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Reviews and Criticisms

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REVIEWS AND CRITICISMS

PROBLEMS OF SUBNORMALITY. By *J. E. Wallace Wallin*, with an introduction by *John W. Withers, Ph.D.*. New York, World Book Co., 1917. Pp. xxxii+485.

Because this work of Dr. Wallin is the first attempt to set before the psychological profession comprehensively the many problems confronting the clinical worker, a somewhat lengthy review of "Problems of Subnormality" would appear to be justified. In the preface the author states the four fundamental questions which deserve scientific treatment, viz., the perfecting of differential diagnosis which is in part considered in Chapter I and more completely in Chapter II, under the heading, "Who Is Feeble-minded?"; the problem of differential educational treatment in Chapter III; the matter of after-care and control in Chapters IV, V and VI; and preventive measures in Chapter VII. The material contributed by the author himself is drawn from his own extensive personal experience in the psychological clinics of the University of Pittsburgh and the St. Louis school system.

Throughout this work, the author maintains a rigorously scientific attitude toward the material of his text, though he is sometimes constrained to admit that much discussion possibly was centered about an inconsequential matter (p. 299). If the tendency to scrutinize material painstakingly does sometimes delay the development of the author's thesis, its justification is seen throughout the work, for many of the tacitly accepted standards of retardation indicative of feeble-mindedness are seriously called into question. So, likewise, are data on heredity such as are frequently submitted in so-called scientific surveys.

The appearance of this work will arouse the curiosity of workers in the various fields in which the problem of feeble-mindedness is a present and imperative one. The psychological profession, the profession of law and law-making including criminology; the medical profession, the teaching, and the social sciences will turn to the experience of a co-worker to find support and further direction. The reviewer will accordingly regard this work from the attitude of workers in these various fields.

I. Obviously the primary concern of the psychologist is the art of differential diagnosis. The experience of every clinical worker confirms the author's observation (p. 106) "even the trained and experienced psychologist is frequently baffled by the difficulties of mental diagnosis and completely balked by the present limitations of the science." The cautious clinical worker experiences a distinct disappointment when he reads in another place (p. 107) "Such a specialist (a properly trained examining psychologist) will be able to come to a positive decision from one examination on from 75% to 90% of the cases." The clinical worker then surveys the diagnoses of his masters in this field and finds such classification as "diagnosis deferred;

provisional diagnosis; dull from physical causes; subnormal mentality; retarded through neglect; retarded, borderland; backward, psychotic; constitutional inferior, undetermined," etc. All these together constitute from 25% to 64% of the cases examined according to the authorities consulted. (Author's table, p. 182.) Are such diagnoses to be regarded as positive decisions? The author must recognize the tentative nature of such diagnoses undoubtedly when he states (p. 78) "Moreover, many who were not retarded two years were undoubtedly feeble-minded," and again (p. 79), "Since we have attempted to be cautious in our diagnosis, it is probable that some who were diagnosed as borderline or reserved, and possibly a few diagnosed as backward, will eventually prove to be feeble-minded." Much that appears in the volume touching the matter of diagnosis is of little value to the clinical worker. It is a condemnation of the methods employed by Binet testers (author's term) who will be little perturbed by the author's remarks. Cautious workers have for a considerable period been conservative in establishing an upper limit of feeble-mindedness and in interpreting retardation. Entirely too much space in Chapter II is given to reproducing reports on mental surveys, etc., which have reached almost every clinical workers' hands, and forthwith the waste-basket. It is regrettable that many of them are taken seriously enough to be allotted space in a volume. The profession awaits a report from workers with Dr. Wallins' wide experience on such cases as he and other workers recognize "will eventually prove to be feeble-minded." Herein the volume contributes nothing. If experienced institutional workers can help us in this situation, let us encourage them to report their observations.

In view of diagnoses submitted by the author on his cases and such limitations as he recognizes respecting diagnosis, the reviewer does not feel convinced that we are ready to set aside the observation of Binet and Simon, (p. 107) "that all decisions' with respect to admissions to special schools, 'are to be recognized as provisional; the children are to be admitted to the class for defectives on trial, to be kept under observation.'" Experience in an institution convinces the reviewer that all commitments, especially in view of such limitations as the author himself points out, should be provisional, depending on re-examination at prescribed intervals.

