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Victor V. Anderson

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THE ALCOHOLIC AS SEEN IN COURT

VICTOR V. ANDERSON.¹

This study was originally undertaken with the aim in view of getting at the problem presented to the Court by the chronic alcoholics; the so-called "old rounders," who are repeatedly arrested for drunkenness and seem more or less unmodified by any form of treatment, who serve many terms in the House of Correction, in Jail, or at State Farm, but invariably find their way back into Court when turned out into society. This report is based upon an investigation of one hundred such cases, chosen at random from habitual and periodic drinkers (fifty of each), who have been repeatedly arrested for drunkenness.

It is assumed that these one hundred cases fairly well represent the class of alcoholics just referred to, and are average cases; many more serious cases, individuals arrested fifty, one hundred and more times, were known not to be included in this group. The occasional drinker, the mild social drinker, and such, who appear in large numbers in Court, and profit by the lessons learned from arrest and detention, or judicial reprimand, or probation, or short term sentences, do not form difficult problems, and may for the practical purposes of this paper be wholly disregarded.

The following table shows that each individual averaged a little more than seventeen arrests apiece; though some were known to have old records that were not obtainable:

TABLE I.
STATISTICS OF ARRESTS.

Number of Cases	Average Number of Times Each Individual Was Arrested	Total Number of Arrests of Group
50 steady drinkers.....	21	1050
50 periodic drinkers....	14.5	725
100 alcoholics.....	17.75	1775

The frequency of arrests serves to call attention to the seriousness of the situation from the standpoint of the Court. These one hundred alcoholics totaled one thousand seven hundred and seventy-five arrests. It is obvious that the usual methods of punishment had

¹M. D. Director Psychopathic Laboratory, Municipal Court, Boston.

failed to modify their alcoholic tendencies, for after short terms of imprisonment and then freedom, they appear again in Court to go through the same procedure over and over; off to prison, out in society, back into court, and so the process is repeated as the years go by. Eventually they become a burden to the Court and needlessly clog its machinery.

If we now turn to another aspect of the problem, their ability to support themselves out in society, we find the following facts:

TABLE II.

STATISTICS OF ECONOMIC EFFICIENCY.	
Steadily employed.....	10%
Irregularly employed.....	40%
Odd jobs.....	18%
Do not work at all.....	13%
Housework at home (women).....	19%
	100%

Only 10% were steadily employed. Practically one-half of these one hundred cases were not self-supporting:

Self-supporting.....	51%
Not self-supporting.....	49%
	100%

Almost universally now are earnest students of the situation attributing society's failure in properly handling the alcoholics to the fact that their physical and mental conditions have been disregarded. The nervous system of every one of these one hundred cases showed some impairment, whether of sensory capacity, (vision, hearing, touch, etc.), or disturbed reflexes, poor motor co-ordination, or muscular tremors, or what not; while the mental inferiority was evident in more than three-fourths of the cases, as the following table will show:

TABLE III.

MENTAL LEVEL AS SHOWN BY MENTAL TESTS.	
Mental Level	Number of Cases
8—9 years.....	15
9—10 years.....	21
10—12 years.....	20
Sub-Normal.....	21
Adult.....	23
Total.....	100

77% showed an inferior substandard mentality, while 56% had a mental level below the limit of 12 years.

Finally, the following table of diagnoses will explain the most important causative factors underlying the frequency of arrest, the

economic inefficiency, and the low level of mentality of these one hundred cases:

TABLE IV.

Feeble-mindedness.....	37
Insanity.....	7
Epilepsy.....	7
Alcoholic Deterioration.....	17
Psychopathic Constitution.....	32
Total.....	100

These are all essentially medical problems, and might more profitably be handled as such.

CONCLUSIONS.

We find that the chronic alcoholics spend a good proportion of their time in and out of institutions. When out in society, in not more than half of the cases are they able to support themselves. They suffer from physical and mental handicaps, that are in general considered as serious medical problems. They are in need of such care and treatment as are given to those suffering from physical and mental diseases or defects, rather than the ordinary penal treatment in the past afforded them.

