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The first milestones in psychoeducational intervention in Spain: the Medical and Educational Psychology Laboratory of the National Patronage for the Handicapped

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ABSTRACT

Therapeutic psycho-educational intervention marks the start of an important aspect of the psycho-technical work in Spain and places particular emphasis on attention to children. This attention has fostered the creation of institutions such as the National Council for Deaf-Mutes, the Blind, and Mentally Handicapped people, proposed as a model for the joint work of professionals in the medical, educational, and psychological fields. This paper addresses the historical trajectory of the first years of the Council, focusing on its objectives and ideology and, more specifically, on the creation, in 1914, of the Medical and Educational Psychology Laboratory and the work carried out there by authors closely involved in pedagogy and child psychiatry, such as Rodríguez Lafora. This laboratory, in spite of its “short history”, stood out for its use of evaluation methods such as the biographical, medical and psychological record book, which allowed the diagnosis, subsequent treatment, and protection of the children in this institution and was the precedent for the current multidisciplinary evaluation in this field. Based on these aims, several publications and regulations have been analyzed from that time, showing the difficulties involved in performing this work, conditioned by the political momentum of the time and controversies related to special education. All these aspects allow us to confirm that this National Council for the Handicapped marked an important milestone in the practice of educational psychology in Spain.

Los primeros hitos en la intervención psicopedagógica en España: El Laboratorio Médico y de Psicología Pedagógica del Patronato Nacional de Anormales.

RESUMEN

La intervención psicopedagógica terapéutica supone el inicio de una importante vertiente del trabajo psicotécnico en España, destacando especialmente la atención al ámbito infantil, que propiciará la creación de instituciones como el Patronato Nacional de Anormales, que supondrá un referente para el trabajo conjunto de profesionales del ámbito médico, pedagógico y psicológico. Este trabajo analiza los primeros años del Patronato, centrándose en sus objetivos e ideario de funcionamiento y, especialmente en la creación en 1914 del Laboratorio Médico y de Psicología Pedagógica y en el trabajo que allí realizaron autores próximos a la psiquiatría infantil como Rodríguez Lafora y Achúcarro. Desde este laboratorio, en su breve historia, destacará por la propuesta de instrumentos de evaluación como la ficha biográfica, médica y psicológica, que permitirían el diagnóstico, tratamiento y tutelaje posterior de los menores en esta institución y que suponen un antecedente de la actual aproximación multidisciplinar en ese ámbito. Se han analizado diversas publicaciones y normativa de la época que nos desvelan las

dificultades con las que se desarrolló este proyecto, condicionado por el contexto político de la época y caracterizado por profundos desencuentros y controversias en materia de educación especial entre la perspectiva médica y psicopedagógica. Este análisis nos brinda evidencia de cómo el Laboratorio del Patronato Nacional de Anormales, a pesar de su corta historia, supuso un referente fundamental en el inicio de la práctica psicopedagógica en España.

Introduction

In the early 20th century, organisms in Spain such as the Spanish Society for Mental Hygiene increasingly demanded State intervention in the attention and care of mentally-impaired children, following the example of social assistance policies being put into practice in other places in Europe, such as Montessori in Italy, Decroly in Belgium, or Binet in France, among others. In that period, abnormality was included in the *1908 Regulation of the 1904 Childhood Protection Law* (Reglamento de 1908 de la Ley de 1904 de Protección a la Infancia) (Ruiz, 2005), at the same time that the study of abnormality began to be incorporated in official studies. Thus, in the year 1909, the course *Teaching the Abnormal* (Pedagogía de anormales) was incorporated into the official Pedagogy instruction of the Superior Teacher Training College of Madrid, and in Barcelona, child psychiatry chairs were created, such as the one in the Superior Teacher Training School in 1906, run by educational psychologist Augusto Vidal Pereira (Asín, 1997; Domenech, 1987). All of these circumstances reveal a growing interest in special education (Gutiérrez, 2009, Labrador, 2008).

At the same time, in other settings in Spain, different therapeutic proposals and initiatives were emerging, such as the creation of the *Institute for Professional Retraining of Disabled Workers* (Instituto de Reeducción de Inválidos del Trabajo), focused on rehabilitation and therapeutic guidance for injured and disabled workers (Carpintero, 2004; Monteagudo & Chisvert, 2007, 2012; Palacios, 1990). In sum, in Spain, the academic, political, and social context was ripe for initiating a project for attention to abnormal children. This project was definitively catalyzed by the administrative plans of the government of Segismundo Moret for obligatory schooling and scaled teaching, which would include, among other objectives, the creation of the *National Patronage for the Mentally Handicapped* (Patronato Nacional de Anormales). This Patronage would respond, in part, to a segregated interpretation of education: one for children considered normal and another for those labelled as deficient or mentally retarded (Molina & Gómez, 1992, Huertas, 1998a).

Studies in recent years have addressed the history of Special Education in Spain from different perspectives (Del Cura, 2008, 2012; Herráiz, 1995; Molina & Gómez, 1992; Vergara, 2002). Along these lines, the general objective of the present study is to analyze the effects of the creation in 1914 of the *Medical and Educational Psychology Laboratory* (Laboratorio Médico y de Psicología Pedagógica) within the Patronage on the history of Psychology and Special Education in Spain. Thus, we intend to analyze the specific contributions proposed from the Laboratory in relation to the concept of the abnormal child, as there was no consensual position among professionals and policymakers of the time. Therefore, the Patronage became the main scenario for open debate about the two ways of understanding childhood abnormality and its later attention and intervention: the medical perspective and the psychoeducational perspective. This situation would make the work of the Laboratory more difficult and, to a large degree, determine its development.

