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THE LABORATORY IN THE STUDY AND TREATMENT OF CRIME¹

V. V. ANDERSON.²

Many factors are combining to bring about a changing attitude towards certain social problems, particularly crime. Possibly the frequency of recidivism has had much to do with it. Certainly there has arisen in the minds of many serious thinkers a suspicion as to the adequacy of present methods of handling offenders. Possibly the growing unrest of the age, the increasing desire for greater efficiency, lies at the bottom of it all. However, this we know, that lessons already learned by workers in other fields have served to cause earnest students of crime to stop and to consider whether, after all, the old and beaten paths are the best.

Certain fields of human knowledge have made immense strides; notably modern medicine. There has been a complete change of front on the part of this science; the inclination to treat symptoms has given way to a tendency to search out the cause or causes, with a view to as complete eradication as possible. That tendency to treat symptoms without any real knowledge of the underlying causes, which was such a serious element of failure in the treatment of physical ailments by the medical profession, has given way to a recognition of the positive necessity of sound laboratory methods, and a willingness to base treatment on laboratory findings and research work, resulting in a far more rational basis of combating human ills.

This tendency to base treatment on a knowledge of the underlying causes promises in the treatment of crime, to bring about an evolution similar to that which has been accomplished in the treatment of disease. Society realizes more and more the positive necessity of studying the criminal as well as the crime. More and more are judges recognizing that there are considerations other than legal, and of as great importance, in handling offenders. One often hears the question asked,—What are the causative factors in this particular case? What does the particular individual need? How best can society be protected and the offender reformed? One notices a growing tendency among criminal jurists towards individualization, and a handling of offenders *in the light of what they are*, rather than what they have done. There is a feeling that what we recognize as crime may more often be treated pathologically than morally; as it is clearly more often the result of irresistible physical forces than the deliberately chosen end of voluntary moral action. There is a feeling that a large group of individuals, abnormal in mind and body, in whom there is a serious question as to whether they really know the nature and quality of the act which they have committed and for which they have been arraigned, demand in the name of common justice that a scientific estimate of their capacity, for what judges have been in the habit of calling “free moral action,”

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be made. This is a crucial question, a question that Judges feel should be answered by the trained scientific observer, and in many instances only after prolonged and patient investigation.

This tendency suggests the establishment of laboratories and a corps of specially trained experts in our courts. Just this has been advised by Committee A of the Institute of Criminal Law and Criminology. The report of this committee contemplated the establishment of such criminalological laboratories in the Municipal Courts of our larger cities, that were to furnish "such a diagnosis of the criminal from psychological, neurological and sociological points of view, as might be of immediate practical aid to the judge who must sentence the defendant before the bar. It should furnish him with exhaustive knowledge of the individual case, in order that through his sentence he may adequately protect society, while doing the best that is possible for the prisoner as an individual." In general, the data supplied to the court by the laboratory will assist the judge in determining how he may best perform his protective service to society.

The research side of this work should not be lost sight of. It was the purpose of the committee "that the laboratory serve to collect a body of anthropological, psychological, neurological and sociological data concerning criminals that will ultimately be of great scientific value."

This contemplates a forward step in socializing our courts, and means that the absurdity of interpreting as crime the reactions of the countless thousands of mentally weak of varying degrees of abnormality, who are incapable of understanding and measuring up to the dictum of society, will give way to an appreciation of the underlying causative factors in their conduct and a realization of the mental deficiency or other disorder that often exists; that the imbecile, or feeble-minded man (man in physical years, but boy in mental capacity), is unable to understand his obligations to society and will naturally fail to obey its mandates; that sentencing him to a penal institution for a short term of punishment presupposes that he exercises a free will in the line of evil—a thing quite impossible—and fails in any sense to meet the situation; he is soon returned to society unmodified and after a short term of freedom he is again found in the courts, and again sentenced. This useless process is kept up over and over again. The pity of it all is that in the meantime he is liable to have become a hopeless pervert; all possible chance for improvement in the proper type of custodial institution, all possible chance for habit formation through industrial education, and for character building, has been lost.

