order to bring these highly desirable results about, it is essential that the projected Division on Psychiatric Education and Research of The National Committee for Mental Hygiene be organized as soon as possible and adequately financed over a period of at least five years. One of the most important results of the activities of this Division will be to open up ways and means for various Funds and Foundations and individuals of wealth to perfect those centres which are capable of doing the best psychiatric work and teaching, and also to assist developments which show promise in other centers. Later the developments will extend to the very backward hospitals, but in the initial stages it is more important to concentrate on the perfecting of a few good teaching centres - first, to secure a group of well trained teachers and, secondly, to act as *demonstration clinics.*

R. Noble 20/xi/1930.

OCT 31 1932

MM		mm
		JBA
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100
Mental Health
Noble

January 30, 1931.

Dear Dr. Nobel:

Thank you very much for sending me the Report on ~~filed in Report Folder~~
the International Congress on Mental Hygiene and the
memorandum for use in the National Committee. I have been
very much interested in looking these over and in reading
the interesting letter and comments which you wrote en route.

We are proceeding very slowly in our own studies.
About three weeks ago we had the opportunity of sitting in
at a general conference in New York called by Hincks, in which
the field was informally thrashed over.

I enjoyed your visits in New York greatly, and we
are much indebted to you for your clear comments on the field.

With cordial greetings, I am

Sincerely yours,

MAX MASON

Dr. Ralph A. Nobel,
"Harley",
143 Macquarie Street,
Sydney,
Australia.

MM:AEB

1900 Mental Health Noble

THE NATIONAL COMMITTEE FOR MENTAL HYGIENE

INCORPORATED

450 SEVENTH AVENUE
NEW YORK CITY

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WILLIAM H. WELCH, M.D.

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DIVISION OF
PSYCHIATRIC EDUCATION

RALPH A. NOBLE, M.D., DIRECTOR
FRANKLIN G. EBAUGH, M.D., ASSOCIATE DIRECTOR

October 5, 1931

Wm - 1717
TBA - 832

Dr. Max Mason, President
The Rockefeller Foundation
61 Broadway, New York City

My dear Doctor Mason:

I am much indebted to you for your kind invitation to me to attend the conference which you are planning later in this month. I feel it an honor to be associated with this conference so soon after the commencement of my work in this country.

OK I have discussed with Doctor Hincks and Doctor Ruggles the subject matter which they expect to introduce at the conference and I think that my best contribution to the general discussion would be with regard to the position of medical, educational and social agencies in a program for mental health. It would, however, give me pleasure to cover any ground that should be assigned to me if you felt that the subject mentioned would be adequately dealt with by other speakers.

Very sincerely yours,

Ralph A. Noble

Director
Division of Psychiatric Education

RAN:M

*Mental Health
Noble*

October 6, 1931.

Dear Doctor Noble:

Mr. Frank has spoken of his conversation with you. The topic which you suggest fits in very well with the general program of the conference. We shall expect you to lead the discussion on position of medical, educational, and social agencies in a program of mental health, introducing the subject by a brief talk. I am enclosing the names of those, outside of the Rockefeller Foundation, who will attend the conference, arranged in the order in which they will present their topics. In general, about an hour will be allotted to the presentation by any one man and the discussion which will follow. The assignment as to specific days is tentative and subject to change as the need may arise.

We have reserved a room for you at the Norwich Inn beginning Wednesday evening, October 21st. Conferences will begin on the following morning and end on Sunday noon, October 25th. Unless you plan to motor to Norwich we should be very glad to see that you are met by bus or auto at New London if you will advise us when you will arrive.

Dr. Noble

- 2 -

October 6, 1931.

Do not bother to bring evening clothes. A large part of each afternoon will be left free from conferences. The Inn offers facilities for golf, tennis and riding.

Looking forward to seeing you at the conference, believe me

Sincerely yours,

MAX MASON

Dr. Ralph A. Noble,
National Committee for
Mental Hygiene,
450 Seventh Avenue,
New York City.

MM:ER
Encl

APR 25 1932

100
Mental Health
Noble

THE NATIONAL COMMITTEE FOR MENTAL HYGIENE

INCORPORATED

450 SEVENTH AVENUE

NEW YORK CITY

HONORARY PRESIDENT
WILLIAM H. WELCH, M.D.

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MAURICE H. REES, M.D.
ARTHUR H. RUGGLES, M.D.
WILLIAM L. RUSSELL, M.D.

October 29, 1931.

Dr. Max Mason,
President, The Rockefeller Foundation,
61 Broadway,
New York City.

My dear Dr. Mason:

Will you kindly accept my thanks for the courtesy shown to me by the Rockefeller Foundation in entertaining me as a guest of the Foundation at the conference recently held at Norwich, Connecticut?

In addition to the pleasure received by having the opportunity of becoming better acquainted with the various officers of the Foundation, I feel that it was of great value to learn the points of view of leading scientists who are not actually in the field of psychiatry regarding the lines of procedure which should be followed. It was especially useful to me, so shortly after coming to this country for the purpose of establishing the Division of Psychiatric Education in The National Committee for Mental Hygiene, to be able to gain the points of view of men in different scientific fields.

May I also state how great a pleasure it was to have the opportunity of meeting you personally in such congenial circumstances.

Yours very sincerely,

Ralph A. Noble

RN:L

NOV 10 1931

100
Mental Health
FORM 106

THE ROCKEFELLER FOUNDATION
INTER-OFFICE CORRESPONDENCE

	EB	NOV 10 31	Noble	

AG DIARY

Monday, November 2, 1931

Dr. Noble: (National Committee for Mental Hygiene)

On education in psychiatry.

N. says that Ebaugh is making a collection of factual material regarding number of hours, facilities, etc. in a large number of American schools. N. proposes to use this material later but would be inclined to concentrate his efforts on relatively few schools in the development of adequate facilities and teaching programs. N. is concerned because the Commonwealth Fund shows no indication of continuing grant for this work for more than a year. N. also prefers to maintain independence for his committee from other groups and individuals in the mental hygiene movement; has a rather good committee on education in psychiatry and has intentionally developed his post at New Haven in order to possess some academic status. He wants to know what we think of utilizing his committee in case we do something in mental hygiene and psychiatry.

AG tells N. he could not answer his question now but that in general he thinks the principal qualifications of his committee are that they are familiar with and identified with the Medical Schools, and AG hopes that they would have the permanence and tenacity as well as the patience and understanding necessary to develop something sound in the teaching of psychiatry.

N. is convinced that the recruitment of good men in this field is the essential step at the present time. Research projects are of value in this connection but not necessarily the objective.

N. has honesty, common sense and a good familiarity with the various factors of the teaching of psychiatry, but not as yet, and quite naturally, a familiarity with Medical Schools in this country.

(Copy EB)

100
Mental Health
Robb

INCORPORATED

Ralph A. Noble, M. D.
Director, Division of
Psychiatric Education

100
Mental Health
Noble

APR 20 1932

January 18, 1932.

My dear Doctor Noble:

Your letter of January 16, asking for an appointment with Miss Beard on Friday January 22, has just been received. Miss Beard is at present in Europe, and will not return to this country until some time in March. May I suggest, therefore, that, if you still wish an appointment with her after her return, you get in touch with her about April 1? I am very sure that Miss Beard will be interested in talking with you.

Very sincerely yours,

Florence Parshall Cass,
Secretary to Miss Beard.

Doctor Ralph A. Noble
Director, Division of
Psychiatric Education
National Committee for
Mental Hygiene
Yale School of Medicine
333 Cedar Street
New Haven, Conn.

FPC

100

Mental Health
Hobbs

10 Edgehill Terrace

New Haven
Connecticut.MAR 23 1932
March 25, 1932

AG			

Dear Dr. Gregg:

Thank you for your letter of the 14th inst. I am proposing to leave for Denver, Iowa City, and Ann Arbor on April first, and expect to be away about a fortnight.

Barry Smith has written asking for a budget and program for the Division on Psychiatric Education of the National Committee for Mental Hygiene, and wishes the same by the middle of ~~July~~ ^{April}. Before this matter is dealt with, I would appreciate very much if I could have an opportunity of speaking with you on several matters, regarding psychiatric education in this country and also my own relationship towards the same.

I gathered from your letter that it is unlikely that you will be able to visit New Haven in the near future. But if you could possibly give me an appointment before the first proximo, I would be very glad to come and see you at your office.

I forwarded the name of Dr. Ruth Fox to the Metropolitan Life Insurance Company, but I have not heard any further developments in that direction.

With best regards,

Yours very sincerely,

Ralph S. Noble.

Dr. Alan Gregg
Room 2701,
61 Broadway
New York City

3³⁰ o'clock Wednesday 30th

APR 20 1932

100
Mental Health
Noble

April 6, 1932

Dear Dr. Noble:

As you know, Miss Beard was in Europe for several months this winter. She has just now gotten back, and although it has been a long time since you requested an appointment to talk over the problems in the field of psychiatric nursing, if you feel that such a discussion would still be of value, she will be very glad to see you.

If you will call me at your convenience, I am sure we can arrange it to suit both you and Miss Beard.

Sincerely yours,

Edna S. Snyder
Secretary to Miss BeardDr. Ralph A. Noble
National Committee for Mental Hygiene
450 Seventh Avenue
New York City

ESS

100
Mental Health

FORM 106

MAY 10 1932

THE ROCKEFELLER FOUNDATION
INTER-OFFICE CORRESPONDENCE

GER	Noble	gwy		
EB				

AG DIARY 4-22-32

Dr. Ralph Noble (Mental Hygiene Committee)

N's impression of the situation in Boston is that there are a number of agencies interested in advancement of psychiatry but at present very poorly co-ordinated. It is increasingly clear to N. that one of the difficulties in American Medical schools is the unevenness and therefore the inadequacy of general medical training.

MAY 13 1933

100
Mental Hygiene
Noble

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EARL D. BOND, M.D.
C. MACFIE CAMPBELL, M.D.
CLARENCE O. CHENEY, M.D.
LAWSON G. LOWREY, M.D.
MAURICE H. REES, M.D.
ARTHUR H. RUGGLES, M.D.
WILLIAM L. RUSSELL, M.D.

Sent by special messenger

April 22, 1932

Dr. Frederick F. Russell, Director
International Health Division
The Rockefeller Foundation
61 Broadway, New York City

Dear Doctor Russell:

I beg to enclose herewith a copy of a statement entitled "Psychiatric Terminology", about which I spoke to you on Friday evening last. This is a copy of a pamphlet which Dr. Adolf Meyer issues to his students at Johns Hopkins University, to describe the terminology used in his lectures. Although I have not his direct permission to distribute copies of the material, I feel sure that he will be glad to know that you are interested in the matter.

With kind regards, I am

Yours very sincerely

Ralph A. Noble

Director
Division of Psychiatric Education

RAN:ELM

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PSYCHIATRIC TERMINOLOGY

In our work in psychopathology we learn to single out frequently recurring combinations of facts, which sometimes occur in pure culture and sometimes in combinations. We do not term them "disease entities" in the sense of the "disease" of traditional medicine, but, more modestly, reaction types or reaction sets, requiring in each case specification of the etiological factors and the type of course. A number of these sets of facts do, however, suggest fairly definite and specific events, corresponding to the traditional "disease entities". We should, however, have it understood that we do not treat the group of facts as "fixed entities", but rather as events which we have reasons to discuss as standard samples of what makes up psychiatry, to be kept at a minimum, but to be multiplied when facts call for it and new types and combinations prove to be valuable differentiations. We take up those events which have a sufficiently definite meaning and importance - groups of facts sometimes in pure-culture, sometimes incomplete or complicated by admixtures, but after all each requiring consideration in its own terms.

To obtain if possible an internationally intelligible terminology, it is desirable to look for generally acceptable word roots, starting from a term which would comprehend the whole realm of psychobiological activity. Ergasia seems to cover the field. It is derived from the Greek ergazomai, to be active, to work. The same root is found in the noun ergon, i.e., the same root as work; "erg" in physics is the unit of work. Energy means "the work put in" or the ability to put in work. Ergasia is the best term for performance and behavior and psychobiologically integrated activity in general. Ergastic psychology constitutes behaviorism in the sense of a psychology of performance.