The alcoholic himself would be better off, for he would be handled in the light of what he is and what he needs, rather than what he has done; the best interests of social welfare would be better served, in that society would be more securely protected from those that are a menace and a burden; and, finally, there would be an economic saving in that the cost for maintaining these individuals in penal institutions handling them over and over in the courts, and supporting them out in society, would go towards building them up physically and mentally and so equipping and training them that they may eventually become self-supporting.

Such a plan would not be revolutionary and would have no reference to the handling of drunkenness in general, but would simply provide ample farm-colony and hospital facilities for those chronic alcoholics whom the courts may consider in need of prolonged confinement and treatment.

A further analysis of these one hundred cases discloses two distinct types, important to recognize; essentially different in makeup, and apparently requiring different methods of handling:

- (a) The Steady Drinker.
- (b) The Periodic Drinker.

The Steady Drinker has been in the habit of imbibing alcohol more or less steadily, and perhaps in small quantities, for a prolonged

period of years. He shows an insidious, progressive impairment of his nervous system and a lowering of the functional activities of the entire organism.

The Periodic Drinker has drink paroxysms which subside and are followed by periods of sanity and rational thought and conduct. Then suddenly the storm breaks out again, and he drinks to great stupor; from this he recovers only to have another paroxysm. In the intervals between "sprees" he may not touch alcohol at all, and remains for months without it. He is a neurotic individual with a nervous system that is unstable and poorly balanced, which instability is the prime factor underlying his drinking habits and his impulsive conduct in general.

The following table illustrates very clearly the difference in the makeup of these two types of alcoholics:

MENTAL LEVEL OF ONE HUNDRED ALCOHOLICS.

Level of Intelligence..	8-9 yrs.	9-10 yrs.	10-12 yrs.	Sub-Normal	Adult	
50 Steady Drinkers.....	15 (30%)	19 (38%)	9 (18%)	5 (10%)	2 (4%)	
50 Periodic Drinkers.....		2 (4%)	11 (22%)	16 (32%)	21 (42%)	
Totals.....	15	21	20	21	23	100

Comparing the two types from the standpoint of intelligence, we find from above table that only 14% of the steady drinkers have a mental level above 12 years, while 74% of the periodic drinkers are above this level; that 86% of the steady drinkers have a mental level below 12 years, while only 26% of the periodic drinkers possess so low a grade of intelligence. The steady drinkers in general show a low level of intelligence; though adult in years and in physical development fully grown men and women, still they have the mental capacity of children. Is it any wonder that they fail to measure up to the standards set for them? Possessing as they do a defective mentality, they are unable to compete on equal terms out in society with those more favored in intelligence, and are in a larger proportion of cases unable to support themselves.

The periodic drinkers possess a higher grade of intelligence and are far more capable individuals; but, as will be seen later, have certain character anomalies, certain personality maladjustments, that are responsible for their alcoholic outbreaks.

If we now turn to the table of diagnoses it will at once be evident

why the difference in these two types is more fundamental than is implied merely in the terms "steady" and "periodic" drinkers.

TABLE OF DIAGNOSES OF ONE HUNDRED ALCOHOLICS.

Classification	Mental Defective	Psycho-paths	Epileptic	Insane	Alcoholic Deterioration	Totals
50 Steady Drinkers.....	29 (58%)	4 (8%)	5 (10%)	12 (24%)	50 (100%)	
50 Periodic Drinkers.....	8 (16%)	32 (64%)	3 (6%)	2 (4%)	5 (10%)	50 (100%)
Totals.....	37	32	7	7	17	100

The feeble-minded predominate among the steady drinkers, while the psychopaths predominate among the periodic drinkers. Only 24% of the steady drinkers could attribute their condition purely to alcohol. Only 10% of the periodic drinkers showed no other important causative factor. In 66% of cases did the steady drinker start his career with a mental and nervous handicap (feeble-mindedness and epilepsy). In 86% of cases did the periodic drinker start his career with a mental and nervous handicap (feeble-mindedness, psychopathic constitution, epilepsy).