After the report of Committee A had been made a certain development along these lines began to take shape in Boston. Mr. Albert J. Sargent, the Chief of the Probation Department of the Municipal Courts, who had long felt the need of just such a laboratory in the courts, began to interest himself in the matter, with the result that soon the Chief Justice, Hon. Wilfred Bolster, after carefully considering the question submitted it to the judges, and in September of

last year the work in which we are now engaged was initiated, in connection with the Probation Department.

From the first we recognized the impossibility of examining anything like the number of individuals daily passing through the courts who needed a careful mental and physical examination before their cases could be properly disposed of. So instead of taking the initiative, and picking out our cases, we decided to have the judges and probation officers do this and have them send us what they considered their serious problems. This course we have continued to pursue. We quickly saw our good fortune in being in a court where there was a corps of very efficient probation officers,—men and women whose thorough manner of handling their problems was most pleasing to us. Their keen insight had already prepared the way for our work, and they welcomed us with an eager co-operation. Looking back over the year's work one can but feel deeply grateful for their kindly interest and most intelligent assistance. Most of all we thank their Chief, Mr. Albert J. Sargent. His thoroughly constructive attitude has been to us the most hopeful part of the entire situation.

Naturally, our first concern was the tools with which we had to work and the methods of getting at our problems. The recognition of the insane and the feeble-minded furnished no great difficulty, but the great borderline field lying between needed the development of accurate methods for investigation. On the one hand we had the unstandardized methods of the neurologist and the usual diagnostic measures of the psychiatrist. On the other hand the psychological laboratory offered us methods of experimental study by means of which the individual differences of men could be tested in a manner far beyond anything which common sense and social experience could suggest. That same accuracy shown by the physiologist in his investigation of bodily processes was to be found in the psychological laboratories in studying mental processes, but no coordinated system of tests for the adult individual were at hand,—nothing that could be lifted out bodily and be made to do the service we required for the study of criminals.

Healy had already evolved practical methods for estimating certain abilities of juvenile delinquents. We had been using these tests since the opening of the Psychopathic Hospital in Boston in the investigation of all the borderline cases sent to the hospital, including Juvenile Court cases, Industrial School girls, delinquents referred by various social agencies, backward children from the schools and others, with more satisfying results than could be obtained from any other methods. In approaching adult criminals, however, many difficulties were at once apparent that forced upon us the conviction that we must develop our own methods for studying these individuals. The Binet-Simon Tests we hardly thought of seriously in connection with our work, because we realized, after using them for several years, that they were quite inadequate for the purposes for which we are now called upon to use tests. Intended, as they are, by their authors for the classification of school children, they are not adequate to

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measure the degree of development of the mental processes of adult individuals. We are here dealing with such a complexity of factors, that, as our experience had long ago taught us, we would get an intellectual level in no sense representative of the true one if we relied upon the use of these tests.

The innumerable alcoholics would too often appear feeble-minded, for it is startling how many come between 8 and 12 years by the Binet scale, but for occasional intellectual flashes that are, in many cases, beyond the standard to which the feeble-minded could aspire. They indicate a maturity of mind often quite in keeping with their class in life. Their low level is explained by a mental deterioration, an insidious impairment of all the senses, and a degeneration of the more complex mental functions, due to alcohol.

Other "derelicts" almost invariably show a lower level than their original status because of a deterioration due to their manner of living: to discouragement, depression, and other factors. They are unable to respond to the Binet test in a satisfactory manner and are included amongst the feeble-minded. But this is a serious matter for it means all the difference in the world in our outlook on the general social situation. If their deficiency is native, then the steps to be taken along the lines of prevention are quite different from those to be taken if it is acquired.

Our first step in Boston, therefore, was to standardize for our use certain methods of the neurologist and psychiatrist, but our principal task was the development of mental tests for adults.