The author's attitude respecting the functions of psychological tests and psychologists is probably due to a weakness in clinical psychological methods which justifies the statement of Yerkes: "Possibly it would be wise wholly to ignore the Binet method, on the assumption that nothing satisfactory exists." This is essentially the attitude of others, namely, Binet, Simon, Witmer, Fernald, Mitchell, Langmead, Huey, Healy, Yerks, Bridges, and Hardwich, and which is possibly best expressed in "A Point Scale," etc., thus, "the verdict often depends on the judgment of the examiner almost as completely as when no 'scale' is used." It is doubtful if any other science claiming scientific exactness in method would tolerate long so wholly unscientific a method. Let us be frank in this particular. The author states (p. 100) "Feeble-mindedness is a mental defect which can be determined only

by psychological criteria," but when pressed we find that these psychological criteria have only subjective reality. As an example of the application of a method so dependent on subjective factors, cases such as the following diagnosed by a very competent examiner may be cited: "Mary _____, age 13½ years. Mental age 10 1/5 years. The reactions of this individual indicate retardation through neglect of physical handicaps. _____ Examiner." Just what reactions indicate the condition diagnosed we are not told. Can progress in diagnoses be made when the training of the recruits in the profession is under such experts? Psychologists must free themselves of the delusion that their own personal expertness justifies their lack of a truly scientific method.

That the psychology of feeble-mindedness yet remains unwritten is apparent from the following observations of the author (p. 215), "Personally I have been quite dubious of the propriety of attempting to draw an inflexible line at any fixed age, because a degree of mental enfeeblement which might be regarded as feeble-mindedness in one person might possibly, with equal propriety, be regarded only as backwardness or borderlinity in another person. Thus we might be justified, for all practical purposes, in regarding an adult epileptic with an eleven-year mentality as feeble-minded, while we would not be justified in so regarding an eleven-year deficient of the simple type. Moreover, a mental status which we could regard as feeble-mindedness in one environment might only justify a diagnosis of backwardness in another environment." If being justified for all practical purposes determines whether society shall take action or not, one can agree with the author. But in view of the dispute between psychologists as to whether feeble-mindedness is a quantitative or qualitative difference in intelligence, or both, it is difficult to justify the author's contention scientifically.

Psychologists will be interested also in the author's discussion of the Intelligence Quotient. (Chapter II.) The author apparently follows his own bias in his computations of the quotient, employing 16 as a divisor as suggested by Terman in the cases of the poorly schooled subjects (pp. 223-227) and the actual age as divisor in the students group (pp. 228-230).

II. The legal profession will find throughout the volume much exhortation to caution in accepting the findings of surveys on the state-wide distribution of feeble-mindedness; and reports on the prevalence of feeble-mindedness among offenders. Suggestions regarding forms of commitment, retention, and care of various *atypical* groups, such as the feeble-minded, epileptic, crippled, blind, including prevention, deaf, speech defective, unstable and psychopathic children, and suggestions on control and elimination of defective children through sterilization touch the legal profession. The above outlined material is contained in Chapter VI. The author presents it as suggestive material, recognizing the present legal limitations.

Of more concern, perhaps, to the legal profession is the author's attitude toward responsibility in criminal action. This matter is discussed with an illustrative case (p. 232 f.), wherein the author asks the

question: "What greater justification would there be for freeing eleven-year criminals from responsibility for their criminal acts than for freeing eleven-year successful farmers, laborers, and merchants from responsibility for their acts, whether legal or illegal?" This question together with his recommendation as to delinquent defectives (p. 399) to the effect that, "no disposition of a questionable juvenile court case (or an adult court case, either) should be made until the facts are known with respect to the individual's mental capacity and responsibility" as well as the appellation "irresponsible" applied to epileptics (p. 405), give evidence of the failure of the author to comprehend the true nature of criminal responsibility. It will be a disappointment to the earnest workers for reform of criminal law and procedure to learn of a psychologist still talking of *responsible and irresponsible persons*.

III. The medical profession will be interested doubtless in the contentions of the author respecting the rôle of the psychologist and physician in the diagnosis and treatment of mental deficiency, sub-normality, backwardness, epilepsy, etc. The author questions the advisability of having the school physician make the initial selection for the special classes. He maintains that the demand for specialization makes it impossible for one person to equip himself equally well in both fields (p. 108).