Our approach necessarily involves addressing the activity carried out by Rodríguez Lafora, who maintained a strong commitment to the study and intervention in the area of abnormality. His work in the Laboratory had a fundamental influence, in our opinion, on his most

important work: *Mentally abnormal children* (Los niños mentalmente anormales), published in 1917, as well as on the later creation of the *Carabanchel Pathological Medicine Institute* (Instituto Médico Patológico de Carabanchel) in 1925.

Therefore, through the analysis of primary documents and publications of the era, we try to describe both the new diagnostic proposals and multidisciplinary interventions in the approach to abnormality proposed from the laboratory, and the academic and personal circumstances and controversies that affected the work done there. All of this will help us to understand the reasons for its brief history, as well as the strong influence it had on the academic and scientific texts of those who worked there and on the general field of psychoeducational interventions in Spain.

The National Patronage for the Mentally Handicapped: Origin, Development, and First Regulation Controversies

At the beginning of the 20th century in Spain, we can only talk about attention to certain physical handicaps carried out from the *National Council for Deaf-mutes and the Blind* (Colegio Nacional de Sordomudos y Ciegos). Based on an initiative of the Matritense Economic Society, the Council had begun to care for deaf children in 1805 in order to offer these people initial instruction and prepare them for a profession. In 1842, the care was extended to blind children and became the joint consideration of the National Council for Deaf-mutes and the Blind, dependent on the Ministry of Public Works since 1852. A few years later, in 1857, when the Moyano Law was passed, the State was permanently obligated to educate handicapped people of all kinds in schools especially prepared for them (Burgos, 2005).

In the case of attention to mentally handicapped children, it was necessary to wait until the beginning of the 20th century to see the first advances made, when the National Council for Deaf-mutes, the Blind, and the Mentally Handicapped was created, thanks to Minister Barroso (Royal Decree of January 22nd 1910). Thus, to the base of the previously mentioned National Council for Deaf-mutes and the Blind, a third section was added, especially dedicated to intervention with children with mental handicaps. Some of the most important foundational objectives of the Patronage were to make visible both the social situation of mentally abnormal people and the viability of their recovery from a perspective of regeneration, which would strengthen the multidisciplinary collaboration in the attention to abnormality (Secretaría Ejecutiva del Real Patronato, 2001). Therefore, as the foundational Royal Decree stated, the Patronage arose as "(...) an advisory corporation, in charge of informing the recently created Ministry of Public Instruction about anything related to hygienic, educational, and social protection of people deprived of speech, sight, or the normal functioning of their mental faculties" (RD of January 22nd 1910, p. 44).

Thus, the Patronage included the lines of argumentation for attending to mentally abnormal children that began to take off in Europe –oriented toward social and school prevention and with a certain philanthropic nature– and where the intervention work by Decroly from the *École de l'Ermitage* in Brussels was especially relevant (Dubreucq, 1993).

With regard to the specific competences of the Patronage, some of the most important ones were: compiling statistics at the national level on deaf-mutes, the blind, and the mentally abnormal; the prophylactic and hygienic approach to muteness, blindness, and psychopathologies, as well as social tutelage; the organization of specialized teaching and the spread of this knowledge through courses, conferences, and the so-called *popular cards* or *booklets* (Cartillas populares).

Although the initial objectives of this recently established Patronage can be considered worthy, it should be pointed out that, guided mainly by a non-interventionist protective line, they hardly reached fruition (Herráiz, 1995). Thus, the first four years, from its foundation until the later regulatory changes –stemming from the Royal Decree of April 24th 1914, which reformed the Patronage–, were characterized by a profound practical ineffectiveness and continuous theoretical discussions (Rodríguez Lafora, 1916, April, 1917, January). The main focus of the theoretical discussions in the Patronage took place, precisely, in the recently-created third section, dedicated to attention to the mentally handicapped. The first board members were Manuel Bartolomé Cossío and other professors close to the field of pedagogy, such as Anselmo González, Francisco Pereira, or María Encarnación de la Rigada. Each of them had a different approach to the area of pedagogical intervention in the mentally handicapped that would lead them to defend differentiated and opposing positions.

Thus, Anselmo González, who in 1909 had obtained the Chair of Child Psychiatry from the Superior Teacher Training College of Madrid, began to prepare his work *Diagnosis of Abnormal Children* (Diagnóstico de Niños Anormales), in which he studied various methods for diagnosing abnormality. In addition, he made his position clear by considering psychometric procedures to be “sufficient and more efficacious than doctors for selecting and classifying less abnormal school children” (González, 1914, p. 8). Meanwhile, in 1907, Francisco Pereira founded a private institution located in Madrid and designed to provide attention to abnormal children: the *Educational-Medical Clinic* (Sanatorio Médico-Pedagógico), and he was also in charge of the journal *La Infancia Anormal* (Del Barrio, 2001). Finally, Encarnación de la Rigada was the owner-director of the newspaper *Gaceta de Instrucción Pública y Bellas Artes* and, as a board member of the Patronage, she would occupy the position of child protection advisor. Her interest in the topic of the mentally impaired is reflected in the publication in 1916 of *Paidotecnia especialmente en lo que se refiere a los niños anormales* (Child Psychiatry, especially concerning abnormal children) (De la Rigada, 1916).