It seemed to serve our purpose best to use the scale method, and in this we sought not only a quantitative estimate of mental processes but a qualitative one as well. That mental tests serve their best purpose in enabling us to watch the mind in action, has always seemed to me of greater importance than their service as measuring rods. The scale consists of twenty points, and allows a credit of 100. The tests selected were considered best suited to bring into play those mental functions that characterize the adult. These tests are being given in connection with the Binet tests on every case, and we hope to make some comparative studies along these lines that will be of value.

In addition to a measurement of the mental capacity there must be an estimate of his traits of character; a study of his personality. It was quite evident that the qualities here involved were not capable of direct experimental measurement, so that the only approach to the quantitative character that science demands consisted in an evaluation of comparative judgments about them. In this way have we sought to develop methods that would give us an estimation of our individual's ethical relations and enable us to examine into those qualities which constitute his value in relation to his fellows.

It has seemed to us distinctly worth while to arrange a chart for the recording of certain anthropological, psychological, neurological and sociological data, which when collected on a sufficient number of individuals may lead to a better understanding of the crime problem.

This we have done, after much time-consuming labor, so that now at the end of a year we feel that we are just beginning to get ready for our real work. In the meantime, we have all the while been doing plenty of clinical work, the courts being full of the richest material for investigation and study.

In a paper of this type it is impossible to go into many details showing the results of the changing attitude from punishment to treatment, to which we referred above, but a few illustrative cases may be worth while.

The following case belongs to a type that for the purpose of prevention should be got hold of early.

E. W., age 20, arrested for larceny. Owing to persistent and uncontrollable crying the judge at the suggestion of the probation officer sent her to us for an examination. We found a well nourished young girl with physical examination negative except for choreiform movements. Mental examination, however, showed defect in memory, impairment in fund of general knowledge, some hallucinations, hypnagogic in character. She was greatly depressed, cried bitterly, was unwilling to talk much, wanted to get by herself. Such a mental condition had been quite marked for the last month, the change taking place at the time of having trouble with a sister, since which time she had been greatly depressed, crying considerably. She had noticed a distinct change in herself, and often felt like committing suicide. The Judge very readily accepted the idea of treatment in the place of punishment, and we sent her to the Psychopathic Hospital, where the diagnosis of dementia praecox was confirmed, and the girl detained for observation and treatment. Her condition gradually began to clear up and finally she was tried out on a visit home. She began slowly to adjust herself to conditions, went back to work, is now in good health, earning good wages, and doing nicely. The fact is, the girl was not responsible for the crime she committed and had she been confined in a penal institution would have doubtless deteriorated and soon have become an advanced case of dementia praecox. She represents a group of cases that we are finding it quite important to get at in the earliest beginnings of their mental trouble if by proper preventive measures we are to ward off an oncoming dementia.

Another type is represented by E. C., age 27, street car motorman, arrested for larceny. The Judge not feeling satisfied with answers he gave as to the motives of his conduct, sent him to us for investigation. He not only had committed larceny, but such accidents as driving his car into other cars repeatedly and imperilling passengers were attributed to him. Physical examination showed neurological signs suggestive of general paresis. Mentally he showed the classical picture of general paresis. The question of his mental soundness was placed before the Judge, who readily substituted for the idea

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of punishment that of treatment. He was sent to the Psychopathic Hospital with the provisional diagnosis of general paresis. At the hospital the Wasserman was found positive for both blood and spinal fluid, and from there he was committed to Taunton. We have had several individuals of this type, men charged with forgery, with assault and battery, with larceny, etc., whom it is quite important for society to get hold of for proper detention and treatment rather than a few week's punishment, not only for their own good but especially for society's protection.

Of course there is a lot of substandard, inferior and defective individuals needing a special type of treatment, rather than the ordinary routine probation and short term prison sentence. There are some who make good first impressions, appear superficially bright, are glib talkers, and deceive even the elect, whom mental examinations show to be of low grade intelligence and quite incapable of conducting themselves properly in a normal environment; and then on the other hand there are many who appear much worse than they really are, who give the impression from personal appearance of being feebleminded, but who as a result of mental examination show surprising mental capacity.

