troubles one is their apparent failure to recognize the relationship to human freedom of the thesis that everyone or that every criminal is "mentally ill." What troubles, also, is the apparent acceptance of the extremely broad meaning of "mental illness" propagated by psychiatrists whose philosophy is, quite consistently, the utter repudiation of freedom, responsibility, and other basic values of democratic society. It is hardly possible to avoid the conclusion that what is plainly needed is further study of this difficult problem by judges and practicing lawyers so that at least the cogent questions can be raised.

NATIONAL SEMINAR IS PROPOSED

Can anything be done to facilitate this and to assure a fair and informed hearing of these problem? Given competent guidance, it would be possible for an able lawyer or judge to acquire a significant degree of critical competence in this area in a year of carefully planned reading and bimonthly discussions. This could be done in seminars or roundtable discussions in which the M'Naghten adherents were given a role and an opportunity equal to that of the critics of the prevailing law. Newspaper reporting and other interference with dispassionate study and uninhibited discussion, such as stenographic or other recording, would be barred. Efforts should be made to avoid the connotations of "work"; instead everything should be done to make the study enjoyable. The company of the judges interested in this particular problem might be augmented by the admission of thoughtful laymen, legal philosophers, other scholars, and friends, so that a congenial atmosphere conducive to discussion prevailed.

The great books method of study depends on a discussion leader who carries the major burden, and it allows a larger number to participate than is possible in a seminar where each participant is expected to report in some detail on a particular problem. On the other hand, in a discussion group, one would participate only to the extent he desired. In a seminar which met bimonthly for 10 months, 20 participants would probably be the maximum number that could be accommodated.

Ten major phases of a basic problem, such as that noted above, could be studied, one each month, with two participants reporting each session, preferably on opposed sides. The other members would prepare for these meetings by reading from a carefully selected biblography in order to participate meaningfully in the discussion of their colleagues reports. Each participant would also be preparing his own report.

A small, able research staff would be a valuable adjunct to the seminar or discussion group. It might limit its function to reporting on specific questions; e.g., How man psychiatrists are there in this country? How many of them have critized the M'Naghten rules? What studies have been made to determine whether psychiatric testimony is at present restricted?

SOME SUBJECTS FOR DISCUSSION

The following program of a seminar or discussion group is suggested as illustrative. No preference is implied as to the order of studying the various problems and their formulation is not wholly neutral since my purpose is, also, to raise questions regarding current criticism of the M'Naghten rules.

1. What are the principal meanings of "disease"? Is mental illness like physical illness, or is it so different from it that even a very wide analogy is misleading?

2. What is "science"? Is there an intermediate type of knowledge between science, rigorously defined, and commonsense? Where should psychiatry be placed; e.g., what of statements by leading psychiatrists to the effect that psychiatry is an art? What evidence is there that psychiatrists (*a*) cure mental illness, (*b*) diagnose it correctly, (*c*) can recognize that persons who have not committed any harm are socially dangerous, and (*d*) can accurately predict that certain individuals will commit crimes if they are released from hospitals or penal institutions?

3. What is an expert; e.g., does that term imply that there is a body of knowledge with reference to which all or most "experts" agree? What is the basis of the position taken by some social scientists that psychiatry has not yet developed to the point where psychiatrists should be permitted to testify in court as experts? What are the principal types or schools of psychiatry, and what is the significance of divergent theories and divergent diagnoses? What does this imply regarding the common assumption that psychiatrists