Finally, the following table of economic efficiency will be seen to correlate well with the foregoing mental findings in these two types of alcoholics:

ECONOMIC EFFICIENCY.

Working Capacity	Steadily Employed	Irregularly Employed	Odd Jobs	H'w'k At Home	No Work At All	Totals
50 Steady Drinkers.....	1 (2%)	13 (26%)	16 (32%)	7 (14%)	13 (26%)	50 (100%)
50 Periodic Drinkers.....	9 (18%)	27 (54%)	2 (4%)	12 (24%)	50 (100%)	
100 Alcoholics..	10 (10%)	40 (40%)	18 (18%)	19 (19%)	13 (13%)	100 (100%)

From the above it will be seen that 72% of the steady drinkers are not self-supporting, while 74% of the periodic drinkers are self-supporting. If we now recall that 74% of the periodic drinkers possessed a mentality above the 12-year limit and 86% of the steady drinkers possessed a mental level below the 12-year limit, the connection between the two will be evident.

It is possibly safe to conclude that in general the chronic alcoholic who has been drinking steadily over a period of years is either a

mental defective to begin with, or, from the continued abuse of alcohol, suffers such an insidious impairment of his nervous system and degeneration of his higher mental faculties as to be unable to properly support himself out in society, and is in need of proper institutional care and medical attention. Merely locking them up for short periods, and then turning them out again, would, in the light of the above facts, hardly seem to meet the needs of the situation. Prolonged hospital care and farm-colony treatment are indicated.

With the periodic drinker, on the whole, a different problem is presented. The proportion that are insane, or feeble-minded, or suffering from alcoholic deterioration, is small. In general the periodic drinker is a neurotic individual, possessing the mental characteristics of the psychopath. He is impulsive, unstable, lacking in inhibitions, and highly emotional; often possessing good intelligence, and being quite capable, but apparently unable to make proper use of whatever mental faculties he has, because of his remarkable instability. He works for short periods fairly well, but tries all sorts of occupations, and succeeds in none, because of his lack of continuity of purpose and capacity for the continuous expenditure of effort in any one direction. Out of a clear sky comes an outbreak of alcoholism; in this he appears so irresponsible as to be often thought insane. He drinks for days, or even weeks, and sometimes to great stupor, and then, just as suddenly as it started, the attack is over, his mental condition clears up, and he may not touch alcohol for months. He cannot take things as they are in life; cannot see things in their proper light; is over-sensitive; broods over imaginary wrongs; is unable to shoulder responsibilities, and desires to place a veil between himself and reality. In short, he is constitutionally unequipped to fight the battles of life, and when things become too strenuous for him, he seeks forgetfulness in alcohol.

These individuals are little modified by any form of treatment that does not take into account their mental makeup, or does not tend to develop in them new habits of thought and action. Rather than needing prolonged confinement in hospitals and farm colonies, these individuals have to be incorporated back into society by means of well directed medical and social service methods of treatment.

SUMMARY.

In the study of one hundred alcoholics, who were found to have been repeatedly arrested for drunkenness, and who represented fairly well the typical "old rounders," so-called, who have spent much

of their time in and out of penal institutions, and whose conduct seemed little modified by such treatment, it was found:

- (1) That not more than one-half were capable of supporting themselves out in society;
- (2) That 56% had the mental level of children below the age of 12 years; and
- (3) That they were all suffering from conditions in general, regarded as medical problems.

For purposes of treatment they, in general, fall into two classes (this must be taken in the very broadest sense):

(a) The *Steady Drinker*, whose mentality is either defective to begin with, or is so deteriorated from the insidious effects of alcohol as to require that he be confined for prolonged hospital care and treatment; and

(b) The *Periodic Drinker*, who, though in many instances may require short periods of detention, as well as hospital treatment, is in general to be handled on probation and incorporated into society's scheme of living by means of well directed medical, psychological and social service methods of treatment—methods that take full account of his peculiar mental makeup, his character defects and temperamental difficulties.