Function has also been rendered as kinesis, i.e., movement or motion. Any kind of function or change was fundamentally considered as motion (see Galen). The word kinesis is, however, preferably reserved for neurology, or at least for movements proper, where it has been in use in the terms akinetic, i.e.,

motionless, and hyperkinetic (overactive, with excessive motion), and hypokinetic (with reduced and slow motion), and parakinetic (with side-tracked motion, due to more or less archaic types of suggestion and to hypnosis or complexes; we might speak of "odd or "twisted motion"). On account of this more specific usage limited more exclusively to motion, I prefer to use for the full-fledged psychobiological activity or reaction or function the term ergasia and its derivatives, to indicate all psychobiological action or performance including mentation.

The sets of significant facts with which we work provisionally (and in harmony with most systematic psychiatrists) are best grouped as:

1. The anergastic set of facts - activity denoting organic loss in the sense of actual tissue destruction, with the signs of true memory deficits and deficits of judgment and frequently release of epileptic or epileptoid reactions. This loss is indicated by the privativum in anergasia or anergastic disorders (as in akinesis). The standard types are the disorders constituting senile dementia and paresis, with their diffuse destructive lesions; moreover, arteriosclerotic dementia, Alzheimer's disease (i.e., a non-syphilitic presenile deterioration with characteristic cellchanges), amaurotic family-idiotcy, etc.
2. The dysergastic sets of facts - implies a disorder of the metabolic support and remediable disturbance of the nervous tissues by infections, poisons, or nutrition deficits - leading to disorientation, through difficulty of grasp on the situation, hallucinations, fear, etc. This type of combination is suggested by the prefix dys - having in the main the meaning of "poorly"; hence dysergastic means working poorly owing to non-mental or inframental but remediable (not destructive) interference with the smooth and effective running (or even maintenance of the intimate structure) of the nervous mechanisms. These delirious-hallucinatory disorders occur with changes either actually demonstrable in the tissues (with edema, and with the fever alteration in the cortex-cells) or at

least in the presence of poisons or infections or disorders of endocrine or nutrition functions.

The not primarily organic sets of facts in which, at present at least, we cannot profitably appeal to the brain lesion or even reparable damage in terms of infection, poison or subnutrition (i.e., essentially submental disorders) can properly be divided into those which cannot be readily explained from normal processes but only from archaic or unusual ones (as, for instance, from the phenomena and reactions skin to hypnosis) and those which are largely exaggerations or reductions of essentially normal traits (emotions and fancies).

The more odd and archaic types constitute

3. The para-group:

- (a) scattered or set, day-dream or fancy-born, parergastic if they involve the general activity;
- (b) paranoic when they are merely a distortion of the attitude under some dominant systematizing delusion without other disorder of behavior and mentation. We then speak of paranoia (or paranoesis = a side-tracked but not disorganized reason - from para = side, nous = reason or intelligence, in contrast to thymos, the affect).

I use the term parergastic in the sense in which schizophrenic is used, and I should use it to replace schizophrenic because schizophrenic is too closely identified with the concept of dementia praecox, a term unduly prejudicial prognostically. As instances of parergastic reactions I should mention projections (such as ideas of reference, hallucinations, ideas of influence, forced thinking), catalepsy, unaccountable incongruous behavior, etc.

4. On the other hand, we have the much more early intelligible, largely affective disorders - or thymergasia, either hyper- or hypo, i.e., up or down; overactive and elated = hyperergastic; or underactive, slow and inhibited and depressed and down-hearted - hypoergastic.

We deal here with a speeding up or elation, or with a slowing down or depression, without any special distortion or odd or archaic traits.

5. Merergastic (from meros, part, as in isomeric, hence part-behavior) sets of facts indicate normal general behavior but nevertheless partial disorders, grouped as "minor psychoses" or often called psycho-neuroses, or very euphemistically and evasively "neuroses", although only psychogenically intelligible:

(a) Nervousness, general and undifferentiated.

(b) The irritable weakness (nervousness with asthenia) called neurasthenia, probably oftener a disappointment reaction than one due to any physiological "nerve exhaustion".

(c) Hypochondriasis, a more topical blaming of discomfort on some organ or function.

(d) Anxiety states (nervousness appearing in attacks or panics and more or less vague anticipation, especially under frustraneous excitement).

(e) The obsessive reactions or ruminative tension states with dependence on the substitution of rituals or false obligations or doubts, usually dependent on deeper conflicts (what Janet calls psychasthenia).

(f) Dysmnestic substitutive "hysterical" disorders, comprehending the whole group of "hysterical" evasions and substitutions - not actual memory or feeling deficits, but submersions or benign dissociations.

(g) Convulsive disorders of epileptic and epileptoid nature and their equivalents, leading us back to organic and toxic reactions.

6. As our last group of facts we designate the defects of development, the oligergasias or oligophrenias (oligos-small or scanty), called idiocy with a level up to 2 years, imbecility with a level of up to 7 years, and morons with a level of 8-12 years in intelligence.

This type of fact closes the cycle by reaching over to the frankly organic defects again - but only those characterized as inadequate development without any real perversion or distortion of function.

These groups of reaction types or sets of facts can be briefly termed:

1. The "anergastic" or organic deficits as acquired defect reactions or dementias.
2. The "dysergastic" or support disorders represented by the deliria and hallucinatory disorders of infection, poison and false nutrition.
3. The "parergastic" and paranoid twist reactions, diffuse and general as in the schizophrenic, or circumscribed and systematized as in paranoia or in the paranoic or paranoid types.
4. The "thymergastic" or affective reactions of excessive speeding up or of depression and slowing, without essential distortion.
5. The "metergastic" or minor psychoses - with neurasthenic, hypochondriacal, anxiety, obsession and submersion and epileptic groups of reactions.
6. The "oligergastic" states of defective development, idiocy, imbecility and moron type, closing the ring by reaching plainly back to the organic deficits.

For our practical direction I group the type as causal working or dynamic explanation under the following headings:

1. Neuro - or cerebrogenic processes or conditions where we deal with fundamental disorders best expressed in terms of definite lesions or processes of destruction of the cerebrum, in terms of a recognized brain-disease - non-development or trauma, vascular disease, syphilis (mesoblastic or parenchymatous), senile atrophy, multiple sclerosis, polyneuritis, "central neuritis", Parkinson's disease, Huntington's and Sydenham's chorea, encephalitis lethargica, etc.

2. Exogenic processes where we can point to a poison or food deficit or infectious agent or toxin definitely imported from the outside and to processes causing oedema of pia and brain (alcohol, drugs, faulty foods, various infections) - usually producing deliria, hallucinosis or Korsakow disorder.

3. Organogenic processes due to disorders of definite visceral and endocrine or cardiac (circulatory), renal (eliminative), or respiratory organs and functions.

4. Psychogenic are those processes or reactions which can be referred definitely to specific life-experiences and their memories or associative tendencies, in contrast to

5. Constitutional inherited or at least ingrained reaction-tendencies or behavior-tendencies, much less modifiable and more a condition of set growth than free association.

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Mental Health
Noble

DATE June 7, 1932

RECEIVED FROM Ralph Noble

SENT TO AG

RELATING TO Noble to attend conference with Dr. McLean, Dr. Hincks and
others re the proposed programme in Psychiatry for the University of Chicago.
on June 11.

WILL BE FOUND WITH 216 A

University of Chicago

Psychiatry

100
Mental Health
Noble

DATE Dec. 9, 1932

RECEIVED FROM DPOB's Diary

SENT TO Interview with Dr. Ralph Noble.

RELATING TO Dr. Noble visited England in Nov.; gives various comments on
conditions there.

WILL BE FOUND WITH 401 A

Medical Education

100
Mental Health
Hobby

DATE Dec. 9, 1932

RECEIVED FROM OB's Diary

SENT TO Conference with Dr. R. Noble

RELATING TO R.N. Wallace will come thru N.Y. from England in near future and will probably visit RF. Conditions in Australia in Univ. quite different on account of depression. General pick-up because of recent changes in govt. New South Wales has new Nat'l govt. controlled under Stephens who is present premier and a good man.

WILL BE FOUND WITH 410

University of Sydney

Wallace

100

Mental Hospital
Noble

DATE Dec. 9, 1932

RECEIVED FROM OB's Diary

SENT TO Interview with Dr. Ralph Noble

RELATING TO Mapother at Maudsley Hospital is a good man; has charge of clinical material and is able to get first-rate assistants; claims he needs to keep them on for long periods of time. RN feels the weakness at Maudsley is lack of link with Medicine. Very little research being carried on under Mapother; some in the field of biochemistry of the nervous system. Dr. Aubrey Lewis, former MS fellow one of M's best men; will undoubtedly stay where he is and not return to Australia.

WILL BE FOUND WITH 401 A

Maudsley Hospital

Psychiatry

JAN 9 1933

THE ROCKEFELLER FOUNDATION
INTER-OFFICE CORRESPONDENCE

		100 Mental Health Noble		
	EB	JAN - 2 33		

AG diary:

December 29, 1932

Dr. Ralph Noble

Noble thinks that psychiatry in England could be very greatly aided by endowment of chairs and by applying aid to cases in medical, surgical and obstetrical wards. This, of course, includes pediatrics when speaking of Eng. N. thinks the best development in this country is the same type of liaison with other branches of medicine and that satisfactory recruitment for psychiatry will depend in part upon it.

Noble may go to England or may return to Sidney. AG interpreted the discussion as being an intimation that if the Foundation was interested in developing psychiatry in this way in England, we could do so, using Noble's services although he did not present or allude to any such possibility.

MEMORANDUM:

DR. ALAN GREGG

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Mental Health
Hobbs

Enclosed herewith are two statements which might be of interest:

- A. A report submitted to a meeting of the Council of the American Psychiatric Association which I attended, from the Committee on Psychiatry in Medical Education of that body. The report indicates the interest which is being aroused in the American Psychiatric Association.
- B. A statement which Dr. Kahn gave me, prior to the informal meeting of members of the Advisory Committee on Psychiatric Education, as he was unable to be present.

RH



C. MACFIE CAMPBELL, M. D.
MEDICAL DIRECTOR

MAR 1 - 1933

The Commonwealth of Massachusetts
Department of Mental Diseases

BOSTON PSYCHOPATHIC HOSPITAL

74 FENWOOD ROAD

BOSTON, MASS.

January 14, 1933.

Dr. Ralph A. Noble,
10 Edgehill Terrace,
New Haven, Conn.

Dear Doctor Noble:

I send you a brief record of the informal
report which I presented to the Council of the
American Psychiatric Association on December 29th.

Yours cordially,

A handwritten signature in cursive script, appearing to read "Macfie Campbell".

CMC:HPS

On December 29, 1932 Dr. Campbell presented to the Council a report of an informal committee meeting which had been held that afternoon, there being present Dr. Campbell as acting chairman of the committee on psychiatric education of the American Psychiatric Association, Dr. Russell, Dr. Noble and Dr. Ruggles, the latter two representing the National Committee for Mental Hygiene. Dr. Abbot was also present.

The committee took up for discussion the problem of psychiatric education, with special reference to the advisability of having some certificate in psychiatry or some other recognition of the qualification of the individual.

The problem of psychiatric education touches the American Psychiatric Association very closely as it involves the qualifications of the men in this special field of work. Medical education, however, is primarily the role of the medical schools, and the relationship of psychiatry to the general medical curriculum, its place in the training of the general practitioner, and its place as a basis for the later professional work of the psychiatrist have got to be considered.

The facilities of the different medical schools also enter into this problem. The American Psychiatric Association is not in a position to take up directly the problem of psychiatric education, but it can, through the regulation of its own body, through the requirements which it makes for admission to its body or for a certain standing within that body, do much to raise the level of professional training.

It seemed to the committee a useful step to urge the establishment of a certificate in psychiatry which would have the

indorsement of the American Psychiatric Association. Such a certificate would only be issued to the candidate after adequate examination and a review of the experience of the individual. The candidate would be required to be a graduate of a medical school of recognized standing, and to present evidence of a satisfactory training in neuroanatomy, neurophysiology, psychology, neuropathology, clinical neurology, clinical psychiatry.

The exact standards which would be established for this certificate are a matter which might well be referred by the Association to the appropriate committee. There are various possibilities. A board of examiners of the Association might conduct its own examinations, or it might decide what certificates issued by medical schools at any period would be considered acceptable to the Association.

It would seem wise for the American Psychiatric Association to decide this summer as to its policy with regard to these matters and to begin the necessary negotiations for carrying out such a policy.

In the meantime it seems advisable for the American Psychiatric Association to keep in close touch with the medical schools in order to bring to their attention the importance of education in psychiatry.

YALE UNIVERSITY
INSTITUTE OF HUMAN RELATIONS
333 CEDAR STREET
NEW HAVEN, CONNECTICUT

DEPARTMENT OF PSYCHIATRY
AND MENTAL HYGIENE

1/27/33

Dear Dr. Noble:

You may use the attached
statement for whichever purpose you
want to use it.