W. P., age 30, was of this latter type. Arrested repeatedly and given various terms of penal treatment, he was brought into court the time we saw him for drunkenness and lewd and lascivious cohabitation. Various court and jail officials knew him and spoke to us of his being an imbecile. Physical examination showed results in facial muscles of a paralytic condition in childhood; considerable ptosis of upper eyelids, relaxation of lower jaw and drooping of mouth; in fact, he did have the general appearance of an imbecile. Mental examination however, was surprising, for he had good mental capacity. We found his mother was of low grade morally. They lived in a vicious environment, and influences in general were bad. The court saw fit, as a result of our report, to put him on probation. The probation department secured him employment, and he was sent to the country on a chicken farm. He persisted in coming down to see me every week, and now after a year has a good position with a store in Boston, making \$10.00 to \$15.00 a week. He moved with his mother to a better neighborhood, and has had no return to his old bad habits.

One could go on multiplying instances of different types and merely be elaborating what is obvious, that there are a lot of deteriorating individuals in the courts; men and women, who have lost something they once possessed, or who never possessed very much; who in the past have been considered confirmed criminals, but who today are not to be looked upon as hopeless incurables who need permanent segregation, until society has definitely failed in the more constructive measures of physical, mental and intensively directed social treatment.

V. V. ANDERSON

A general picture of the situation as regards the most serious problems in the court may be obtained from the following table which consists of a report of the diagnosis of my last 350 cases:

Mental Defectives	31 1-7 per cent
Dementia Praecox	3 5-7 per cent
Constitutional Psychopaths	24 2-7 per cent
Sub Normal	20 2-7 per cent
Hysteria	0.8 per cent
Psychasthenia	0.2 per cent
Epilepsy	3 5-7 per cent
Alcoholic Hallucinosis	0.6 per cent
General Paresis	1 3-7 per cent
Cerebro Spinal Syphilis.....	0.6 per cent
Senile Dementia	1 5-7 per cent
Unclassified Psychoses	3 1-7 per cent
Manic Depressive Insanity.....	0.8 per cent
Normal	7 3-7 per cent

Here we have a reasonably larger group of defectives, individuals who started life with the handicap of retarded mental development. But the greater proportion are deteriorating cases, individuals showing evidence of an acquired condition rather than native.

To be sure the constitutional psychopath has a poor soil to begin with; his nervous system is unstable, easily upset and less resistant to the battles of life than the normal, but the deterioration in these cases was in the majority of instances preventable. Sufficient facts are at hand to indicate that certain educational measures, physical treatment, and training in early life can go far towards preventing their becoming stranded later on.

There is a great horde of school children who are not up to par in their mental organization who when subjected to the vicissitudes of life as adults are especially liable to develop psychoses. These are the psychopaths, and they are usually completely overlooked. The teacher and medical examiner recognizes that they are neither defectives nor normal children; that they are not adjustable to the routine requirements of school and cannot be fitted into the ordinary regime, and usually let the matter drop there. Their anomalies of character and mental instability enable them to cope no better with the complex demands of life than it did with the simpler ones of life's training school; so they soon join that great body that Judge Gemmill has so well termed "The Army of Defeat," and find their way into almshouses, prisons, insane hospitals and other institutions. What we need to bear in mind here is the efficiency of preventive measures.

The 350 cases that we have above referred to came from the First and Second Criminal Sessions of the Municipal Courts, as well as a few from the Domestic Relations Court. There were 140 men and 210 women. The following tables show offences for which they were arraigned in court and the mental condition found.