In 1912, and coinciding with the first years of the Patronage's functioning, Gonzalo Rodríguez Lafora returned from his professional stay at the Washington Mental Hospital. Months later, he joined the Laboratory of Experimental Physiology of the Nervous System, directed by Ramón y Cajal in the Alfonso XIII National Hygiene Institute in Madrid. Already at that time, Rodríguez Lafora had extensive experience in the area of clinical psychiatry and child psychology, which would lead him to have a special interest in the Patronage, closely observing its functioning during the first years. A few years later, in 1917, in an article in the journal *España: Semanario de la vida nacional*, he made a statement about the work of these first Patronage board members, complaining, based on his criteria, about their lack of knowledge about the topic of abnormal people. Thus, he would mention Rigada, professor of the Teacher Training College, and professors Pereira and González, who, in his opinion,

“spent four years deliberating and discussing without doing anything. They were Miss La Rigada, professor of the Teacher Training College, who is practically and theoretically ignorant about the problem of abnormal people, although she thinks otherwise, Mr. Pereira, a teacher for many years and specialized in pedagogy for abnormal children, and Mr. González, doctor in Philosophy and theater critic, who

suddenly became a psychiatrist when they awarded him a chair in Psychiatry at the Superior Teacher Training College, which was later called “Pedagogy of the Mentally Abnormal” (Rodríguez Lafora, 1917b, January, p.12).

With this criticism, Lafora began a controversy in the press at the time about the functioning of the Patronage –which we will examine more in depth later – and that would extend until 1919. Lafora's publications in the journal *España: Semanario de la vida nacional* (under the penname of Simón González) alternated with articles by people close to Minister Burell, such as De la Rigada, in the *Gaceta de Instrucción Pública* and Anselmo González in *el Herald*, using the penname of Alejandro Miquis.

The Medical and Educational Psychology Laboratory of the National Patronage for the Handicapped (1914-1916): From Diagnosis to Treatment and Tutelage

Going back to the first year of the Patronage, with the application of the *Royal Decree of 1914*, dictated by the Minister of Public Instruction, Francisco Bergamín, a second stage began when certain changes occurred in the organization and functioning of the council. First, it received a new name and exclusive regulation as the *National Patronage for the Handicapped* (Patronato Nacional de Anormales). Abnormal children, based on this change, would include all children with psychic deficiencies, as well as deaf-mutes and the blind. From this point on, a taxonomy was also included that clearly specified who the *mentally abnormal* were, with the tutelage of the Patronage, by equating mental deficiency with abnormality and defining three types of subjects –mentally defective, imbeciles, and mentally weak–classified according to the degree of abnormality and the possibilities for education and social recovery. This taxonomy partly fulfilled certain demands from the medical sector about the responsibility doctors should have in managing abnormality (Del Cura, 2008).

It was also during this stage when a Patronage of a *Special School* was granted, and the bases were established for the future Medical and Educational Psychology Laboratory (hereinafter Laboratory). The Special School, which was located within the building of the school for deaf-mutes and the blind and became the *Central Institute for the education of abnormal children*, was only for educable mentally abnormal children. According to the official text, (RD of April 24th 1914, p 266), the mentally abnormal who were not educable and needed medical treatment should not be included in the public education system, but rather they should be sent to different types of asylums dependent on the *Beneficencia* (charity institution). These changes in the council's philosophy were supported by both the hygienist movement and the social reformism of the epoch, and by proposals and solutions that were being presented in Europe from various institutions in the area of special education (Huertas, 1998b). For example, we can mention experiences in this area in France, Italy, or Germany, highlighting contributions such as the *1905 Binet and Simon Metric Scale for the diagnosis and classification of the mentally abnormal*. Another reference would be the line of clinical work developed from the sections for abnormal people by Salpêtiere and Bicêtre. The educational perspective gained special strength in Italy, where Emilio Galli published his work on the psychoeducational exam of mental impairment, and Maria Montessori began her *Casa dei Bambini* in 1907, making the children the true protagonists in the educational process (Moreu & Bisquerra, 2002; Yaglis, 2005). The contributions from European pedagogy also included the work of Demoor, Decroly and Trüper, as well as the work developed by Claparède at the Juan Jacobo Rousseau Institute in Geneva. Finally, it is important to mention the Alois Alzheimer Laboratory in Munich, an international reference in psychiatry, and where Doctors Nicolas Achúcarro and Rodríguez Lafora went to complete their training in neuro-histopathology.

Different arguments were used to justify the change in orientation of the Patronage toward an *interventionist line*, introduced by the Royal Decree of 1914. The Ministry indicated that “given the different varieties of abnormal children, there is a need for a special pedagogy and, especially, medical treatment” (RD of April 24th 1914, p. 265). In this context, the organization of the Patronage considered it necessary to create the Laboratory, oriented toward the research, diagnosis, treatment, and prophylaxis of abnormality and “(...) to be able to carry out these activities, what was considered the Special

School for Deaf-mutes and the Blind became the Central Institute for the Handicapped, in charge of carrying out such a commendable mission.” (RD of April 24th 1914, p. 265).

This new proposal established priority objectives such as the need to perform a good *diagnosis* of the childhood abnormality, followed by an adequate *psychological-medical treatment* and later *post-school tutelage*. This clinical perspective of the Patronage would foster the incorporation of highly prestigious medical specialists in the area of the education and treatment of the mentally handicapped, including

Figure 1.