Sincerely,

EK

YALE UNIVERSITY
INSTITUTE OF HUMAN RELATIONS
333 CEDAR STREET
NEW HAVEN, CONNECTICUT

DEPARTMENT OF PSYCHIATRY
AND MENTAL HYGIENE

1/27/33

1) It is highly desirable that Dr. Noble's work be continued.

2) I do not see any ~~urgent~~ reason why it should be connected with the N. C. M. H.

3) If it would be found impossible to keep Dr. Noble in this country every effort ought to be made to get a thoroughly trained, independent man of first rate equally approved by Dr. Noble and this Committee*. I would rather like to ~~see~~ the work discontinued than carried on by an inferior person since such a person

P.T.O

*The Advisory Comm. on Precollegic Education

might very easily become the victim
of interfering interests of various groups
instead of being able to carry on the
work for the sake of pueriatry and
the pueriatrists to be.

Eugen Kalin

MAR 1 - 1933

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Mental Hospital
Noble

mil		MK

RCH

February 27, 1933

Dear Doctor Noble:

I have thought over carefully the subjects you discussed in your letter of February 2, and I am grateful to you for the help you have given me by expressing your own convictions and interests.

I think it will be our major interest to develop the investigative side in neurology, psychiatry and allied subjects rather than to attempt any activities in the field of facilitating the standards for specialists in psychiatry. It would seem to me that the establishment of such standards is an opportunity if not almost an obligation for the psychiatrists themselves and that in any event plans for improvement in that direction, and the initiative to aid it, should wait upon decisions taken by the psychiatrists themselves. Of course it is a very frequent experience for me to learn of undertakings well worth attempting but not necessarily lending themselves in a satisfactory way to aid from the Foundation. My impressions, therefore, have a merely personal character and in this sense I think that some action looking forward to the establishment of standards for specialists in the field of psychiatry and neurology would be desirable.

Though personally I see some advantages to be expected from the services of a well-trained individual acting as liaison officer between the psychiatrists and psychiatric clinics in various parts of North America and Great Britain, I am more concerned with the status of research as a natural corollary of teaching in a few of the leading posts. Furthermore I do not believe that the Rockefeller Foundation would be prepared to contribute towards or maintain a commission on psychiatric education and research at the present time. Were it possible to strengthen the position of some of the most effective psychiatric clinics I should prefer such a development, though I do not doubt that valuable results could be obtained from liaison work among many of the psychiatric clinics.

I would hesitate to express an opinion as to whether you should endeavor to strengthen the belief on the part of some of the Advisory Committee that some other organization is desirable outside that of the National Committee for Mental Hygiene. It seems to me that a decision of this sort must largely depend upon possibilities of securing adequate funds for the administration of the work of any new organization were it to be created.

I am sorry to be obliged to give an opinion which is not encouraging to you, but I know that you are aware of the limitations placed upon the programs of the Foundation at the present time, and I think you agree with me that the actual work done at

Doctor R. A. Noble

February 27, 1933

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a few centers is perhaps the most important nucleus from which we may justifiably expect encouraging developments in the future.

With best regards,

Yours sincerely,

ALAN GREGG

Doctor Ralph A. Noble
Department of Psychiatry and Mental Hygiene
Yale University
333 Cedar street
New Haven, Conn.
AG:GER

MAR 1 - 1933

YALE UNIVERSITY
INSTITUTE OF HUMAN RELATIONS
333 CEDAR STREET
NEW HAVEN, CONNECTICUT

100
Mental Hygiene
Hobby

DEPARTMENT OF PSYCHIATRY
AND MENTAL HYGIENE

February 2, 1933

AG	FEB-3 11	AG	2/2

Dr. Alan Gregg
Rockefeller Foundation
61 Broadway
New York City

Dear Dr. Gregg:

At the risk of boring you with the subject of psychiatry, I am setting down a few points which might assist in coming to a decision regarding the importance of taking the opportunity which seems to be offering at the present time, of separating psychiatry from "Mental Hygiene."

One feels quite convinced that the leading teachers in psychiatry in this country are anxious to support any development, quite apart from the Mental Hygiene organization, especially if they can have presented to them a programme that shows promise. The assistance they have given to the National Committee for Mental Hygiene in the past has been due to the fact that there has not been any other active organization through which they could work, and one feels that they are very disappointed with the present state of affairs.

In America itself the immediate possibilities for advance in this field seem to be, first, the separation of a strictly medical subject from the interference of lay groups and "ballyhoo."

Undoubtedly, the time is now ripe to establish standards for specialists in this field, as the American Psychiatric Association has already made provision for this possibility in its amended constitution, which will probably be passed at the annual meeting in June. The Association would naturally take early steps to establish the machinery for the examination of members who wish to obtain a certificate or diploma of proficiency, issued by the Association. The Association itself could carry out this work without financial assistance, but would doubtless be glad of advice in the early stages.

Such a diploma would have the effect of improving the postgraduate teaching, not only in psychiatric clinics attached to universities, but in mental hospitals themselves. It would be an easy matter for some of the states, such as Massachusetts, Pennsylvania, New York, etc., to follow the plan which was inaugurated last year in the Province of Ontario. In this system, 12 of the junior medical officers from the state mental hospitals of the Province are given a year's experience in the Psychiatric Clinic. A special programme of instruction has been arranged, in addition to the clinical experience which is available.

Requests for assistance in the development of curricula in the universities and in the mental hospitals which undertake teaching, are being constantly received. One feels that such developments could be easily assisted without the necessity of any large organization. The question of whether the present development which has commenced in the National Committee for Mental Hygiene should be extended and placed in the hands of a more representative body, or whether a new small "Commission on Psychiatric Education and Research" should be made, is a matter worthy of consideration.

I am more concerned personally with the greater problems of psychiatry itself. The greatest need appears to be clarification in this field of medicine. We need to have a better understanding regarding the material which should be presented to students, and the best method by which it can be presented. After all, there are only a few good teachers of this subject in America and in Britain; and if the best methods adopted by these men in their various approaches to the student at the different stages of his development in the medical course could be examined, and the material made available to younger men who are hoping to develop teaching in this field, such material should be of great value.

Means by which the teachers themselves could meet in their various teaching centers from time to time, and not only discuss problems of psychiatric teaching but see the good points of the schools visited, should be worth developing.

Some method by which the psychiatric field is kept in closer touch with advances in the other fields of medicine would be of great advantage.

Of course, the success of any plan that is evolved would depend upon the interest and activity of one man, and perhaps an associate who would later be able to take over the work of his chief.

A small group of experts in the teaching of psychiatry and of medicine would be of great moral support to such a man and to each other.

It would be an advantage if the work could extend not only in America but also in Europe, as there is definite need for the same type of cooperation in both countries, and also because the good features of the various systems which exist on both sides of the Atlantic should be mutually advantageous.

The international classification of mental diseases is a matter which is receiving considerable attention, and this work could be greatly assisted under such conditions.

The ease of modern transport indicates that such work could extend over both continents, and I should think that there might well be an American committee and a European committee of advice. If a small commission or body of any other title were created, I am quite sure that it would receive the active support of the leading psychiatrists in both continents. The psychiatrists themselves feel the need of moral support and opportunity to compare notes with each other and develop some clear principles in their own field.

When in England last summer, I was glad to be able to nominate Dr. Adolf Meyer as the Maudsley lecturer for 1933, and he will visit London for the purpose of delivering this lecture in May next. I expect to be there at that time. I should think that this would be an excellent opportunity to develop some definite liaison between the teachers of psychiatry in America and in Great Britain.

The question which I must decide in the near future, and on which I would be very glad to have your opinion, is whether I should endeavor to increase the conviction already expressed by certain members of the Advisory Committee on Psychiatric Education of the National Committee for Mental Hygiene that a wider organization is necessary outside of the Mental Hygiene body, or whether it would be wiser to select individuals who would form the nucleus of a new body. In the latter case, the National Committee could be left to develop its own programme.

A word as to finance. If a new commission or committee were created, it would of course be preferable if the work to be undertaken could be financed over a period of, say, five years by one Foundation. If, however, this were not possible, it should be easy to persuade those Foundations which are already supporting work in psychiatric education through the National Committee to continue to support or to share in the support of the same work, should the Advisory Committee, after 18 months' experience, recommend that the work be carried out in a different manner and under different auspices.

With kind regards,

Yours sincerely,

Ralph Noble

RAN:EP

MAR 3 1933

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Mental Health
Hable

YALE UNIVERSITY
INSTITUTE OF HUMAN RELATIONS
333 CEDAR STREET
NEW HAVEN, CONNECTICUT

DEPARTMENT OF PSYCHIATRY
AND MENTAL HYGIENE

	AG	3/1	AG	3/2
	February 28, 1933			

Dr. Alan Gregg
Rockefeller Foundation
61 Broadway
New York City

Dear Dr. Gregg:

May I forward to you herewith a "Draft of Recommendations regarding Education in Psychiatry, and steps that might be taken in the immediate future in this regard"?

I do so in the hope that you might have an opportunity to peruse the same before the conference which we are to have at your convenience.

One is much impressed with the fact that the teaching in this field of medicine needs further attention. The proposal outlined in the draft is the best suggestion I am able to offer at the present time.

The more one sees of the teaching of the subject, the more one is impressed with the dissimilar methods used in various universities, and the lack of clarity of the material presented. The need for better integration with the various subjects of the medical curriculum is apparent.

The Curriculum Conference of the Universities of London, Oxford, Cambridge, and the Royal Colleges of Physicians and Surgeons, which will shortly take place in Britain, might draw attention to these matters and offer some solution.

But further concentration on the teaching of psychiatry is certainly indicated, and the method which is outlined in the draft herewith suggests itself as one which might lead to fruitful results.

Believe me,

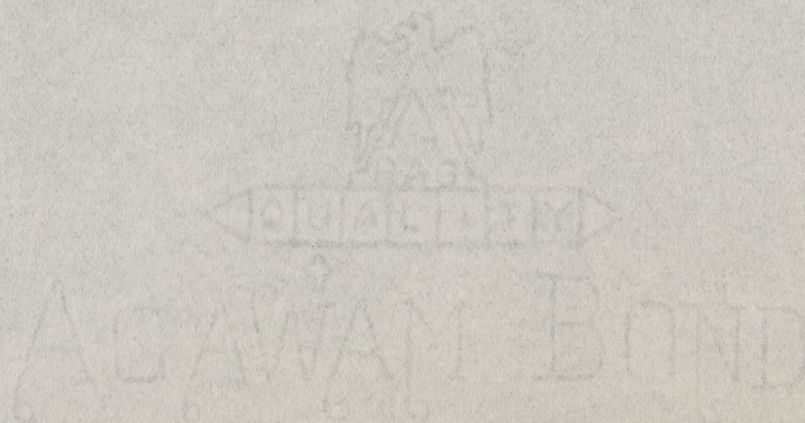
Yours sincerely,

Ralph Hable

RAN:EP

P.S. - I have made a summary of the statement, which is attached (last two pages) R.H.

DRAFT OF
RECOMMENDATIONS REGARDING EDUCATION IN PSYCHIATRY,
AND STEPS THAT MIGHT BE TAKEN IN THE IMMEDIATE FUTURE IN THIS REGARD.



RECOMMENDATIONS REGARDING EDUCATION IN PSYCHIATRY

It is apparent that the whole question of education in psychiatry must be approached through the medical curriculum. The attempt must be made to determine the requirements in medical education from the point of view of the functions of the physician. It is generally agreed that the physician must have a fuller understanding of human beings as such than he now ordinarily gains. Additional subject matter pertaining to the personality must be introduced into the curriculum. This cannot be done, however, by a formula which would apply in all schools. The methods of medical education differ from school to school. It is necessary, therefore, in each instance to analyze the curriculum in order that the additional subject matter pertaining especially to the mental and social aspects of disease may be given its proper place. This is not to be done simply by the addition of courses in psychology, psychiatry, or sociology, but rather by the methods of instruction which will bring out the interrelationship of biological and psychological sciences. The study of the whole person must be approached as an essential setting for the study of disease. Furthermore, it is necessary to indicate the continuity of pre-clinical and clinical subjects.