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TABLE I
ANALYSIS OF 140 MEN'S CASES

	Drunkenness	Larceny	Attempt at Larceny	Assault & Battery	Offences against Chastity	Non-Support	Vagrancy	Stub. Child	Threats	Evading Cab Fare	Forgery & Uttering	Mal. Mischief	Trespassing	Vio. Drug Law	Felonous Assault	TOTALS	Percentage	
Ment. Defectives	8	9				2	2									23	or 16	3-7%
Cons. Psycho.	25	3				14	2	1								49	or 35	35%
Sub-Normal	9					2	1	1	3			1	1			24	or 17	1-7%
Dem. Praecox	1	1				1	1									7	or 5	6%
Epileptics	2	1														6	or 4	2-7%
Gen. Paresis	1	1									1					5	or 3	4-7%
Cer. Sp. Syphilis	1					1										2	or 1	3-7%
Al. Hallucinosi.	1															1	or 1	5-7%
Psychasthenia	1															1	or 1	5-7%
Senile Dementia	2						1									3	or 2	1-7%
Unclas. Psychoses	2	2		1												6	or 4	2-7%
Normal	5	4			1	1								1	1	13	or 9	2-7%
TOTALS	62	25	1	9	1	21	5	1	3	1	1	2	1	6	1	140		100.00%

TABLE II
ANALYSIS OF 210 WOMEN'S CASES

	Drunkenness	Larceny	Assault & Battery	Offences against Chastity	Vagrant	Stub. Child	Threats	Idle & Dis.	Profanity	Vio. Drug Law	TOTALS	Percentage
Ment. Defectives	46	4		25	1	3	2		1	4	86	or 40.95%
Cons. Psycho.	29	4		3	1	2				43	or 17.14%	
Sub-Normal	11	12	1	15		2		4		47	or 22.38%	
Dem. Praecox	3	3								6	or 2.86%	
Epileptics	3	1		3						7	or 3.33%	
Hysteria	3			1						4	or 1.43%	
Al. Hallucinosi.	1									1	or .48%	
Manic Dep. Insanity	2		1							3	or 1.43%	
Sen. Dementia	3									3	or 1.43%	
Unclas. Psychoses	3	3		6						9	or 2.38%	
Normal	2	3								5	or 6.19%	
TOTALS	105	29	2	52	2	5	2	4	1	8	210	100.00%

A few interesting points stand out in a comparative study of these tables. Take the record of the men offenders: We find that only 16% were mental defectives, while 35%, or more than twice as many, were psychopaths. Among the men offenders arrested for drunkenness there were 62 cases. Of these 12.9% were mental defectives, while 40.3% were constitutional psychopaths.

From the Domestic Relations Court there were 21 individuals arrested for non-support. Of these 9.5% were mental defectives while 66% were constitutional psychopaths. Apparently in the Domestic Relations Court the problem of the mental defectives is rather insignificant. The psychopath, however, looms up in large proportions.

A study of our women offenders gives an entirely different

picture. Whereas there were only 16% mental defectives amongst the male offenders, among the female offenders there were 40.95% mental defectives. There were 35% constitutional psychopaths among the male but only 17.14% among the female.

Of the women arrested there were 105 cases of drunkenness. Of these 43.8% were mental defectives, and 27.62% constitutional psychopaths.

A study of those women arrested for offences against chastity shows that the mental defective is the serious problem. 48% were mental defectives; 28% were sub normal, while only 3.48% were psychopaths.

In general our studies bear out the conclusions of other investigators, in regard to women offenders, that they are differentiated from non criminals by a lack of intellectual development, that mental deficiency is the problem here.

In regard to criminals as a whole, however, they contradict certain reports, for the psychopath is almost as frequent as the defective, and among men recidivists is of larger magnitude.

We conclude that there is a type of individuals passing through our courts who form a group, of as serious proportions as the feeble-minded, who furnish as much if not more trouble to the social worker and probation officer than the defective, often suspected by the layman of being insane and diagnosed occasionally by experts as suffering from psychoses, or as mental defectives, defective delinquents, emotional defectives, moral imbeciles, and what not. These individuals when studied intensively by exact methods show no real defect in the intellectual field, they give no evidence of insanity, but seem to have certain anomalies of character, certain lack of personality adjustments; unstable, neurotic individuals whose adaptation is inadequate and inefficient. They easily become disordered under the influence of emotion, alcohol, etc.