Admission file for the Central Institute for the Handicapped, the first page of the Biographical Record Book of the abnormal child (Rodríguez Lafora, 1917). See Spanish Language original in Annex 1.

ADMISSION FILE CENTRAL INSTITUTE FOR THE MENTALLY HANDICAPPED

Special School of

Exam date

I. GENERAL DATA

Name Age

Birthplace

Current residence School

Father, born in profession

Mother, born in profession

Family economic situation

II. PERSONAL AND FAMILY ANTECEDENTS

Inherited and congenital transmission

Kinship of parents

Endocrine disorders (I)

Psychosis, neurosis, and delinquency

Alcoholism

Other intoxications

Syphilis

Tuberculosis

Mother's miscarriages

Deceased children and from what?

Are the living children healthy?

Pregnancy and birth of the child

Trauma or disease during pregnancy

Forceps

Asphyxia of the newborn

Premature birth

Congenital syphilitic lesions

Development of the child

Growth

Walking

Eating alone

Getting dressed alone

Meningitis or encephalitis (at what age?)

Other childhood diseases

Intellectual development

Enuresis and night fear

Character of the child

Plays alone or with others?

Tortures animals?

Lies or steals?

Is shy or violent, obedient or unruly, apathetic or active?

Special interests

Suggestibility

Emotional lability

Sexual tendencies

Morality

Has periods when s/he is not her/his normal self?

Knows how to run errands?

Schooling:

Attendance

Takes advantage of it

Behavior

Fatigue

III. CURRENT STATE

Physical condition

Height Weight Cranial parameter

Thoracic perimeter..... Spirometry

Cephalometric

Atypical morphologies

Constitution

Circulatory and Respiratory Apparatus

Digestive apparatus

Endocrine glands

Nervous system and Mentality

Reflexes

Motility

Strength

Steps

Tactile sensitivity

Sight and hearing

Taste and smell

Sleep

Physiognomy

Language

Mime

Writing and drawing

Praxis

Attention

Perception and Recognition

Memory

Association of ideas

Orientation

Willingness

Judgment

Emotional state

Morality

Mental level

Summary

Treatment and Pedagogy

Date Examiner

Nicolás Achúcarro and Gonzalo Rodríguez Lafora. Their experience in laboratories and clinics in Germany, France, and the United States, as well as the new ideas they could contribute from the psychiatric and medical perspective of abnormality, influenced, without a doubt, Minister Bergamin's choice of these two doctors. Bergamin proposed that they be named secretary and vice-secretary of the Patronage, respectively, within the regulation on the functioning of the center, published in 1915 (Valenciano, 1977). In this stage (1914-1916), Álvaro López Núñez held the vice-presidency of the Patronage, and a permanent executive commission was created. Some of the members of this commission were the philosopher Juan Zaragüeta, the neurologist Miguel Gayarre, or the pedagogue Manuel Bartolomé Cossío (the latter resigned one year after his appointment), among others.

From the first moment, the particular stamp of Achúcarro and Rodríguez Lafora, Achúcarro's disciple at the time, was noted in the Patronage's activity. Thus, given their interest in child psychiatry, they enthusiastically took on the task of organizing the Laboratory within the Central Institute for the Handicapped. At the same time, they promoted the organization of a series of courses for specialists in order to improve the training of teachers in the Patronage. They also fostered the establishment of a library within the Institute, which López Núñez (1918, p 8) would describe when recalling the work of Achúcarro in the Patronage as "a huge pile of forgotten books in the National School of Deaf-mutes that was used by Achúcarro as the core for a modern library."

In summary, at the beginning of their management, both Lafora and Achúcarro worked to correct the educational, scientific, and administrative deficiencies present in previous stages of the National Council for Deaf-mutes and the Blind, implementing hygienic and pedagogical improvements and trying to initiate, from a multi-disciplinary and individualized perspective, the corresponding educational-medical treatment for the children (Del Cura, 2012). In performing this task, the first phase, the diagnosis, became the main tool to differentiate mentally abnormal children who could receive intervention from those who would be uneducable. To do so, it was necessary to establish the bases for the functioning of the Laboratory, where the tasks described by Lafora in 1917 in his paper *Mentally Abnormal Children* could be performed, among others.

Thus, the first step was to separate the blind, deaf-mutes, and mentally abnormal children. With the latter, depending on the degree of abnormality, the procedure would be different. In this case, it was fundamental to have the *Biographical record of the abnormal child* (Cartilla biográfica del niño anormal) from the beginning, in order to systematize the information and determine the type of abnormality: idiots, imbeciles, or the mentally weak, with the latter being suitable for psychoeducational intervention. Rodríguez Lafora made great effort in designing this record book, specifying all the information that should be included. The first part was the *admission*

file of the abnormal child, which would be the first page of the child's biographical record book (Figure 1).

Lafora clearly indicated what the purpose of this record should be: "(...) whose first part is composed of the admission file, and to it are added three pages with graphics about growth, weight, intellectual progress, and blank sheets so that the various teachers can write down their observations about the child and his/her special aptitudes. Finally, this will be the basic document to indicate the choice of profession or career for the student who leaves the Special School (Rodríguez Lafora, 1917, p.170).