Investigation needed

The subject matter pertaining to the personality as a whole has not yet been clearly defined. A valuable approach to this problem is being made in several centers. There is much to be gained through an analysis of the system formulated by Dr. Adolf Meyer in his teaching of psychobiology. The student's study of his own life history and personality, under the guidance of an instructor in psychiatry, offers one way of bringing to the attention of the student the many factors which determine what the individual really is. It seems evident that essentials in the study of the personality

can best be taught by the physician well-grounded in biological principles, and that when possible he should also be trained in psychiatry. The difficulty in having psychology as a compulsory course, given by a psychologist who has not had biological training, is that more time might be required than can well be spared in the curriculum.

In the clinical years of medicine the question of the relationship of psychiatry to neurology and to clinical medicine and the other clinical subjects requires consideration. The mere presentation of definite advanced types of mental disorder in the final year of the medical course is certainly inadequate and gives the average student a wrong impression of the subject of psychiatry.

The closer cooperation between the teaching of psychiatry and that of medicine, surgery and pediatrics, in the general wards of hospitals, has certainly proved of great interest and value to students and internes. It should be encouraged in centers where it is possible to develop this type of teaching in addition to teaching in psychiatric clinics, but the time has not yet arrived when we can afford to introduce such a system extensively owing to the lack of financial resources and also lack of trained personnel.

On the whole the introduction of psychiatry into the curriculum for the purpose of training well-rounded physicians is the most important and logical initial approach to the whole question of psychiatric education. The very process of doing this will necessarily involve a formulation of the subject matter and will tend to create the point of view and special knowledge and ability required for postgraduate education and for research. Research is not a matter of organization. It will inevitably follow when persons of sufficient ability have become vitally interested in the field of psychiatry.

POSTGRADUATE EDUCATION IN PSYCHIATRY

There is great need for the further development of postgraduate teaching, first of all in the few universities where arrangements already exist for this work. Such centers should be strengthened and supported. At the present time it is unwise to attempt to develop postgraduate teaching in all universities, but a great advance could be made in association with state mental hospitals.

An example might be quoted from the Province of Ontario in which, during last year, a system was commenced of training 12 young members of the staff of the various mental hospitals in the Province at the Psychiatric Institute associated with the University of Toronto. These young graduates were in residence for the whole year at the Psychiatric Institute; and in addition to obtaining the experience of the routine of the hospital, they were given regular courses of instruction in the various basic subjects which are necessary to a proper understanding and qualification in psychiatry, such as psychology, neurology, neuroanatomy, neuropathology, etc.

There appears to be great opportunity for similar development, first of all in certain centers, such as in the States of New York, Pennsylvania, Massachusetts, etc. Already certain postgraduate teaching is undertaken in university centers in these States, but a great deal of further development could be organized with little expense to the state mental hospitals themselves, and with great benefit to the medical staff and to the whole system in general.

THE NECESSITY FOR HIGHER QUALIFICATIONS IN THE PSYCHIATRIC FIELD

There is ample evidence that various specialties of medicine are being organized in such a way that qualifying boards will be set up in all branches and specialties of medicine in the United States. Already many of the specialties have established their own qualifying boards, and these boards have been recognized. It is generally agreed that such boards should have a national character, rather than exercise only State supervision. It has been suggested that the American Medical Association should control registration and examination of candidates for specialties. Other bodies, however, feel that the American Medical Association is not an examining body, and that each specialty should set up its own qualifying board. A board might qualify without examining and examine without qualifying, but each qualifying board should decide on the members of the profession who are worthy of being looked upon as specialists in their field, and the board should be national in character.

It would seem most necessary that the principal organizations already existing in each specialty should see to it that they have control of the matter of qualifying and registering future specialists in their field. As far as psychiatry is concerned the American Psychiatric Association appears to be the organization which should establish a qualifying board and also the necessary machinery for the examination of candidates for a Diploma in Psychiatry issued by the American Psychiatric Association.

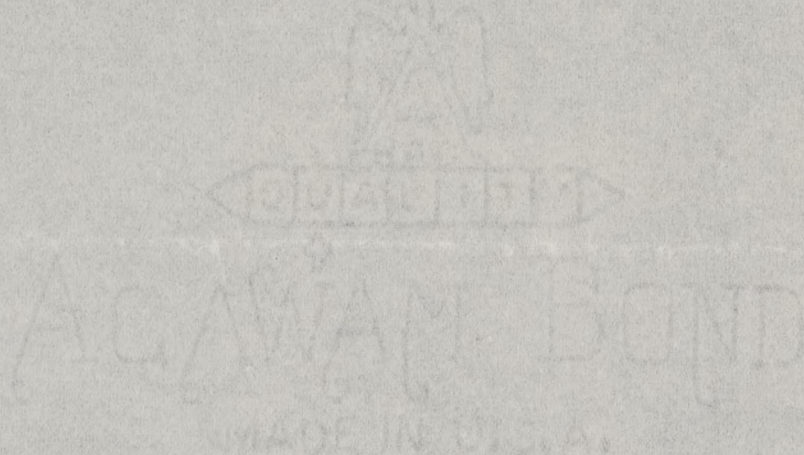
Psychiatry suffers considerably in America because of the fact that there are no higher degrees or diplomas in this subject as there are in such fields as Public Health. In the Department of the Seine, a district

subservient seven million people in Paris, all physicians filling higher administrative medical posts in the mental service must have served four years in a mental hospital and passed two special examinations in mental medicine. In Great Britain the time is fast approaching when a special diploma will be necessary for the practice of psychiatry as it is already for the practice of public health. Higher qualifications in psychological medicine or psychiatry have been determined for many years by the Royal Medical Psychological Association, by various universities, and by the conjoint Board of the Royal Colleges of Physicians and Surgeons. Higher degrees in medicine have been issued in the Department of Psychiatry in various universities. In Australia the same conditions have applied for several years, and the results have been most gratifying. In America, however, it has been possible for men without a thorough training to obtain a superficial knowledge of psychiatry, either in a mental hospital, psychiatric clinic, or mental hygiene clinic, and to have their names published in the directory of the American Medical Association as specialists in psychiatry. The result of this has been extremely detrimental to the whole of the field and to the reputation of those members of the profession who have gone to the trouble and expense of equipping themselves satisfactorily in psychiatry.

The inauguration of a Diploma in Psychiatry by the American Psychiatric Association, after due requirements as to training have been met and certain examinations passed, would have the effect of encouraging men who enter this field to obtain an adequate training. It would also give them a feeling of security which is necessary before men will spend the time and money required to become properly equipped in this field.

Moreover, it would stimulate postgraduate teaching in mental hospitals and psychiatric clinics to a considerable extent. The details of the requirements for a diploma and the method of examination could readily be worked out, especially as there has been so much experience in this direction in other countries, notably, Great Britain and France.

The cooperation of the American Psychiatric Association and the Association of American Medical Colleges would be advisable, and steps have already been taken which indicate that such cooperation will be willingly given.



INTERNATIONAL DEVELOPMENT IN PSYCHIATRY

It is of great importance to note that considerable interest has been aroused in psychiatric education in other countries. In the near future two committees will be inquiring into the whole subject of medical education in Great Britain, and the place which psychiatry is to play in medicine will be given full attention.

The Chairman of the Executive Committee of the Medical Curriculum Conference of the Universities of London, Oxford, Cambridge, and the Royal Colleges of Physicians and Surgeons of Great Britain, has asked for details concerning the pre-clinical teaching in psychiatry in American medical schools. At the same time the British Medical Association has set up a special Committee on Medical Education and Examination, to consider in part the content of the medical curriculum, the position of the various subjects therein, and their proper relationship to one another. The faculties of medicine of all British universities have been asked to appoint representatives to cooperate with the Curriculum Conference.

The final report of the Commission on Medical Education set up in America was submitted recently after seven years of study in various countries. Gratifying comments on this report have been made in America and elsewhere. The evidence collected and the views expressed by the Commission will no doubt be of great value to the British Committees recently appointed.

In a recent paper by Dr. Samuel P. Capen, Chancellor of the University of Buffalo, at the Congress on Medical Education and Licensure, held at Chicago, the writer drew attention to the value of the work of this Commission. He said that its successful results were largely due to the fact

that it was an independent body, responsible to no one and reporting to the world at large. The Commission did not seek to recommend changes but rather to record facts and to allow universities to make their own judgments regarding those facts. It was therefore evolutionary rather than bureaucratic. The Commission endeavored to reveal the way out rather than direct it.

In commenting on the excellent final report of the Commission on Medical Education, the British Medical Journal states:

"It may be gathered that the Commission would agree, as a general statement, that four of the principal needs in a revision of medical training are: (1) the bringing of clinical methods into close relation with the preliminary sciences and with anatomy and physiology; (2) the permeating of all teaching with the idea of prevention, and demonstration of its methods; (3) emphasis on the importance of the psychological aspect of medicine and the treatment of the person rather than of the disease; (4) recognition of the concept of medicine as a social agency."

These principles are generally accepted by those who are interested in the improvement of medical education, not only in America but also in Great Britain. It is worthy of note that the objectives which they imply would largely be met if the principles of psychiatry were applied throughout the medical course.

In dealing with the subject of psychiatry the Commission on Medical Education stated:

"No subdivision of medicine has received so much publicity and propaganda by untrained workers as the nervous and mental disorders, in which our present knowledge is still fragmentary and uncertain. Probably in no field of health work is there so much dangerous faddism. This is unfortunate because the problem is one of the most important health, educational, and public questions of our time. There is urgent need of fundamental studies in this subject It is highly important that teaching and investigation in the field be conducted by those adequately trained in general medicine."

In view of the fact that there are so few adequate teaching centers in psychiatry, and that so little attention and concentrated thought is being given to this subject, it would appear very wise to devise a means by which American and European experience can be interchanged, especially in the near future while the various conferences on medical education are taking place in Europe. International inquiry and cooperation in such a small but rapidly developing field is highly desirable.

The matter of international nomenclature and classification of mental disorders is one which requires further attention, but progress is hardly possible without some personal contact between the various bodies interested in the subject in different countries.

The International Hospital Association has established a Department of Psychiatry and of Mental Hygiene. The headquarters of this organization are in Frankfurt, Germany; and the next annual conference will be held in Belgium, when definite opportunities will be available for discussion of psychiatric problems. (June 18-24, 1933).

COMMISSION ON PSYCHIATRY IN MEDICINE

The question of the relationship of psychiatry to medicine has become so important, and the need for concentration on this subject is so apparent, that the methods of dealing with the matter are worthy of serious consideration. Psychiatric education does not at the present time need promotion, but the subject matter needs clarification by specialists in the field. The same problems are pressing in Europe as in America. It is essential to find ways in which the whole subject of psychiatry can be presented more simply, and pre-clinical teaching of this subject formulated so that it will be valuable and interesting to the student, as well as thoroughly integrated with the rest of the medical curriculum. At the present time the training in the pre-clinical years of medicine in the majority of medical schools is a groundwork only for medicine and surgery, and does not afford a satisfactory background for psychiatry. The study of the various approaches which are being made by teachers in different centers will be of great value in formulating the subject matter and methods of teaching psychiatry, for the benefit of other universities where the work is still undeveloped. There is great need for clear thinking in the psychiatric field before other groups without biological foundations become entrenched.

One of the best ways of attaining the aims in view appears to be the creation of a Commission on Psychiatry in Medicine, which would include leading teachers in psychiatry and in medicine itself. Such a Commission

should have international contacts in order to benefit from similar investigations which are being conducted in different countries. For example,

at the present time there are several investigations in medical education, e.g., the Curriculum Conference of the Universities of London, Oxford, and Cambridge, and the Royal Colleges of Physicians and Surgeons in Great Britain; the British Medical Association's Committee on Medical Education; the Committee on Psychiatry of the International Hospital Association, etc.

Such a Commission would carry out its work somewhat on the lines of the Commission on Medical Education which recently submitted its final report.

SUMMARY OF DEVELOPMENT REQUIRED IN FIELD OF PSYCHIATRY

TEACHING OF PRE-CLINICAL STUDENTS

Clarification of the subject matter and teaching, especially in pre-clinical years in medical schools.

Emphasis upon the importance of teaching the student to study the person as an essential setting for the study of the disease.

Study of the relationship of psychiatry to the other subjects of the medical curriculum.

TEACHING IN CLINICAL YEARS OF MEDICINE

The development of a closer cooperation between the teaching of psychiatry and that of medicine, surgery, and pediatrics.

Emphasis upon the best methods of demonstration of clinical material and the importance of discussing with students the possibilities of the various methods of treatment that might be employed.

POSTGRADUATE TEACHING

The strengthening and support of university centers, especially those which are giving the best postgraduate instruction.

Improvement of instruction of medical officers in association with state mental hospitals.