IV. The educator, especially the administrator, will find in Chapter III a critique of the present organization of work for mentally and pedagogically retarded children. Little is contributed on the methods of differential educational treatment. It is organization that receives attention. The financial management of special classes would undoubtedly be a matter of vital concern to school administrators, but this matter receives no attention. Apparently the only constructive suggestion in this chapter not already much discussed by school men is the suggestion (p. 285) of *after-care* or *after-guidance* in special class cases—a function at present performed in some cities by mental hygiene societies.

V. Various phases of this work bear very intimately on social endeavor, particularly the author's suggestions regarding commitment of the feeble-minded, the epileptic, reporting the blind, deaf, crippled, speech cases, and the unstable and psychopathic, and also the suggestion regarding eugenic measures. Many of these suggestions are intended for the meeting of local needs (Missouri), and are modified by local limitations. However, much of the material has more universal application which will give directing counsel to committees on child and civic welfare.

The work is dedicated to Professor George Trumbull Ladd in commemoration of his seventy-fifth anniversary. An ample bibliography and efficient index close the volume. The volume bespeaks the ardent devotion of the author to his profession and his laborious efforts to give intelligent direction in a young but promising field of scientific endeavor.

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HARRISON L. HARLEY.

THE NEUROTIC CONSTITUTION. By *Dr. Alfred Adler*. Translated by *Bernard Glueck, M.D.*, and *John E. Lind, M.D.* Moffat, Yard & Co., New York, 1917.

The field of the neuroses, or the functional nervous troubles, because of the absence of any demonstrated organic pathology, has offered a most fruitful ground for speculation. Within recent years we have witnessed two ambitious attempts to explain the diverse symptomatology of these conditions from the point of view of underlying unitary principles, viz., the Freudian hypothesis, and more recently the doctrine of organ inferiority propounded by Alfred Adler. Both of these attempts to introduce order and system into these confusing conditions are comprehensive and philosophic. Freud distinguishes between the true neuroses and the psycho-neuroses. The basis on which this distinction is founded is a derangement in the past or in the present sexual life of the patient. The psycho-neuroses which include hysteria and obsessions, owe their origin to some psychic trauma which occurred during infancy or early adolescence. The subconscious effects of this trauma persist beneath the surface of conscious life, only to emerge from subconsciousness in hysteric episodes of one sort and another. The true neuroses, on the other hand, are traced to present pathological conditions of the sexual mechanism of the individual, which are directly responsible for the symptoms. In this group belong the anxiety neuroses and neurasthenia. The Freudian conception of the subconscious mechanism with its complexes, repressions and censor has been fully expounded by many disciples. Freud deserves credit for having introduced into pathologic psychology the fruitful concept of the subconscious. It is questionable, however, whether the intricate mechanism by which Freud supposes that the latent content of dreams is transformed into the manifest content will permanently be accepted. It is interesting to observe the enormous overgrowth of hypothesis and theory which has taken place within the space of a few years. Evidence is not lacking that interest in Freudian theories is suffering an eclipse, which to the reviewer is only proof that critical readers must have factual proof. In the nature of the case, no demonstration of a rigorous sort can be furnished for the Freudian hypotheses. The only argument which can be adduced in favor of them is the apparent improvement which follows in some cases upon the catharsis of a psycho-analysis. This evidence, however, is simply the therapeutic proof of the efficacy of a certain remedy. *Post hoc ergo propter hoc*. The patient improves following upon a certain treatment but not necessarily as a result of it. When one considers how slowly and by what hard won battles progress in science is made, one can not help but wonder at the temerity of those authors who produce volumes of elaborate theories upon the basis of no experimentally determined facts.

The absence of proof, other than general plausibility, which is characteristic of the Freudian theories, is thrown into striking relief by the work of Alfred Adler, who has constructed out of whole cloth a detailed and elaborate theory to account for the very same phenomena as are interpreted by Freud. Very few, if any, of Freud's hypotheses and assumptions are made use of by Adler. Where two radically different conceptions of the same phenomena, each minute and detailed

in its account, can be so confidently proposed by their authors, one wonders how many more of equal plausibility might be devised. Any one who hopes for progress in our knowledge of mental and nervous diseases can not but feel how great is the difference between these pretentious constructions, these ambitious attempts to wrest the whole truth from nature by one brilliant thought, and those painstaking, modest contributions to the physical and biological sciences by which knowledge grows from more to more.