Likewise, Rodríguez Lafora (1917) also described how to proceed in this diagnosis, insisting on the evaluation of the child suspected of mental abnormality through medical, psychological, and pedagogical examinations, in order to send him/her to special schools for the mentally abnormal.

These three exams constitute the main diagnostic approach. The *medical exam* would deal with the child's physical and mental examination, highlighting the study and diagnosis of hereditary or congenital diseases (for example, syphilis); the diagnosis of mental disorders that would complicate the child's intellectual deficiency (epilepsy, psychosis...etc.); the recognition of somatic alterations (auditory or visual impairment, rickets, etc.); the *neurological examination* (e.g., study of reflexes, motility, muscle tone, coordination, brain function, language, praxis, muscle strength, etc.); and, finally, the hearing and vision examination by specialists. The indication for treatment based on this exam would be hygienic, medical, and/or surgical. Based on the *pedagogical examination*, the child's progress in school would be addressed, relating it to certain parameters of normality based on intelligent children. Some of the tests that could be used would be the *Weygandt exam for school children from 7 to 13 years old*, the *Vaney exam for children from 6 to 12 years old*, and the *Binet exam for school children and the diagnosis of abnormal children*. Finally, the *psychological examination* would highlight interest in extra-curricular activities as a fundamental element for a broader and more practical assessment of the intellectual variables. In a first description of the psychological methods, Rodríguez Lafora (1917) referred to the tests, emphasizing their value. He began by considering tests that evaluated isolated intellectual capacities, in order to later administer scaled tests of the intellectual level, where the Binet-Simon Scale and other standardized instruments play a key role (Table 1 and Table 2).

One of the objectives of these psychological tests would be to detect false abnormality. Therefore, this would be a prototype of a psychological file, where the value of the intellectual variables is the key to the diagnosis. Thus, in Lafora's own words:

A series of psychological tests or items have been invented, which are universally known by their English name of tests (tests or items), (...). Tests are the most appropriate psychological methods to determine the intellectual level of the child. Along with technical or laboratory methods, they

Table 1.

Main assessment instruments suggested by the Central Institute for the Handicapped Laboratory to evaluate isolated intellectual capacities that should be included in the psychological file (Elaborated by the authors based on Rodríguez Lafora, 1917).

Variables	Tests
Attention	Bourdon, Reich, Kraepelin, Binet, and Binet (serious abnormalities) tests
Apprehension	Henneberg, Mac Dougall, Seguin-Goddard tests
Apperception and Perception	Heilbronner, Ebbinghaus, of games of patience (puzzles) tests
Association	Free association test, Sommer series, Ziehen series, Binet-Simon series, Kent Rosanoff series, restricted association, anti-ethical association, and others.
Memory	Mechanical memory tests: Ziehen, Berstein, Binet-Simon.
Suggestibility	Logical memory tests: Narrations test
Intelligence or Thinking capacity	Suggestion of size and weight, of weights and progressive lines Test by Ziehen, Masselon, Meumann, Dearborn, Ebbinghaus, Binet, Ganter, of mazes

Table 2.

Main assessment instruments suggested by the Central Institute for the Handicapped Laboratory for scaled tests of intellectual level and systematized methods that should be included in the psychological file (Elaborated by the authors based on Rodríguez Lafora, 1917).

Scaled tests of intellectual level	Systematized psychological methods
Sante de Sanctis Method	Rossolimo psychic profile method and modification by Vermeylen
Weygandt Method	Rorschach Psycho-diagnosis
Binet-Simon Method	Personality characterological diagnostic methods
Yerkes-Bridges Method	Healy-Fernald method for delinquent children
Terman Method	Moers method for ethical judgment
Porteus Method	

are the main psychological extrospective and objective means we have for this examination (...). Series of tests have also been used as a guide to choose professions or vocations (...). Of all of these social functions stemming from the application of psychological methods to the examination of intelligence, none of them interests us as much as the determination of the intellectual level (...). (Rodríguez Lafora, 1917, pp. 175-177).

In that stage, work was carried out to determine which evaluation instruments would be the most appropriate for the diagnosis. However, as we mentioned above, the executive commission of the Central Institute for the Handicapped, which included Achúcarro and Lafora, also questioned the training of the teaching staff who were in charge of the children. Until that time, the special training the teachers received was based on the course of Methods and Procedures in the Teacher Training College. Achúcarro, aware of the limitations of this training, inaugurated a pedagogical seminar in the 1915 to 1916 academic year. This course was supposed to deal mainly with the diagnosis and teaching of the mentally handicapped, and it was announced in the press in the publication *La Gaceta de Madrid*. This course included, among others, the following subjects: anatomy and physiology of the brain; exploration and diagnosis of abnormal children; psychiatry; pathological psychology; childhood criminology; speaking disturbances and their treatment; special education with synchronized gymnastics practice; educational games; and manual work. During the scant three months that this seminar lasted, Achúcarro taught the most complex lessons about child psychiatry. In addition, Lafora mainly worked with topics related to the diagnosis of abnormality. It should be noted here that among all the subjects designed and taught in this Seminar, in later years only the subjects of Methods and Procedures and Teaching the Abnormal would be recovered in teacher training programs in the Superior Teacher Training College.