Provision for training schools in States or Cities where there are a number of mental hospitals.

THE NEED FOR HIGHER DEGREES AND QUALIFICATIONS IN PSYCHIATRY

The provision of Higher Degrees and qualifications in Psychiatry in America, similar to those already issued in Public Health. The experience of France and Britain in this regard should be of value.

INTERNATIONAL DEVELOPMENT OF PSYCHIATRY

Cooperation with the Medical Curriculum Conference of the Universities of London, Oxford, Cambridge, and the Royal Colleges of Physicians and Surgeons; and also the Committee on Medical Education and Examination of the British Medical Association, which have recently been established.

Investigation of standards for diplomas in psychiatry in France and Britain, and of present methods of examination in these countries.

Cooperation with the International Hospital Association through its Committee on Psychiatry.

Cooperation with committees on classification of mental disorders in European countries, with a view to a possible international classification.

COMMISSION ON PSYCHIATRY IN MEDICINE

The creation of a Commission on Psychiatry in Medicine is suggested. It would extend the work recently outlined in the final report of the Commission on Medical Education.

The formation of such a Commission would focus attention on the problem of psychiatric education.

The Commission should have international contacts because the field to be investigated is one which is receiving consideration in all academic centers at the present time. Moreover, the number of universities which are dealing adequately with the matter of psychiatric teaching is so small that they should all be included in the scope of such an investigation.

A budget of \$25,000 per annum should cover all the costs of such a Commission.

MAR 3 1933

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Mental Health
Noble

Wk		MK

March 2, 1933

Dear Doctor Noble:

I have received and read with much interest your draft of recommendations regarding education in psychiatry. Through delays caused by illness of some of my colleagues we are going to be unusually busy here in the next two or three weeks and I do not believe that I shall have much time free to talk things over. The letter I sent you a day or two ago covers I think the position that the Foundation will take, but if you feel that another talk is urgent, I can say that I expect to be here pretty steadily during all this month and that I am nearly always here the latter part of the afternoon excepting Saturdays.

I hope you will let me keep the draft of your recommendations since I think it contains several very clear and sensible statements regarding the development of psychiatry.

With best regards,

Yours sincerely,

ALAN GREGG

Doctor Ralph A. Noble
Department of Psychiatry
Yale University
New Haven, Conn.
AG:GER

MAR 6 - 1933
YALE UNIVERSITY
INSTITUTE OF HUMAN RELATIONS
333 CEDAR STREET
NEW HAVEN, CONNECTICUT

DEPARTMENT OF PSYCHIATRY
AND MENTAL HYGIENE

Dr. Alan Gregg
Rockefeller Foundation
61 Broadway
New York City

Dear Doctor Gregg:

I regret that my letter of February 28th was mailed before I received yours of the 27th -- hence, I am writing to add my appreciation of the consideration which you gave to my letter of February 2nd.

I know that you have always felt that the best developments in the field of neurology and psychiatry might result from the strengthening of some of the most effective centers. Unfortunately, there are so few of such, and their methods of teaching are so variable, that one is inclined to agree that the aims one has in view might, after all, be best attained by steady work in one good center where there is a sympathetic staff in the medical faculty, both in the pre-clinical and clinical subjects. Fortunately, such a situation already exists in the University of Sydney.

There is no doubt that development of the investigative side of neurology, psychiatry, and allied subjects, certainly needs to be encouraged. One of the most important investigations immediately necessary appears to be concerned with teaching, especially in the pre-clinical years, and the clarification of the subject matter taught, as well as the correlation of the various parts of the medical curriculum.

As far as the work of certain organizations in America is concerned, I have endeavored to draw attention to some of the possibilities which lie before them, and must leave it for the organizations themselves to decide in what manner and to what extent they can develop broader activities.

March 3, 1933

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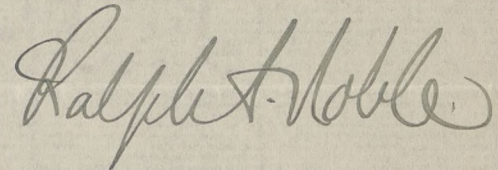
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Mental Health
Hobbs

After the meetings at Chicago, I paid an interesting visit to the University of Chicago, where I was glad to find Dr. Houghton. I had met him some years ago at Iowa; also, Dr. Bailey, whom I first met at Sal-pétriére in 1921. He asked me to talk with Dr. Grinker regarding further postgraduate training in psychiatry. I advised Dr. Grinker, who has a good knowledge of medicine and neurology, to concentrate first on clinical psychiatry, rather than carry out his proposed plan of having an immediate psycho-analytical investigation, and of seeing many clinics on the Continent of Europe. If he were to settle at a center such as the Maudsley Hospital, he should obtain a good background for future psychiatric work.

Your letter will, of course, obviate the necessity of a conference; but I would like to call on you one day before sailing for Europe to personally express my gratitude to members of the Foundation, and especially to you for the help which you have given me from time to time in our mutual interests.

With kind regards and best wishes,

Yours sincerely,



RAN:EP

100
Mental Health
Noble

MAR 6 - 1933

March 4, 1933

Dear Noble:

In the last paragraph of your letter of yesterday you say that you would like to call before sailing for Europe. I want to answer that with the exclamation that I should feel very sorry if you don't come in before you leave for I want to thank you for the help you have given me in many ways by the time you have spent in discussing matters with me. It was my desire only to point out that I was afraid the necessity of conference in the immediate future was rather dubious and that in the next few weeks I shall be rather loaded with work but when the preparation for the spring meeting is over I shall be very sorry not to see you as many times and for as long as you choose.

I think you have done an awfully good job and I know that I have things to learn from you in the future as I have learned in the past, and I hope to keep in touch with you.

Yours sincerely,

Doctor Ralph A. Noble
Yale University
333 Cedar street
New Haven, Conn.
AG:GER

ALAN GREGG

MAR 9 - 1933

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Mental Hospital
Hobbs
10 Edgehill Terrace
New Haven
Connecticut.

	AG	March 8, 1933		
		3/9	AG	

Dr. Alan Gregg
Room 2701
61 Broadway
New York City

Dear Gregg:

Thank you for your letter of March 2nd, received after mine of March 3rd had been dispatched -- and now for your further letter of March 4th, which is much appreciated.

I am glad that you are interested in the "Draft of Recommendations regarding Education in Psychiatry," and shall be glad to furnish you with a copy of my report when the same is completed.

Discussions with you, who know conditions in America better than I, and who also share European experience, have been most helpful.

I certainly will call on you before departing for Europe; but unless anything urgent develops, I shall leave my call until later, for I know how busy you must be in these difficult times.

Apparently I have omitted to mention that it is our intention to sail early in April if possible. I shall have my work here up to date by then, and would like to reach Europe some time before the universities go into vacation for the summer. I would like also to contribute something

Dr. Alan Gregg

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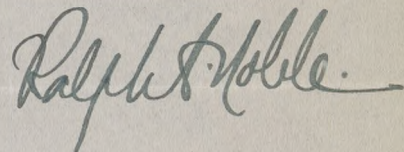
3/8/33

to, and learn much from the Curriculum Conference in London. And then there is considerable development required in the Department of Psychiatry at the University of Sydney, especially as the Foundation has so generously assisted the Medical School recently, and opened up new possibilities.

I certainly hope that our paths will cross again and that I shall be kept in touch with the excellent work you are doing.

With best wishes,

Yours sincerely,

A handwritten signature in dark ink, appearing to read "Ralph T. Noble". The signature is fluid and cursive, with a long horizontal stroke at the end.

RAN:EP

MAY 5 - 1933

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Mental Health
hubb

THE ROCKEFELLER FOUNDATION
INTER-OFFICE CORRESPONDENCE

From AG's diary

April 6, 1933

Dr. Noble == Permanent address: c/o Commonwealth Banking Co. of Sydney,
212 Birch Lane, London E. C. 3

Leaving next week for Eng. Is of opinion that teaching of psychiatry in med. schools and relationship of psychiatry to other depts. in med. schs. is of as much importance as research in intensive depts. as such. Thinks that Hincks would be willing to let me see Ebaugh's report. It was, however, too critical for it to be thought desirable to publish.

No commitments to Noble but I thanked him sincerely for his continued help in explaining what his committee has been doing and his personal estimates of desiderata in field of psychiatry in this country.

JUL 20 1933

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Mental Health
Noble

c/o COMMERCIAL BANKING CO. OF SYDNEY LTD.,

18, Birchin Lane,

London, E.C. 3.

England.

4th July, 1933.

Dr. Alan Gregg,
The Rockefeller Foundation,
61, Broadway,
NEW YORK.

17/1	JUL 12 1933	14	7/19

Dear Doctor Gregg,

Some weeks have passed since I sailed from New York and doubtless you will be planning your summer vacation at this time of the year. I am sure that you will need a rest from your busy life and will look forward to a change with your wife and young family.

I was glad to hear that you were able to spend the day at Boston at the Conference on Psychiatry in the Curriculum. I would like to have been there myself but I gather that the matter was well discussed and plans for future action have been decided upon.

Shortly after we arrived in Britain we placed the children at school at Cambridge where they are very happy. I developed an Appendix and spent a month in Hospital having it attended to and also having some teeth removed. Now that this is all over we are planning to spend our summer vacation in the country.

Last week I was invited to meet the Curriculum Conference of the Universities of London, Oxford and Cambridge and the Colleges of Physicians and Surgeons. Sir Farquhar Buzzard, the Chairman, is particularly interested in the question of Psychological Medicine and the Committee seem glad to have my suggestions and apparently they will act upon them in the near future. The experience which I had in America is therefore of considerable value here and I am sure that when the Curriculum is revised the position of Psychological

Dr. Alan Gregg.

4th July, 1933.

Medicine will be adequately dealt with.

The greatest need in Britain is for a demonstration of Psychiatric Consultation work and teaching on the wards of a General Hospital attached to a University Medical School.

At present the work done in the Out-Patient Department does not include sufficient teaching of the type which we were carrying out at Yale in the last two years. I am quite sure that if a demonstration were given in one of the London teaching schools, similar to that which was done at Yale, the work would be developed in other centres in a very short time with conspicuous success.

After the summer vacation I will look into the possibility of assisting with some such development in London.

I have received letters from Sydney which indicate that they are anxious for me to return there early next year as they will be shorthanded in the University work, and probably I will arrange to do this.

The new Rockefeller Medical School at Sydney is approaching completion and will be opened later in this year.

I do not know if you will be likely to be paying a visit to this side of the Atlantic during 1933 but, if so, I would certainly be glad to see you. I wonder also if Dr. O'Brien will be in Britain! Perhaps you would be good enough to let me have his address and if he is coming he might be good enough to drop me a line.

I am greatly appreciative of the interest which you took in my work whilst I was in

Dr. Alan Gregg.

4th July, 1933.

America and the time which you gave to me.

Wishing you all success, and with
kindest regards,

Yours sincerely,

Ralph A. Noble.

100
Mental Health
Noble

NOV 21 1933

C/O COMMERCIAL BANKING COMPANY OF SYDNEY, LIMITED,

18 BIRCHIN LANE,

LONDON, E.C.3.

NOV-8 '33

AG

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11/17

28th October, 1933.

Dear Dr. Gregg,

I have not acknowledged your kind letter of July 19th. I was fortunate in meeting Dr. O'Brien recently in Cambridge, when he called to see Dr. Adrian. It is good to know that you might be visiting Europe early next year. I heard that you were present at Boston at some of the meetings of the Psychiatric group, and I am glad that you found time to glance at my Report.

You will be interested to learn that the Royal College of Physicians of London has appointed me to its Membership. I have found it very interesting to visit various Universities in Britain and compare the methods which are being used in teaching Medicine, and particularly Psychiatry, with those which I saw in America. As I go about, I see so much which points to the excellent work which you have done. The new Library at Cambridge is a handsome structure, and the Institute of Hygiene and Tropical Medicine in London demands admiration.

We have our three children at schools in Cambridge where they are happy, but we must uproot them at the end of the year as I have promised to look after the Department of Psychiatry at Sydney University during the next Academic year whilst Dawson takes his leave. I will look forward with much pleasure to working in the new Medical School. One is often tempted to consider the possibility of living in Britain, and it may be that after next year we will return for this purpose.

Mrs. Noble joins me in sending kindest regards to you.

Yours sincerely,

Dr. Alan Gregg,
The Rockefeller Foundation,
61, Broadway, New York.