We have to consider these individuals in the light of adjustment of their personality rather than in terms of development of intellectual processes. Their anti-social conduct is due less to their stupidity; less to their lack of understanding of the demands of a social organization and an inability to foresee the consequences of their acts, than it is to a lack of co-ordination of the proper mental functions. The impulse to do a thing may come with such force as to drive out all opposing ideas, or the checking ideas may come into action too slowly, or may be permanently at fault. It is quite possible that these individuals belong to the same group as the neuroses and psychoneuroses, rather than defectives. And it is further quite possible, as Adler suggests, that our laboratory investigators are going to find some metabolic disturbances as a basis.

It is hardly necessary to call attention to the seriousness of the problem of the defectives and the proper social steps that need to be taken, inasmuch as now there is a wealth of literature on the subject. However, I am constrained to remind you of certain facts.

The public is getting the idea on the one hand that a majority

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of criminals are mental defectives. On the other hand, it is hearing that feeble-mindedness is incurable. So that the problem that faces society is to segregate all these defectives permanently. This is going to be a much contested point and if the day of reckoning should come, would we be able to summon sufficient data to justify such conclusions? Are we convinced that all the evidence is in? On the contrary we all know that the last word *has not been said* from the standpoint of causation (and therefore of treatment). In fact, we have hardly touched on the subject from this side. Real scientific investigation of the question is only beginning, and we should be a little more cautious in speaking of the hopelessness of the situation.

As yet the pathologist and Bio-Chemist are to be heard from. The psychologist himself is going to dig a little deeper than merely to classify levels of intelligence. In fact, there is an immense field of research problems that will have to be worked out before any positive statements can be made.

In a series of 225 cases studied at the Psychopathic Hospital I called attention to the fact that 10% were specialized defectives, that is their deficiency instead of representing a halt in the stage of mental development corresponding to a certain level of mental age, was the expression of certain irregularities of mental makeup that consisted in a partial dropping out of some field of mental imagery.

Of the cases above referred to 42 $\frac{1}{4}$ % showed marked defect in auditory memory and imagery; 89% of whom measured so low in the scale as to leave little hope of benefit from educative measures; the other 11% gave every evidence of being remediable.

The remaining 57 $\frac{1}{4}$ % of this series showed defect in visual memory and imagery. Of these 25% (two-thirds of whom were congenital syphilitics) were very low in the scale and were distinctly unpromising; the other 75% showed excellent learning capacity in other fields than those having to do with visual imagery and memory, and showed every evidence of good capacity to profit by an intelligently directed, intensive method of instruction.

The interesting situation was this: All of these individuals were distinctly backward children and were members of classes for defectives. Our findings showed that of those distinctly defective in auditory memory and imagery 89% were apparently hopeless cases from the standpoint of education; but of those whose defect was in the visual field of memory and imagery 75% showed every evidence of ability to profit by properly directed educative measures.

The lesson that we wish to call attention to is that there is a certain percentage of children in the schools showing one or other of these defects, whose extreme backwardness may be due to a defect in auditory word memory or visual word memory, etc. The defect may be partial or extreme, and their apparent level in the scale of intelligence will depend upon the degree of severity of the defect.

Those having the defect in the auditory field are much lower and more hopeless than those having such a defect in the visual sphere.

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Stearns' findings bear this out, in that those who have auditory hallucinations show greater disturbance of consciousness than those who have visual hallucinations.

Educative measures might consist in making good the loss sustained from a certain field that is in arrears by intensive work on others. For instance, in case of visual memory defect, one would pay special attention to the auditory, motor, vocal-motor, etc.

If these findings are borne out by other studies we have an additional tool with which to wage our warfare against feeble-mindedness.

These and numerous other problems at the very root of crime are waiting to be attacked in our court laboratories that are going to be established; and for a long time yet knowledge of criminals will have to be handed out by the teaspoonful rather than by the bucketful. There will be no room for the faddist or misguided enthusiast, for the work will of necessity have to develop slowly; but this is quite clear, that in the creation of just such laboratories in the Municipal Courts of our larger cities lies the road to the establishment of a rational and scientific method of dealing with criminals. "You must first find out what they are before you can successfully cope with them."