Adler traces the neurotic constitution to two fundamental propositions, first the feeling of inferiority which has its ground in actual organic inferiority; and second, psychic compensation for the feeling of inferiority. "On what does the patient base his feeling of inferiority? Inasmuch as the patient is only able to detect the possibility of relationship between disease predispositions and those organ-inferiorities which force themselves upon his attention he is constantly in the path of conjecture. He will for example not seek the reason for his inferiorities in the disturbances of the secretions of the glands, but will blame in a general way his weakness, his stunted growth, his sham education, the small size or anomalies of his genitals, lack of complete virility, his effeminacy, the feminine traits of a physical or psychic nature, his parents, his heredity; at times only lack of love, bad training, deprivations in childhood, etc." In order to make his life tolerable under the handicap of an inferior organ the neurotic builds up a defense against his own sense of inferiority in the form of a psychic structure in which his truncated self is made whole. The chief motive in the development of this psychic construction is "the aim to be great, to be strong, to be a man, to be above." This aspiration to be dominant Adler calls the "masculine protest"; to this he traces the symptomatology of the disease, namely: "The passive, masochistic traits, the effeminate characteristics, the passive homosexuality, impotence, suggestibility, accessibility to and inclination for hypnosis, or, finally, the apparent surrender to effeminacy and to effeminate behavior. The final object, however, always remains the same, the domination over others which is felt and appreciated as a masculine triumph. Neither are the above described compensatory features ever absent in the make-up of these patients, as they might be expected to be in individuals who assume as a ground for action a feeling of inadequacy and who then strive to secure by every possible means a substitute for their shortcomings, to supply that which they feel to be lacking in their exaggerated ego-consciousness. And also in the psychic situation, the sexual element as a symbol asserts itself, inasmuch as such patients frequently form their apperceptions in accordance with a scheme in which their genital organs are regarded as if they were effeminized, restricted, castrated, and as if they were therefore constantly forced to seek a substitute. One form of this substitution they find in the depreciation and emasculation of all other persons. From this tendency to deprive others of worth originates the considerable reinforcements of certain traits of character, which set forth further inclinations and which have the quality of injuring others, as sadism, hate, contentiousness, intolerance, envy, etc." It may be of interest to point out that the frequency of sexual motives in neurotics, is explained on two grounds: "First,

because they furnish a suitable form of expression for the masculine protest; second, because it lies within the option of the patient to feel them as real."

HERMAN C. STEVENS.

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ANNUAL REPORT OF THE CHILDREN'S COURT OF THE CITY OF NEW YORK, 1916. Pp. 252.

The presiding justice of the Children's Court, Franklyn Chase Hoyt, states the purpose of this report as follows: "The purpose of this, our first extensive report, is threefold: First, to outline the history of the Children's Court; second, to tell of its present conditions, and, third, to call attention to some of its immediate needs."

The first Children's Court in New York City was established in and for the County of New York in 1902. Improvements were made in 1910 and 1912, and in 1915 the Act was passed creating the present Children's Court. Pursuant to the provisions of that statute the mayor of New York selected five justices of the Court of Special Sessions to serve in the Children's Court and designated one of them to act as the presiding justice. One justice will retire each year but all succeeding appointments will be for five years. Attention is called to the number of judges in the St. Louis court as shown in another paragraph; the New York system is infinitely better. The composition of the court on January 1, 1917, was as follows:

The Administrative and Clerical Force.	{	The Presiding Justice.
		Four Associate Justices.
		The Chief Clerk.
		Five Clerks of the Court (one in each county).
		Three Deputy Clerks of the Court (one each in New York, Kings and Bronx Counties).
		Two Assistant Court Clerks (one each in New York and Kings Counties).
		Four Clerks.
		Four Court Stenographers.
		One Stenographer and Typist.
		Four Interpreters.
		Thirteen Court Attendants.
		Two Telephone Operators (one each for New York and Kings Counties).
		A Secretary to the Presiding Justice.
The Probation Bureau.	{	The Chief Probation Officer.
		One Deputy Chief Probation Officer (Male).
		One Deputy Chief Probation Officer (Female).
		One Senior Probation Officer.
		Fifty-one Probation Officers.
		Four Stenographers.
The Clinic.	{	Three Physicians.
		One Stenographer.