In another vein, among the approaches that the *treatment of abnormality* had to include, the medical, psychoeducational, and mixed approaches were clearly important. For this reason, the actions of the Institute were directed toward: establishing differentiated classes for the mentally abnormal, speech impaired, invalids, or disabled; taking responsibility for the medical treatment of the child belonging to any of these groups; with charity organizations, managing the establishment of asylums for abnormal children incapable of learning an activity and in need of medical and psychotherapeutic treatment; in the case of educable abnormal children, taking responsibility for their technical and professional education according to their aptitudes and inclinations, as well as the organization of institutions with agricultural, industrial, or artistic education; finally, through educational and medical practices, training the personnel responsible for these functions (Herráiz, 1995). Regarding the last stage of the intervention, the *Post-school tutelage*, various objectives were proposed, from fostering the creation of workshops and colonies for abnormal people incapable of working independently to seeking relationships with charity associations that would help to find work

for abnormal people capable of independent activity and organizing family tutelage for the handicapped.

In sum, this was the plan developed for what was probably the most promising stage of this special attention to the mentally handicapped. During the 1915-1916 academic year, two classes were created for mental deficiencies under the direction of Jacobo Orellana—who had already published some work on mental retardation—and Micaela Díaz Rabaneda, a teacher who had attended the courses from the educational seminar taught by Lafora and Achúcarro (Rodríguez Lafora, 1917, January p. 12). Moreover, we can mention the detailed organization of the classes for that course in 1915, which Lafora described some time later:

During the 1915 to 1916 course in the Central Institute for the Handicapped in Madrid, professor Orellana followed this schedule in his classes with children,...from nine to twelve in the morning and three to five in the afternoon. Contemplating the planned breaks, the following classes were taught: mathematics, oral and written language, songs, synchronized gymnastics, lessons about things accompanied by games, mental orthopedics and practical life exercises, supervised free play, lunch and rest, drawing, manual work, agricultural and gardening exercises, and finally, the inclusion of educational instructional games such as the frames by Montessori or the educational Shop by Frenzel (Rodríguez Lafora, 1917a, pp. 486-487).

Controversies and end of the Laboratory

In 1916, the liberal government of the Conde de Romanones began, which would bring new changes to the Patronage. We can highlight the naming of Minister Burell, a controversial figure who would take over the management of the Patronage. Burell first dictated the Royal Decree of March 10th 1916 for the reorganization of the institution, which would again be called National Patronage for Deaf-mutes, the Blind, and the Mentally Handicapped. This change meant that independent sections were again created for deaf-mutes, the blind, and the mentally abnormal, thus producing significant cuts in the mentally abnormal section.

This decree led to governmental and administrative guidelines for the National Councils for Deaf-mutes, the Blind, and the Mentally Handicapped, and it transformed the Central Institute for the Mentally Abnormal into a National Institute (RD of March 10th 1916, p. 184). What was now called the National Institute for the Handicapped proposed the possibility of continuing with the Pedagogical Seminar and creating the first Primary Schools for the Mentally Abnormal in Spain. However, these proposals did not become reality, and, in practice, the Institute became more administrative than operative. Other relevant events were the suppression of the budget for the abnormal for the 1917 course, as well as changes in the center's personnel. First, in autumn of 1916, Lafora and Achúcarro were

removed from their posts as secretary and vice-secretary, although they would continue to be members during the last few months of that year. Minister Burell drew on an existing normative regulation –according to which the technical secretary of the Patronage should be a teacher –, to remove Achúcarro and, thus, lead to the early exit of Lafora (Moya, 1986).

In the same way, there was a veto of Jacobo Orellana, a pedagogue who had been responsible for the class for the mentally abnormal in previous courses. In time, there were new assignments made in the Institute, such as the neurologist Enrique Fernández Sanz and the osteopath Doctor Decref, in an attempt, as Lafora would later state, to quiet the protests of the medical collective after the removal of Lafora and Achúcarro (Rodríguez Lafora 1917, April).

Of all of these changes, the most controversial would be the suspension of classes for the mentally abnormal foreseen for 1917 and the destination of the budget to the reorganization of the School for Deaf-mutes and the Blind. In addition, the new attributions granted to Encarnación de la Rigada and the naming of Anselmo González as director of the School for Deaf-mutes produced the angry reaction of Rodríguez Lafora and other previous members of the Patronage. From that moment on, different publications would publish articles in the news media in favor of or against the management of the Patronage. In *España: Semanario de la vida nacional*, Lafora initiated his *Never-ending series*, a collection of various articles in which he criticized the functioning of the council and Burell's decisions. These articles, written between 1916 and 1919, began with the 1916 article "*The reaction and Public Instruction*", and it ended with a final article in 1919 about the administration of the Patronage "*Serious scandal in the National Council for Deaf-mutes and the Blind*" (Rodríguez Lafora, 1916, Abril; Rodríguez Lafora, 1919, June).

By contrast, Burell's management was supported in the articles by Anselmo González, in *el Heraldo* and also through the strict control by Rigada of the publications of *la Gaceta*, of which she was the director (González, 1918; Rodríguez Lafora 1917, March; 1917, April; 1919, June). Thus, it seems appropriate to state that the brief history of the Laboratory was largely determined by the personal disputes between Lafora and González, the controversial management by Burell, and the power struggles between teachers and medical professionals.