Ralph A. Noble

JUL 20 1933

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Mental Health
Noble

July 19, 1933

Dear Doctor Noble:

Thanks so much for your letter of the 4th of July. I am awfully sorry to learn that you have been ill with an appendix, but I hope that after various things were subtracted you felt more content with the remaining organism and are in the best of health by now.

I am very glad to have your comment and your first impressions in Britain. I don't at the moment expect to go abroad within the current year, but I suppose it rather likely that by the first half of 1934 I shall be abroad. O'Brien's address is 20, rue de La Baume, Paris, and I know he would be glad to look you up when he next goes over to England.

I have received the copy of your report which Hincks has distributed. It had a fair amount of newspaper publicity in the last two or three days, but I have not had time yet to go over it, though I shall certainly do this in the near future.

With best regards to yourself and Mrs. Noble,

Yours sincerely,

Doctor Ralph A. Noble
c/o Commercial Banking Co. of Sydney, Ltd.
18, Birchin Lane
London E. C. 3, Eng.
AG:GER

ALAN GREGG

NOV 21 1933

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Mental Health
Noble

WSC		WFB

November 17, 1933

Dear Doctor Noble:

It was very good of you to write me your letter of the 28th of October, and I am glad to hear from you and especially glad to know that the Royal College of Physicians of London has made you a member. Your plans in regard to Sydney were also, of course, news and of interest.

If some time you have a chance to comment on the teaching of psychiatry in Britain as you have seen it, or if you chance to write anything for publication on this subject, you will remember I hope that I would be one of your most attentive readers.

I am glad that your family news is good and I hope that you will give Mrs. Noble my best greetings. With the office moved uptown we are in a neighborhood considerably more congenial and easy of access than was the 61 Broadway office. I suppose that your way back to Sydney will take you via Suez though I wish I could look forward to a chance of seeing you here again.

With best greetings,

Yours sincerely,

Doctor Ralph A. Noble
Commercial Banking Company of Sydney, Ltd.
18 Birchin Lane
London E. C. 3, Eng.

ALAN GREGG

DEC 28 1933

¹⁰⁰
Mental Health
Noble

c/o Commercial Banking Co. of Sydney.

18, Birchin Lane,

LONDON, E.C.3.

To
Dr. Alan Gregg,
Rockefeller Foundation,
49 West 49th Street,
New York City.

AL	DEC 26 33	A4	12/26	Dec. 15, 1933

Dear Dr. Gregg,

Thank you for your kind letter of November 17th. I am glad to learn that you have moved your office, but at the same time I always thought that your view from the offices down town was magnificent.

I shall be glad to write to you regarding the teaching of psychiatry in Britain, as I have seen it, and to forward you any publications on the matter. There is no doubt that an excellent opportunity exists for development in Britain, particularly in regard to the closer relationship between clinical psychiatry and child guidance with the departments of medicine, surgery and pediatrics in the teaching hospitals.

I am glad to know that the University of Cambridge is considering the establishment of a clinic at Addenbrooke's Hospital, and the Professor of Physic has invited me to develop this scheme. I would not be able to undertake it until after taking charge of the Department of Psychiatry at Sydney next year, but I understand that they are willing to wait until then. I am hoping that this can be done and also that similar developments can be undertaken at one of the London teaching hospitals concurrently.

I cannot see the opportunity to visit New York at present,

Contd. 2.

Dr. Alan Gregg.

but will certainly keep in mind your kind invitation to look you up again when I am passing that way.

With kindest regards from Mrs. Noble and myself, and best wishes for 1934,

Sincerely yours,

Ralph A. Noble

December 15th 1933.

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2. The Company shall not be liable for mistakes or delays in the transmission or delivery, or for non-delivery, of any message received for transmission at the unrepeatable message rate, whether caused by the negligence of its servants or otherwise, beyond the sum of five hundred dollars; nor for mistakes or delays in the transmission or delivery, or for non-delivery, of any message received for transmission at the repeated message rate, whether caused by the negligence of its servants or otherwise, beyond the sum at which such message shall be valued, in writing, by the sender thereof when tendered for transmission and for which payment is made of the amount of the repeated message rate plus an additional charge equal to one-tenth of one per cent of the amount by which such written valuation shall exceed five thousand dollars.

3. The Company shall not be liable in any case for delays arising from unavoidable interruptions in the working of its circuits; nor for delays or errors caused by storms or the action of the elements, or other acts of God, or by civil or military authority, or by insurrections, riots, rebellions, or the unlawful acts of individuals; nor for errors in cipher or obscure messages.

4. No responsibility attaches to this Company concerning messages until the same are accepted at one of its transmitting offices. If a message is sent to such office by messenger, whether supplied by the Company or not, the messenger acts for that purpose as the agent of the sender; if by telephone or by telegraph the person receiving the message acts therein as agent of the sender, and is authorized to assent to these conditions on behalf of the sender.

5. The Company will not be liable for damages or statutory penalties in any case where the claim is not presented in writing within sixty days after the message is filed with the Company for transmission.

6. It is agreed that in any action by the Company to recover the tolls for any message or messages the prompt and correct transmission and delivery thereof shall be presumed, subject to rebuttal by competent evidence.

7. The special terms governing the transmission of the messages classified below shall apply to such messages in addition to the foregoing terms.

8. No employee of the Company is authorized to vary the foregoing terms.

R. C. A. COMMUNICATIONS, Inc.
66 Broad Street, New York
DAVID SARNOFF, President.

FOREIGN

Full-Rate Radiograms—An expedited service throughout. Plain and Cipher language admitted.

Deferred, Half-Rate Radiograms—Half rate messages are subject to being deferred in favor of full rate messages for not exceeding 24 hours. They must be written in plain language and in one language only. Any language authorized for international telegraphic correspondence may be used. Figure groups must not exceed one-third of the text. Deferred service is available to most countries of the world.

Urgent Rate Radiograms—Take precedence over all other commercial messages. The word "Urgent" should be written as the first word of the address.

CDE Rates—Radiograms in code language are accepted at 60 percent of the Ordinary or Urgent Rates, according to the class of service desired. Code words are limited to five letters. Figure groups may not exceed 50 percent of the total number of words in text and signature.

Radioletters—Radioletters are of two classes, either NLT or DLT, according to whichever class is admitted by the country of destination. NLT are delivered on the morning after the day of filing. DLT are delivered on the morning of the second day after filing. Radioletters must be written in plain language and in one language only. Any language authorized for international telegraphic correspondence may be used. Figure groups must not exceed one-third of the text.

CLASSES OF SERVICE

DOMESTIC

Full-Rate Radiograms—An expedited service throughout.

Day Letters—A deferred day service at One and one-half times the standard rate for a 10-word Full Rate message for the transmission of 50 words or less and one-fifth of the initial charge for each additional 10 words or less.

Special Terms Applying to Day Letters:

In further consideration of the reduced rate for this special Day Letter service, the following special terms in addition to those enumerated above are hereby agreed to:

A. Day Letters may be forwarded by the Radio Company as deferred messages and the transmission and delivery of such Day Letters is, in all respects, subordinate to the priority of transmission and delivery of Full Rate Radiograms.

B. This Day Letter is received subject to the express understanding and agreement that the Company does not undertake that a Day Letter shall be delivered on the day of its date absolutely, and at all events; but that the Company's obligation in this respect is subject to the condition that there shall remain sufficient time for the transmission and delivery of such Day Letter on the day of its date during regular office hours, subject to the priority of the transmission of Full Rate Radiograms under the conditions named above.

No employee of the Company is authorized to vary the foregoing conditions.

WASHINGTON OFFICE

1112 Connecticut Ave.
9 A.M.-12 Noon & 4-6 P.M. Sun.

National 2600

BOSTON OFFICE

109 Congress Street

Liberty 8864

SAN JUAN, P. R. OFFICE

6:30 A.M. to 8:00 P.M.

Edificio Ochoa.

SANTO DOMINGO, DOM. REP. OFFICE

8:20 A.M. to 10:20 P.M.

Edificio Diez

PORT AU PRINCE, HAITI OFFICE

7:00 A.M. to 7:00 P.M.

Tel. No. 3322

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28 Geary Street

Garfield 4200

6:00 A.M. to 7:00 P.M.
(except Sunday)

Garfield 4200

Always Open

HONOLULU OFFICE

125 So. King St.

Tel. No. 6116

MANILA OFFICE

Always Open

Plaza Moraga

RADIOGRAM



Via RCA

WORLD
WIDE
WIRELESS

Via RCA



R.C.A. COMMUNICATIONS, INC.

A RADIO CORPORATION OF AMERICA SUBSIDIARY

FORM 112-R X-667

TEL. CIRCLE 7-5525

RECEIVED AT R. C. A. BUILDING
30 ROCKEFELLER PLAZA

NEW YORK, AT

1934 JAN 4 AM 8 12

STANDARD TIME

RX4 XM GBK1041

LONDON 51 4 1109

LC DR ALAN GREGG ROCKFOUND NEWYOK

EARLY DEVELOPMENTS SIMILAR TEACHING INTRODUCED YALE LIKELY
BRITAIN ESPECIALLY CAMBRIDGE STOP WOULD YOU BE INTERESTED

STOP COULD ALTER ROUTE SYDNEY ARRIVE NEWYORK JANUARY TWENTY-
FOURTH OR WOULD LATE SEPTEMBER SUIT YOU BETTER WHEN I MAY BE
RETURNING BRITAIN STOP PLEASE CABLE THURSDAY

JAN 8 - 1934

HHP		HHP	
AG		As	1/8
mk		MA	

RALPH NOBLE TOWNSFOLK LONDON

FOR MESSENGER CALL
Circle 7-5525

TELEPHONE HANOVER 2-1811

To secure prompt action on inquiries, this original RADIOGRAM should be presented at the office of R.C.A. COMMUNICATIONS, Inc. In telephone inquiries quote the number preceding the place of origin.

*100
Mental Health
Note*

JAN 23 1934

C/o The Commercial Banking Company of Sydney
Ltd.,
18 Birchin Lane,
London, E. C. 3.

8th January, 1934.

Dr. Alan Gregg,
The Rockefeller Foundation,
49 West 49th Street,
New York City, U.S.A.

	AG		HK	1/23
		JAN 18 '34		
	mk		MK	

Dear Dr. Gregg,

Thank you for your letter of December 26th. I am glad to know that you are interested in the possible developments in the teaching of psychiatry in Britain. It looks as if a Child Guidance Clinic, associated with the Department of Psychological Medicine will be established at Addenbrooke's Hospital this year. Also some of the teaching schools in London are becoming more interested in the matter.

On the 4th instant I sent you a cable as follows :-

"Early developments, similar teaching introduced Yale, likely Britain, especially Cambridge. Would you be interested. Could alter route Sydney - arrive New York January 24, or would late September suit you better? when I may be returning Britain. Please cable Monday."

As I did not receive a reply I presume you are away from New York at present and therefore I will proceed to Sydney direct rather than travel by New York.

I will hope to inform you in more detail of any developments that may occur.

With kind regards,
Yours sincerely,

Ralph Noble

P.S. - Your cable just received :-
"September preferable." I will let you know what chances there are of doing some useful work in Britain later.

P.S. My address in Sydney will be :- 143 Macquarie Street, Sydney,
N.S.W. Australia.

RN

JAN 25 1934

Copy of a Memorandum which I submitted
to the Curriculum Conference of the
Universities of Oxford, Cambridge and London.

Apparently the suggestions contained have
received sympathetic consideration.

R. L. S.

100
Mental Health
- Noble

JAN 25 1934
January 23, 1934

Dear Doctor Noble:

I have your letter of the 8th of January. It seemed much better to postpone your visit here until I have had an opportunity, which I anticipate, of being in Britain in the latter part of the spring. I am nonetheless grateful to you for sending on the memorandum on psychological medicine, and will look forward to any other developments that you may tell me of, with a great deal of interest.

With best greetings to Mrs. Noble, and many thanks for your Christmas card,

Yours sincerely,

ALAN GREGG

Doctor Ralph A. Noble
143 Macquarie street
Sydney
New South Wales
Australia
AG:GER

100
Mental Health
Noble

"Harley."

143 Marquarie Street,
Sydney.

5th March, 1934.

Dr. Alan Gregg,
The Rockefeller Foundation,
49, West 49th Street,
NEW YORK, U.S.A.

184	MAR 28 1934	143	3/28

Dear Dr. Gregg;

Your letter of 23rd January reached me
in Sydney recently, shortly after we arrived from London.
copy with AO to Sunda

It was very kind of you to write and to
show your continued interest in the development of the
teaching of psychological medicine.