Even with the above number of officers, in writing of the needs of the court the presiding justice states:

"Although this number may seem fairly large at a glance, a thorough analysis of the situation shows that more are required. The average number of children to each officer for supervision is altogether too large for satisfactory service according to the opinions of the best experts in probation work. Some of our probation officers have over one hundred children under supervision, although to perform real and effective work an officer should not be required to look after more than fifty. But in addition to that fact there must be considered the necessity of lengthening the period of probation so that the best results may be obtained. For example, let us say that our average period of supervision of all cases is six months. Although a supervision of six months or even of a shorter time may suffice in many instances, it is probably that as a general proposition an average supervision period of a year would be preferable."

It is only necessary to read the carefully prepared statistical tables in this report to be fully convinced that Justice Hoyt's contention is correct. A large part of the report is made up of the statistics. They are worthy of the attention of those interested in the children of a large city. The total number of cases handled by the five justices was 12,327 in the one year.

Some of the main recommendations made in the report which are applicable to most communities are:

(1) That there should be a proper differentiation between the children who need institutional care and those who should be placed in family homes. The report emphasizes the need of more private homes for neglected children.

(2) That there should be observation stations where children might be held and studied before the court makes a final commitment.

(3) That there should be graded institutions for the mentally unfit and better facilities of all kinds for dealing with this problem.

(4) That the "Children's Laws" of the state be codified.

(5) That the court be given jurisdiction over children of older years. (The maximum age in New York is 16 years at present.)

(6) That through constitutional amendment chancery or equity powers be conferred on the court so that it might inquire into the facts and circumstances of each case at the first hearing, without first having made a technical finding of juvenile delinquency.

The above are but a few of the recommendations. The whole is an excellent presentation of the work of the New York court and deserves the careful attention of juvenile court judges and probation officers throughout the country.

JOEL D. HUNTER.

Commission on Charities and Correction,
San Francisco.

NEGRO EDUCATION. By *Thomas Jesse Jones*. A Study of the Private and Higher Schools for Colored People in the United States. Bulletins 38 and 38, Bureau of Education Publications, 1916. Vols. I and II. Pp. 423 and 724.

This is the first comprehensive study of negro education in the United States. The need for such a work has been evident for a num-

ber of years. Vol. I undertakes to summarize the educational status of negro education in the United States by analyzing such topics as industrial education, preparation of teachers, secondary education, rural education, funds and their control, public school facilities, buildings and grounds, etc. It gives a cross section of the actual conditions as found in the United States surrounding schools for negroes, and the administration of those schools. The volume is intended to summarize the philosophy of education that dominates the education of the negro in the United States.

Volume II deals with more specific material. It undertakes to study all negro schools in the several states. It is quite evident that this is too great a task for a single volume. A volume might very well be devoted to each state, if a careful analysis of all schools were made. It is quite evident that a single visit to an institution is not adequate to form a correct judgment of the various factors employed in the administration of the school. The criticisms, in the main, appear to be fair, and the recommendations generally good, though far from complete or adequate. Being familiar with some of the colored schools in Virginia studied in this volume, it is quite evident to me that the brief survey of them in this volume, accompanied by recommendations, will not serve as the proper stimulus to their reorganization and betterment. On the whole, however, the work is admirable.

Northwestern University.

ELMER E. JONES.

STANDARD METHOD OF TESTING JUVENILE MENTALITY BY THE BINET-SIMON SCALE. By *Norbert J. Melville*. J. B. Lippincott Co., Philadelphia, 1917. Pp. XI + 140.

This is a convenient guide for those who are using the 1911 revision of the Binet-Simon tests. The first thirty pages of the text are devoted to a critical discussion of the theory and practice of mental testing. The author has grouped those tests in the 1911 series that have been found most useful in diagnosing mental deficiency; those that have proven next most valuable he has placed in a second group, and so on for six groups. Those tests that involve the use of the same materials and methods, also, are placed in a separate series, so that they can be conveniently given in sequence. There is a bibliography of four pages, samples of record sheets, etc. As the author says in the preface, no manual has yet dealt with the questions: "With what tests should the examiner begin? Which of two alternative questions should be first employed in a given case? Under what conditions may a test be repeated? By what precise standards shall we decide whether responses in such tests as the definitions should be credited to age six or age nine?"

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ROBERT H. GAULT.