With all of this, to better understand the antagonism between Lafora and González, it is important to recall the –unusual– awarding to González of the Child Psychiatry Chair in 1909, a position that Achúcarro also opted for until it was vetoed for medicals. This was only the beginning of a series of disagreements they had about the different ways of interpreting the topic of abnormality from opposing medical and pedagogical positions. Years later, after the publication in 1914 of the work by González, *Diagnosis of Abnormal Children* (González, 1914), Lafora published a sharp criticism of the book, where he made clear that the author was not familiar with a large part of the psychological and psychiatric research on the topic of abnormality, and that he only mentioned some exploratory methods (Rodríguez Lafora, 1915, August). Later, the previously described exchange of criticisms between the two authors took place in the news medium closest to each–González in *el Heraldo* and Lafora in *España: Semanario de la vida nacional* – with regard to the management of the Patronage. Thus, Lafora criticized the internal functioning of the Patronage, specifically the excessive responsibility of Professor Rigada and Anselmo González, along with their high salaries, which contrasted with what he saw as their neglect toward the suffering of the abnormal children and the staff of the center. Specifically, he mentioned the management's non-renovation of the personnel in the Institute Laboratory and the removal of Rodríguez Lafora and Nicolas Achúcarro from their positions (Rodríguez Lafora, 1917, April, p 15). Anselmo González, meanwhile, defended himself from these accusations and the reference to his lack of preparation in a later article in *el Heraldo* (González, 1918, p.3). In 1919, June, Lafora

again attacked González in the article *Serious Scandal against the administrator of the National Council of Deaf-mutes*, where he lamented the end of the National Institute for the Mentally Handicapped at the hand of the "theatrical Mr. Miquis", Anselmo González, who had even provoked an uprising of the children and teachers he was in charge of in the National School for Deaf-mutes (Rodríguez Lafora 1919, June, p 12). Much later, in 1935, with the second edition of his work *Diagnosis of Abnormal Children*, González took the opportunity to respond to Lafora's earlier criticism of the first edition and distance himself from Lafora's *Mentally Abnormal Children* (González, 1935). It is obvious that beyond the personal and professional conflict, each of these two authors tried to claim the area of intervention on abnormal children for himself and, thus, achieve legitimacy in the eyes of the various groups interested in the topic, from the society, the administration, or the families.

With Burrell's Royal Decree of March 10th 1916, the Patronage Laboratory stopped functioning. Only one year later, in 1917, Lafora published his referential work *Mentally Abnormal Children*, the main testimony to the large amount of work he tried to carry out from this Laboratory. The repercussions of this publication were so great that its first edition received the National Academy of Medicine award for the best publication in the field. That same year, in April 1917, Minister Burell was removed from his position. He left without creating the schools for the mentally handicapped, which were included in his project, and he left behind a controversial management of the Patronage and the disappearance of the Laboratory.

Later development of the Patronage and the slow advances in psychoeducational intervention in Spain

In the 1920s, there was still an ambiguous attitude in Spain about the approach to the mentally abnormal. On the one hand, there was the influence of the medical model; on the other, scant results had been obtained by the institutions that tried to achieve the schooling of the handicapped. Finally, segregationist attitudes were still firmly rooted in the society, even though, as González (2009) emphasized, the therapeutic practices of Montessori, Decroly, Binet and Lafora began to introduce new instructional models for the mentally handicapped. Among the changes that occurred during those years, some of the most important were the 1922 regulation on special primary schools, a new reorganization of the Patronage in 1924 –exclusively granting it a marked supervisory nature– and the beginning of the *Central School for the Mentally Handicapped*. According to Juarros (1925), the creation of this School produced a thread of hope in the attempt to consolidate the education of the mentally handicapped in Spain. It is also worth highlighting the work of its director, María Soriano, who again leaned towards a multidisciplinary perspective and recovered the training of specialists along the thematic lines that Lafora and Achúcarro had initiated years before in the Pedagogical Seminar (Cabada, 1992). However, the management would continue to be exclusively represented by doctors and teachers, in a commission composed, as Molina (2009) describes, by two tenured doctors and the most experienced teacher, who would be in charge of the direction and also perform therapeutic guidance tasks. Starting in the 1930s, the students were grouped in three sections: handicapped people with an abnormality that is (1) mainly physical, (2) intellectual, and (3) moral. With regard to the work method, the biographical file proposed by Lafora was recovered as the first step in the evaluation. Once completed, the doctor and teacher proceeded to administer specific tests such as the *Vermeylen psychographic method*, the *Terman psychological exam*, the *neurological exam*, and a complementary observation. They also put into effect the therapeutic and pedagogical plan, individualized and adapted to the student's specific needs. Therefore, in this subsequent stage, close collaboration between

doctors and teachers became the basis for the therapeutic attention.

While all these initiatives were occurring, the progress of the Patronage continued to be marked by successive regulations, such as the Royal Decree of 1934, which led to a new reorganization where attention to the handicapped was also included, falling under the title of the *National Patronage of the Handicapped Culture*. In this way, the Royal Decree of 1934 marked the two main references to be followed in the future psycho-technical and pedagogical practice in Spain: the attention to childhood abnormality and attention to the disability of the adult worker. Although this review does not extend beyond this period, we would mention that a Royal Decree of 1938 permanently separated the *Spanish National Organization for Blind People* (Organización Nacional de Ciegos Españoles, ONCE), and other Royal Decree of 1955 separated the *National Institute for Deaf-mutes* (Instituto Nacional de Sordomudos, INSOR), and, finally, a Royal Decree of 1976 created the *Royal Patronage for Special Education* (Real Patronato para la Educación Especial), currently for the Handicapped (Executive Secretary of the Royal Patronage, 2001).