Evidently my visit to Britain stimulated
some interest in the subject there. Before I left Lon-
don I was invited by Dr. R. W. Gilmour, Physician in
Psychological Medicine at the Middlesex Hospital, to
accept an Honorary Appointment to assist him. At present
he has no staff and the department is entirely undevel-
oped beyond the existence of a special ward in the hos-
pital for psychiatric cases.

Last week I received a cable from Cambridge
inviting me to return to establish a Child Guidance Clin-
ic and to take charge of the Department of Psychological
Medicine at Addenbrooke's Hospital as from the beginning

Dr. Alan Gregg.

- 2 -

of the next academic year in October.

I am glad to have received invitations from Britain to undertake work along the lines which I did at Yale. Unfortunately the British people are not in a position to offer an adequate salary. As you know most hospital positions in Britain are honorary, and the physicians holding them depend upon practice. I would like to be able to devote my whole time to teaching and research work in Britain were this financially possible, and the proximity of Cambridge to London would allow me to work in both places, meeting the students in the tripos classes at Cambridge and in the later years at the teaching schools in London. If I had an income of about £1,000 per annum I could afford to do this, but if this were not available from salary or fellowship sources I would need to augment my income by consulting practice.

The Regius Professor of Physic, Professor W. Langdon Brown, of Corpus Christi College, Cambridge, is particularly interested in this development. He advised me to apply for a Pinsent-Darwin Grant of £225 per annum which is available for three years from 1934. He also suggested that I should endeavour to secure your interest in the proposal. I have done the former, but as McCurdy who is Secretary of the

Dr. Alan Gregg.

- 3 -

Trust favours its allotment to some young graduate in order to further develop his interest in Psychiatry, I hardly think that it will be offered to me. However, I expect to hear shortly.

Would you care to get in touch with Professor Langdon Brown when you are in England? He visits London on at least two days in each week at 31 Cavendish Square, W.1. Also, Professor Adrian is doubtless aware of the Cambridge situation. It is well known that McCurdy has discouraged this development in Cambridge, mainly to avoid doing any hospital teaching himself, and for this reason the hospital has looked elsewhere for its man.

Among those who have definitely expressed themselves interested in my return to Britain I might mention Sir Farquhar Buzzard, Chairman of the Curriculum Conference, and Regius Professor of Medicine at Oxford; Sir Maurice Craig; Sir Hubert Bond; Professor W.W.Jameson; Dr. Bernard Hart; Dr. R.W.Gilmour; Dr. C.S.Myers, Director of the Institute of Industrial Psychology; and Mr. L.V.Brock, Chairman of the Board of Control.

If a Rockefeller Fellowship or some such grant were available for two or three years to make my income up to £1000 per annum, I would accept the Cambridge appointment

commencing there in October next.

Another reason why I would like to be in Britain is that I might be invited to take an active interest in the development of the Post-Graduate Medical School which should open this year in London. It is important that Psychological Medicine should be available at this school. I saw Dr. McKeith the newly appointed Dean, at the suggestion of Sir Farquhar Buzzard.

The reason for my return to Sydney was to take charge of the Department of Psychiatry as the appointment of Professor Dawson has expired and he returns to London this week. I am hoping that arrangements will be made for his reappointment and return to Sydney later in the year, after visiting clinics abroad.

In the next few months in Sydney we hope to work out the plans and organisation for a Psychiatric Clinic near to the new Rockefeller Medical School, and to provide for a neuro-surgical department in the building. The money for the building and equipment is in hand, and the maintenance of the beds is practically guaranteed already. Outside of my own department, I am hoping to establish at Sydney a training course for dietitians and one for

Dr. Alan Gregg.

- 5 -

hospital almoners, and also a University Health Service.

I hope you will pardon all of this detail regarding my own plans, but I feel sure that you are interested in the same.

The new Rockefeller Building at Sydney University is excellent. Much of the equipment is in position. Classes are already being held. Some research has commenced, but it will be a little time before it is proceeding in all departments. The proximity to the hospital wards is most valuable, and the future of the school is indeed promising. There is no doubt that this generous gift should prove most valuable in every way.

When passing through Melbourne I saw Dr. Macnamara. She was very grateful to you for extending her fellowship in America, and benefited very considerably by her experience there and in Britain. She is keeping in good health and is hoping to arrange some definite research work in Melbourne in the near future.

Thank you for your kind greetings to Mrs. Noble and myself. We are glad to be back in Sydney this year as the planning of the new Psychiatric Clinic is an important matter. We left our two girls at the Perse School at

Dr. Alan Gregg.

- 6 -

Cambridge because they were doing so well there and were so happy. Miss. Cattley, the Headmistress, was anxious not to have their school year interrupted.

I don't think I told you that soon after we arrived in London last May I developed an appendix which was removed. Also a dozen carious teeth were extracted. As a result of the removal of these septic foci and of the voyage to Australia, I am enjoying excellent health.

May I look forward to the pleasure of seeing you again before long?

With kindest regards in which my wife joins me,

Yours sincerely,

Ralph A. Noble.

*Mental Health
Note*

"Harley."

143 Macquarie Street,

Sydney.

APR 17 1934

15th March, 1934.

Dr. Alan Gregg,
The Rockefeller Foundation,
49, West 49th Street,
NEW YORK, U.S.A.

APR 11 '34	AG	4/16 cable

Dear Dr. Gregg;

Since writing to you on the 5th instant,
I have received a letter from Addenbrooke's Hospital,
Cambridge, which reads as follows:-

"I have the pleasure to inform you that
the General Committee at their meeting last week unan-
imously appointed you to the post of Honorary Medical
Officer in charge of the Psychological Department and
Child Guidance Clinic. A cable was sent to you today
to this effect".

A reply is requested and I must make
up my mind quite soon as to whether I can afford the
cost of removing to England and dropping my interests
in Sydney for at least two years, in order to estab-
lish this work at Cambridge.

It would help me very much in deciding
this matter if I knew that I would have an income which
would cover living expenses in Britain. Would it be

Dr. Alan Gregg.

- 2 -

asking too much of you to kindly send me a cable indicating whether the Foundation would be interested in this scheme to the extent of augmenting my income in Britain so as to make it up to approximately £1000 per annum for two or three years? If I could anticipate having such an income I would make plans to finish the schemes which are in hand in Sydney and sail for Cambridge in time to commence there in October next.

My cable address is

Dr. Ralph Noble,
Macquarie Street,
Sydney.

With kind regards,

Yours sincerely,

Ralph A. Noble.

100
Mental Health
Noble

March 28, 1934

JUN 29 1934

Dear Doctor Noble:

I have your letter of the 5th of March or rather the copy thereof, and I am, of course, interested in the information that it contains.

As far as I know I shall be getting over to England some time in June, and one of the purposes of the visit will be to get some first hand orientation on status of affairs there, a purpose which in all probability would include a visit to Cambridge and the chance to see Doctor Langdon Brown. When the plans are certain I shall in all probability write for some appointments. To answer the questions you raise would be very difficult consequently at the present time. I will, however, bear the matter in mind.

Too bad that you had to go through an appendicitis, but I trust that the end result is a continued good health.

With kindest regards to you and your wife in which Mrs. Gregg would join me,

Cordially yours,

Doctor Ralph A. Noble
"Harley"
143 Macquarie street
Sydney, Australia.
AG:GER

ALAN GREGG

RADIOGRAM

CLASS OF SERVICE DESIRED	
FOREIGN	DOMESTIC
FULL RATE	FULL RATE
URGENT	DAY LETTER
DEFERRED <input checked="" type="checkbox"/>	NIGHT MESSAGE
RADIO-LETTER	NIGHT LETTER



Via RCA

WORLD
WIDE
WIRELESS

Via RCA



R.C.A. COMMUNICATIONS, INC.

A RADIO CORPORATION OF AMERICA SUBSIDIARY

NO.	CASH OR CHG.
CHECK	
TIME FILED	

Send the following Radiogram "Via RCA" subject to terms on back hereof, which are hereby agreed to

April 16, 1934

✓
RALPH NOBLE
MACQUARIE STREET
SYDNEY (Australia)

APR 17 1934

FOUNDATION NOT PREPARED TO CONSIDER PROPOSAL AT
PRESENT

GREGG

FULL-RATE MESSAGE UNLESS MARKED OTHERWISE

Sender's Name and Address The Rockefeller Foundation, 49 West 49th Street, New York City

(Not to be Transmitted)

FORM 100-50 TA-537

OFFICES IN NEW YORK CITY

ALWAYS OPEN	64 BROAD STREET	HANOVER 2-1811
8:30 A.M. to 4:30 P.M. (except Sunday)	Produce Exchange	BOW. Green 9-2321
8 A.M. to 8 P.M. (except Sunday)	120 Cedar Street	REctor 2-1677
	19 Spruce Street	BEekman 3-8220
	25 East 17th Street	ALgonquin 4-7050
	126 Franklin Street	WAlker 5-4891
	264 Fifth Avenue	LExington 2-5347
	Chrysler Bldg.	MURray Hill 2-1891
	102 West 56th Street	Circle 7-6210
	103 Maiden Lane	BEekman 3-1924
	30 Rockefeller Plaza	Circle 7-5525
8 A.M. to midnight 10 A.M. to 6 P.M. Sun.	19 West 44th Street	MURray Hill 2-4996

Trans-Atlantic Radiograms will also be accepted at joint offices of the Western Union Telegraph Company and R.C.A. Communications, Inc., in New York, Washington, Boston and San Francisco and at all Western Union offices in other parts of the United States. Trans-Pacific Radiograms will be accepted at any office of the Western Union Telegraph Company. Radiograms addressed to a ship at sea may be filed at any Western Union Office.

ALL MESSAGES ACCEPTED BY THIS COMPANY ARE SUBJECT TO THE FOLLOWING TERMS:

To guard against mistakes, the sender of every radiogram should order it repeated; that is, telegraphed back to the originating office for comparison. The additional charge for this service is one-half the ordinary tolls.

Unless otherwise indicated on its face, this is an unrepeat radiogram and paid for as such, in consideration whereof it is agreed between the sender of the message and this company as follows:

1. This Company shall not be liable in any case for mistakes or delays in the transmission or delivery, or for non-delivery of any message, beyond its own terminals. In forwarding this message to the stations or over the circuits or by any other communications agency this Company is hereby made the agent of the sender without liability for mistakes, neglects or delays of such other communications agency, its agents or servants.
2. The Company shall not be liable for mistakes or delays in the transmission or delivery, or for non-delivery, of any message received for transmission at the unrepeat message rate, whether caused by the negligence of its servants or otherwise, beyond the sum of five hundred dollars; nor for mistakes or delays in the transmission or delivery, or for non-delivery, of any message received for transmission at the repeated message rate, whether caused by the negligence of its servants or otherwise, beyond the sum of five thousand dollars; nor for mistakes or delays in the transmission or delivery, of any message received for transmission at the specially valued message rate, whether caused by the negligence of its servants or otherwise, beyond the sum at which such message shall be valued, in writing, by the sender thereof when tendered for transmission and for which payment is made of the amount of the repeated message rate plus an additional charge equal to one-tenth of one per cent of the amount by which such written valuation shall exceed five thousand dollars.
3. The Company shall not be liable in any case for delays arising from unavoidable interruptions in the working of its circuits; nor for delays or errors caused by storms or the action of the elements, or other acts of God, or by civil or military authority, or by insurrections, riots, rebellions, or the unlawful acts of individuals; nor for errors in cipher or obscure messages.
4. No responsibility attaches to this Company concerning messages until the same are accepted at one of its transmitting offices. If a message is sent to such office by messenger, whether supplied by the Company or not, the messenger acts for that purpose as the agent of the sender; if by telephone or by telegraph the person receiving the message acts therein as agent of the sender, and is authorized to assent to these conditions on behalf of the sender.
5. The Company will not be liable for damages or statutory penalties in any case where the claim is not presented in writing within sixty days after the message is filed with the Company for transmission.
6. It is agreed that in any action by the Company to recover the tolls for any message or messages the prompt and correct transmission and delivery thereof shall be presumed, subject to rebuttal by competent evidence.
7. The special terms governing the transmission of the messages classified below shall apply to such messages in addition to the foregoing terms.
8. No employee of the Company is authorized to vary the foregoing terms.

FOREIGN

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Deferred, Half-Rate Radiograms—Half rate messages are subject to being deferred in favor of full rate messages for not exceeding 24 hours. They must be written in plain language and in one language only. Any language authorized for International telegraphic correspondence may be used. Figure groups must not exceed one-third of the text. Deferred service is available to most countries of the world.