Conclusions: The legacy of the Laboratory of the Patronage for the Handicapped to therapy for children in Spain

It is well-known that general and experimental psychology reached Spain hand in hand with psycho-technology. For this reason, the Madrid school strongly emphasized figures such as Simarro and Ramón y Cajal, until the arrival of Lafora, who would foster the introduction of the new European practices in the area of childhood therapeutic intervention in Spain. His work in the Medical and Educational Psychology Laboratory of the Patronage strongly contributed to this, and the results were reflected in one of his most important works, *Mentally Abnormal Children*, published in 1917. Although this laboratory was active for a short time (1914-1916), a large amount of work was carried out there in this period. Among the main contributions arising from these efforts, we can highlight the creation of a novel system of multidisciplinary evaluation –medical, pedagogical, and psychological– using files, as well as the adaptation of a series of medical, pedagogical, and psychological tests for the diagnosis and treatment of abnormality. Some of the most important psychological tests adapted were the *apperception tests*, used by the German psychology of Heilbroner, the *logical memory tests* or *puzzles*, and, especially, the adaptation of the Binet-Simon, which had among its objectives the detection of cases of false abnormality. The use of practical intelligence rating tests was also fostered, such as *Frenzel's pedagogical shop*, which would form part of the educational instructional games developed in classes during those years in special schools. Another important legacy was the joint work displayed by Lafora and Achúcarro in training specialists through their pioneering *Pedagogical Seminar* in 1915. This seminar dealt with all the relevant topics of the time with regard to the diagnosis and treatment of abnormality, and it demonstrated, to a certain degree, the concern about teacher training and the good relationships with at least some of the professionals in the field, such as the pedagogue Jacobo Orellana.

The history of the laboratory was short, due to the difficult conjunction between legislators' guidelines in matters of education and clinical psychiatry, proposals for change made by professionals in the area of abnormality, and real practice in the institutions. This impression was mentioned by Lafora in the prologue to his work *Mentally Abnormal Children*:

In conclusion, we vow to make the teaching of the abnormal in Spain, which emerged recently thanks to the efforts of ex-Minister Bergamín and has been neglected and defamed by the disastrous action of another later Minister and his followers, again recover its progressive impulse, free of the bureaucratic ambitions of those who denigrate and demoralize (Rodríguez

Lafora, 1917, p.1)

In spite of the difficulties, controversies, and disagreements – such as those involving Rodríguez Lafora and Anselmo González due to their different ways of approaching abnormality, and as an example of the educational-medical confrontation that has defined Special Education for much of its history–, the Medical and Educational Psychology Laboratory of the National Patronage for the Handicapped represented one of the first firm commitments to childhood therapeutic intervention in abnormality from a medical, psychological, and pedagogical perspective in Spain. All of this occurred in a decade of openness, close to the 1920s and the later Republican reorganization, which would again foster interest in special education in Spain, providing institutional support for projects such as the Central School for the Handicapped, which from 1928 on would be called the National School for the Handicapped.

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Annex 1

Figure 2:
Original Spanish Language Admission file for the Central Institute for the Handicapped, the first page of the Biographical Record Book of the abnormal child (Rodríguez Lafora, 1917).

FICHA DE ADMISIÓN INSTITUTO CENTRAL ANORMALES <i>Escuela especial de</i> <i>Fecha de examen</i> I. DATOS GENERALES. Nombre Edad Pueblo de su nacimiento Residencia actual. Escuela Padre, nacido en .. Profesión .. Madre nacida en .. Profesión Condi~iones económicas de la familia II. ANTECEDENTES FAMILIARES Y PERSONALES. <i>Herencia y transmisión congénita:</i> Parentesco de los padres Trastornos endocrinos (I) Psicosis, neurosis y delincuencia Alcoholismo Otras intoxicaciones Sífilis Tuberculosis Abortos en la madre Hijos muertos y de qué ¿Están sanos los que viven? <i>Embarazo y parto del n-iño:</i> Traumatismos o enfermedades durante la gestación Forceps Asfixia del recién nacido Parto prematuro Lesiones sifiliticas congénitas Desarrollo del niño: Crecimiento Epoca de andar Idem de hablar Idem de comer solo Idem de vestirse solo Meningitis o encefalitis (a qué edad) Otras enfermedades infantiles Desarrollo inteledual Eneuresis y pavor nocturno Carácter del niño: ¿Juega solo o con otros? ¿Martiriza a los animales? ¿Miente o roba? ¿Es tímido o violento, obediente o discolo, apático o activo? Aficiones especiales Sugestionabilidad Emocionabilidad Tendencias sexuales Moralidad Si tiene periodos en que no es como de ordinario Si sabe hacer encargos		Escolaridad: Asistencia Aprovechatniento Conducta Fatiga III. ESTADO ACTUAL. Condiciones físicas: Talla Peso Perimetro craneal Perimetro torácico Espirometria Cefalometria Atipias morfológicas Constitución Aparatos circulatorio y respiratorio Aparato digestivo Glándulas endocrinas Sistema nervioso y mentalidad: Reflejos Motilidad Fuerza Paso Sensibilidad táctil Vista y oido Gusto y olfato Sueño Fisonomia Lenguaje Mímica Escritura y dibujo Praxias Atención Percepción y reconocimiento Memoria Asociación de ideas Orientación Voluntad Juicio Estado emocional Moralidad Nivel mental Resumen Tratamiento y Pedagogia Fecha Examinador
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