Urgent Rate Radiograms—Take precedence over all other commercial messages. The word "Urgent" should be written as the first word of the address.

Code Rates—Radiograms in code language are accepted at 60 percent of the Ordinary or Urgent Rates, according to the class of service desired. Code words are limited to five letters. Figure groups may not exceed 50 percent of the total number of words in text and signature.

Radioletters—Radioletters are of two classes, either NLT or DLT, according to whichever class is admitted by the country of destination. NLT are delivered on the morning after the day of filing. DLT are delivered on the morning of the second day after filing. Radioletters must be written in plain language and in one language only. Any language authorized for International telegraphic correspondence may be used. Figure groups must not exceed one-third of the text.

CLASSES OF SERVICE

DOMESTIC

Full-Rate Radiograms—An expedited service throughout.

Day Letters—A deferred day service at One and one-half times the standard rate for a 10-word Full Rate message for the transmission of 50 words or less and one-fifth of the initial charge for each additional 10 words or less.

Special Terms Applying to Day Letters:

In further consideration of the reduced rate for this special Day Letter service, the following special terms in addition to those enumerated above are hereby agreed to:

A. Day Letters may be forwarded by the Radio Company as deferred messages and the transmission and delivery of such Day Letters is, in all respects, subordinate to the priority of transmission and delivery of Full Rate Radiograms.

B. This Day Letter is received subject to the express understanding and agreement that the Company does not undertake that a Day Letter shall be delivered on the day of its date absolutely, and at all events; but that the Company's obligation in this respect is subject to the condition that there shall remain sufficient time for the transmission and delivery of such Day Letter on the day of its date during regular office hours, subject to the priority of the transmission of Full Rate Radiograms under the conditions named above.

No employee of the Company is authorized to vary the foregoing conditions.

WASHINGTON OFFICE

8:30 A.M. to midnight 9 A.M.-12 Noon & 4-6 P.M. Sun.	1112 Connecticut Ave.	National 2600
7:00 A.M. to 11:00 P.M.	BOSTON OFFICE 109 Congress Street	Liberty 8864
6:30 A.M. to 8:00 P.M.	SAN JUAN, P. R. OFFICE	Edificio Ochoa.
8:20 A.M. to 10:20 P.M.	SANTO DOMINGO, DOM. REP. OFFICE	Edificio Diez
7:00 A.M. to 7:00 P.M.	PORT AU PRINCE, HAÏTI OFFICE Maison Léger	Tel. No. 3322
Always Open	SAN FRANCISCO OFFICES 28 Geary Street	Garfield 4200
6:00 A.M. to 7:00 P.M. (except Sunday)	330 California Street	Garfield 4200
Always Open	HONOLULU OFFICE 125 So. King St.	Tel. No. 6116
Always Open	MANILA OFFICE	Plaza Moraga

R. C. A. COMMUNICATIONS, Inc.
66 Broad Street, New York
DAVID SARNOFF, President.

Serial Day Letters—Individuals or firms may send any number of Day Letters during any one day to the same person or firm and the words in each message will be accumulated to a daily total and charged at the Day Letter rate plus 20 percent. A minimum of 15 words per serial message will apply.

Night Messages—Accepted up to 2:00 A.M. at reduced rates to be sent during the night and delivered not earlier than the morning of the ensuing business day. See special conditions below.

Night Letters—Accepted up to 2:00 A.M. for delivery on the morning of the ensuing business day, at rates still lower than standard night message rates, as follows: The Full-Rate Radiogram rate for 10 words shall be charged for the transmission of 50 words or less, and one-fifth of the initial charge for each additional 10 words or less.

Special Terms Applying to Night Messages and Night Letters:

In further consideration of the reduced rates for these special Night Message and Night Letter services, the following special terms in addition to those enumerated above are hereby agreed to:

Night Messages and Night Letters may, at the option of the Radio Company, be mailed at destination to the addressee, and the Company shall be deemed to have discharged its obligation in such cases with respect to delivery by mailing such Night Messages or Night Letters at destination, postage prepaid.

TELEPHONES: B 5412
FU 9229 (AFTER 5 P.M.)

*100
Mental Health
table*

"Harley."

143 Macquarie Street,
MAY 24 '34 Sydney.

	<i>RA</i>		<i>Gen</i>
	<i>RA</i>	1st May, 1934.	<i>RM</i>

MAY 25 1934

Dr. Alan Gregg,
The Rockefeller Foundation,
49, West 49th Street,
NEW YORK CITY, U.S.A.

Dear Dr. Gregg;

Thank you very much for your letter of
March 28[?]th, and your subsequent cable, both of which I
much appreciated.

It is very interesting to know that you
are hoping to visit England in June and that you will
probably see Professor Langdon Brown. He is evidently
keenly interested in the development of the teaching of
psychological medicine. I am hoping therefore that
further developments in this direction will open up more
definitely in Britain in the near future.

I hope that your visit to Europe will be
in every way satisfactory as well as a real pleasure to you.

With kindest regards to yourself and Mrs.
Gregg in which my wife joins me,

Yours very sincerely,

Ralph A. Noble.

100
Mental Health
note

EB	SEP 27 34	Received

September 26, 1934

SEP 27 1934

Pend - unfiled

Copy to OB

Dear Noble:

As a consequence of the letter that you wrote on the 15th of March I made a special point of seeing Langdon-Browne in Cambridge. I also had a chat with Bartlett and got something of an idea of the proposed set-up at Addenbrookes in psychological medicine. I didn't have quite as hopeful a feeling about it as I had anticipated. I should prefer to see any such project launched with somewhat more permanent backing and under somewhat more stable auspices than are possible in the case of a Regius who is under the present regulations quite likely to retire at 65 and is already 63.

Is it not true that Browne's departure would raise the question of what sort of a position Regius professorship is to be now that the new university statutes are not at all uncertain on subject of retirement at 65, and in view also of the fact that up to now the Regius has been a most honorable exit for scholarly London consultants who were not thereby cribbed, cabined and confined by the contemplation of an unlimited career as Regius?

I am rather more impressed with the possibilities in London than the present picture in Cambridge. In any event I should be interested in what your decision has been. I would

Doctor Ralph A. Noble

September 26, 1934

2

welcome and could perhaps profit from a discussion of the project which you could rely upon my keeping quite confidential if you feel like giving it. If the question comes up again such a discussion would be very helpful to me as a basis for forming an impression of what you see in the situation and the contribution you feel you could make.

With best regards,

Yours sincerely,

ALAN GREGG

Doctor Ralph A. Noble
Harley
143 Macquerie st.
Sydney, Australia
AG:GER

JAN 3 - 1935

Mental Health
noble

86, BROOK STREET,
GROSVENOR SQUARE, W.1

Mayfair 5001.

AG

12/29

London,

15 December 1934

My dear D Gregg.

Your letter of September 26th has gone around the world and reached me here this week. It was very kind of you to show such interest. I shall write to you in the near future regarding plans in Cambridge and London - and meantime Mrs Noble and I send our cordial greetings for Christmas and the New Year.

With kindest regards from us all,

Yours sincerely,
Ralph H. Noble

86, BROOK STREET,
GROSVENOR SQUARE, W.1

Mayfair 5001.

February 1st, 1935.

SEP 15 1937

Dear Dr Gregg,

In December I wrote from Cambridge thanking you for your kind letter of September 26th and mentioned that I would write in more detail after the Christmas season.

We have been living at Cambridge through a full term and a second term has commenced. I must confess that the conservative element which has always existed there has prevented as much progress as I had hoped in the development of clinical teaching. There is no doubt that this aspect of undergraduate teaching will always be done in London and that all one can hope to do at Cambridge is to establish a satisfactory psychiatric department at the general hospital.

I have not yet found in Britain one centre where there exists a psychiatric clinic associated with a general hospital with adequate accommodation for in-patients and also for out-patients and for consultations in the general wards. If such a clinic can be developed at Cambridge the system will doubtless be copied elsewhere. The present arrangement in England as a rule is for the superintendent of the nearest mental hospital to be invited to conduct at the general hospital a small clinic in the out-patient department to which chronic cases are referred. There is but little liaison between this department and the physicians and surgeons of the hospital. x 401A

I quite agree with you regarding the possibilities in London, and indeed I have spent half of each week in London since I arrived in October. I first of all got in touch with Mapother at the Maudsley and with Carmichael at the National Hospital and learned that

you had most generously promised further support to both of these institutions.

I feel that the Maudsley Hospital, despite its close affiliation with the King's College Hospital, does not associate itself sufficiently with internal medicine and surgery. The members of the staff devote their attention entirely to frank psychiatric work and the out-patient departments which have been commenced in some of the L.C.C. hospitals deal mostly with chronic material. The two wards at the King's College Hospital which have been made available to the Maudsley Hospital are used as an overflow for material of a definite psychiatric character. There is practically no liaison between the psychiatrists of the Maudsley Hospital and the physicians and surgeons of the King's College Hospital.

At the National Hospital, Queen Square, excellent work is done with the definitely organic cases, but little interest is taken in the cases that prove to be "functional".

I was appointed to the staff of the Middlesex Hospital commencing on the 1st of October and therefore I have had the opportunity of seeing the attitude of physicians and surgeons to psychiatric work in a hospital where there is a ward of 25 beds for nervous cases. Nearly all of these beds are occupied by patients suffering from organic nervous diseases and the physicians and surgeons do not use the psychiatrists for consultations in the general wards. The attitude of the physicians in Britain towards psychiatric work is such that this branch of medicine has become entirely divorced from general medicine. I am finding at the Middlesex Hospital that the keener members of the staff, particularly some of the surgeons and the men dealing with pediatrics, are becoming more interested in the importance of psychiatric work in relationship to their own patients.

This divorce of the treatment of nervous diseases from general medicine has led to the development of such institutions as the National Institute of Medical Psychology, and to the increase of child guidance clinics and of psycho-analysts in the community. The people carrying out this work are not associated with the teaching hospitals and therefore they are not keeping up a proper interest in general medicine itself.

My own feeling is that it is essential to overcome this separation of nervous diseases from general medicine and to interest the student and the young graduate in the psychological and social factors which are responsible for so much of the illness which is seen in the general wards themselves. I therefore went to Professor Fraser at St Bartholomew's Hospital and during last term worked in his medical unit. As you know, this is the best teaching unit in Great Britain, and Fraser was kind enough to ask me to deal especially with such of his cases as seemed to have any psychological or social difficulties affecting the condition for which they were admitted to his wards. I was asked to supply a supplementary report on such cases, so that this report, together with the full history and examination of the physical condition, made possible a thorough understanding of the whole of the patient's personality and his illness.

Fraser was so pleased with this arrangement and the ease with which it worked that he has invited me to join him in the medical unit which he is to establish at the new Post-Graduate School at Hammersmith, where he commences on February 1st. This is the opportunity which I have been seeking because I feel sure that it is possible to demonstrate in this important centre the bearing which these factors have on the ordinary patients which are seen in the general wards of hospitals and in the general practice of every physician and surgeon.

It was this sort of thing that one attempted to

establish at Yale, and I learn that the system is working satisfactorily there. I understand that it will be copied in other centres in the United States. I would like to be able to give more time to such work, but of course there are no Foundations and no financial arrangements associated with the appointments at Cambridge or Middlesex, and so far there has not been any talk of a financial post at the Post-Graduate School. In fact, the routine psychiatry will be done by medical officers from the L.C.C. mental hospital service, including the Maudsley Hospital. My work with Fraser is entirely apart from this system. I understand that he wishes me to devote my attention particularly to the material in the wards of the hospital rather than conduct the usual type of psychiatric clinic in the out-patient department. The students visiting the hospital will already be interested in the ward material and will be shown the importance of the psychiatric aspects of various cases.

I will have to give attention to a consulting practice in London. This, of course, will take up a good deal of the time which I would like to devote to teaching work. If an arrangement were possible somewhat similar to that which has been entered into with Carmichael, I feel that it would be really worth while and would allow me to develop some definite teaching at the Post-Graduate School and at the Middlesex Hospital.

I am glad that you are interested in this matter and will be very pleased to have your opinion if you feel willing to give it.

With kind regards,

Yours sincerely,

Ralph A. Noble

Dr Alan Gregg,
The Rockefeller Foundation,
49, West 49th Street,
New York.

TEB

QER - 52m

I'll not answer this. It suggests
an answer but things have changed
so much with Noble there's no use
reopening a futile correspondence

At

100
Mental Health
note

HYGHEMAY

BOBID

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