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A DEPARTMENT OF DIAGNOSIS AND TREATMENT FOR A MUNICIPAL COURT

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SOCIAL PROBLEMS INVOLVED IN LEGAL SITUATIONS

For several years Municipal Courts have been developing their own technique for handling social problems which present a wide variation from the usual legal situations which courts are called upon to adjust. It has become increasingly apparent that the problems are not to be solved without the continuous application of the scientific principles developed in Medicine, Psychology and Sociology. While the main issue arising in Courts of Domestic Relations is an economic one, the conditioning factors are physical, mental and social.

The study of apparent causal factors of domestic difficulties in nearly six thousand cases, which is presented in graphic form in the section of the 1916 report on the Domestic Relations Division of the Philadelphia Municipal Court, shows that the issues are overwhelmingly dependent upon medical and psychological interpretations.

THE FUNCTIONS OF MEDICINE AND PSYCHOLOGY IN SOLVING SOCIAL PROBLEMS

This situation has been recognized more or less from the start and has been met in Philadelphia by the increasing use of the resources of the city for providing for medical and psychological care, and by the provision by the court of its own examining physicians and psychologists for the various divisions. Much of the actual examination and treatment, however, has had to depend on the courtesy and voluntary service of many individuals and organizations. So long as the work of securing medical, physical and social care for individuals coming into court was regarded as something in addition to the court's primary objects, dependence on voluntary aid sufficed. Even while this work was supposed to be needed only in exceptional cases, there was no need for a more complete equipment. In the Juvenile Division the need for routine medical examination and treatment of all cases has long been provided for. In the Misdemeanants' Division, the physical and medical side of the treatment has predominated, so that physicians and

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psychologists were prominent features of its organization from the start. In the divisions of the court dealing with adults all this has not been so evident, but experience with many thousands of cases has made it clear that no case can be completely understood or satisfactorily provided for until its medical, physical and social implications become articulate.

The nature of the psychological and medical problem arising in the Municipal Court can best be illustrated by two families dealt with by the Philadelphia Municipal Court. They were of widely different characters, but alike in the fact that the trouble was predominately a medical one although this fact appeared only after many months of acquaintance.

THE SILENT MAN

The Silent Man was forty-eight; his wife forty-two. They had two children; a girl of fourteen and a boy of thirteen.

The case was brought to the attention of the court by the hysterical wife of the Silent Man, who insisted that she could no longer endure the treatment of her husband. During the past five years the husband had turned silent, about every six months. He refused to speak to her, occasionally addressing a remark to her through the children. Periods of silence on the part of the man lasted from two to six weeks, at the end of which time he frequently would break up the furniture, usually in the dining room. He would then have a week of remorsefulness toward the whole situation.

The reaction of the lay worker is that a man of this type is just mean; that otherwise he would not act so.

The man had been employed for sixteen years where he had a wage from \$30 to \$40 a week. The unusual part of the case was that the couple lived contentedly and happily until the silence periods made their appearance.

The wife of the Silent Man was so completely nervous and run down that hospital care was deemed advisable. The boy of thirteen had a very bad case of chorea; the girl of fourteen was stubborn and silent, but affectionate toward her mother.

The Social Service Department of the University Hospital was asked to treat the wife. The physicians in the clinic for nervous diseases recommended that she be released at once from the worry and anxiety of domestic difficulties to avoid a dire result. The probation officer assigned to the case finally was able to arrange that the wife go to a convalescent home for two weeks. The Silent Man

refused to speak to the worker, but at last a message was sent by way of the little girl.

The worker's next contact was to take the boy of thirteen to the Children's Hospital. The father was rather loth to permit the boy to go. Finally he agreed. The doctor in the Children's Hospital stated that the boy had a nervous condition and asked if there were other children. The worker then brought the girl of fourteen, who apparently was well but sullen. After a very thorough physical examination, it was learned that the girl had incipient tuberculosis and was slightly deaf. Treatment for both boy and girl was secured.

It took many weeks to make a contact with the Silent Man, but finally he was amenable to examination by a neurologist. It was found that there was a bodily cause for his "brain storms," and that it responded to treatment. He admitted after much questioning that he knew when the spells were coming on, and was persuaded to notify the physician so that treatment could be given in time to ward them off.

With the health of the children and wife taken care of, and the critical emotional storms of the man averted, the family life became normal again, as there were no other sources of trouble.

The case of the Silent Man was opened in June, 1914. The mother's problem was fairly well worked out by December, 1914. The father's, many months later. The two children were taken care of by January, 1917, after two and a half years.

THE MAN WHO WOULDN'T WORK

His wife, Martha, was an energetic woman, a woman with special training; a splendid cook, earning never less than \$11 per week. Above all things in life she loathed a lazy individual. Her husband, Peter, was the man who wouldn't work.

She came to the court asking to be relieved of him. He was a costly luxury. This man was a big, husky, gentle soul, about forty, with a weak, wide smile. Four or five years ago, before the establishment of the Municipal Court, his wife had a similar feeling that she could not afford to have him about. He was taken into the old court, where an order of \$8 per week was made on him. He insisted that he never earned more than \$6 per week. He was the type of man that dogs and children love.

The probation officer talked with the man. His only excuse for not holding a steady job was that he wanted to do the thing he felt

like doing, and doing it when he wanted to do it. Therefore, he preferred work like tending furnaces, taking out ashes, whitewashing cellars, etc. Through this he eked out a paltry \$6 a week. The man looked so strong that it did not occur to the worker to ask for a physical examination. The worker instead persuaded the man to try another job under the supervision of the probation department. The man did this, under protest, and within a week his employer protested that he was not worth fifty cents a day. He would not lift. When his employer was questioned further, he insisted that the man was just not interested. The probation officer asked his employer if he complained of ill health. He stated that he did not; he was always cheerful; everybody liked him; that he would be a nice person to have about the shop, if one could afford him for decoration. The man apparently was just as normal as any other workingman.

Before placing him in the second position, the probation officer decided to look up his work records since youth. It was discovered that The Man Who Would Not Work had never earned over sixty cents a day even in his youth. The question of a second position was approached by the probation officer, and it was suggested that because the man would not lift, it would be wise to have a physical examination, even though he was very strong looking. The result of the physical examination was the discovery of a definite organic kidney condition; likewise an organic heart condition. The physician making the examination suggested that the man have a psychological examination. He was sent to one of the hospitals for observation. The diagnosis was given that he would never be able to earn more than his own living. He was far below normal, but was not an institutional case. This was explained to the wife, who insisted that he was more able to work than she, and in order to satisfy her preconceived notion about him, it was necessary for the department to arrange for her physical and mental examination in order that the same doctor who examined her husband might convince her that she was better equipped to earn that the man whom she was accusing of being lazy.

The final outcome was that the wife, Martha, agreed to support herself and the little Lena, if she didn't have to support the father or have him around. A brother was found who agreed to look after Peter and keep him on the job and see that he sent \$1.50 a week home whenever he had it.

Nearly six years elapsed before it was possible to adjust the case from the time it first came into court.

THE CLEWS THAT MEDICINE AND PSYCHOLOGY FOUND AND
FOLLOWED UP

Two things stand out very clearly in these histories: First, the court was unable to solve either of the problems without the service of medicine and psychology; second, it took a dangerously long time to discover this. In the case of the Man Who Wouldn't Work, the solution was not even suspected for four years. The man, who was an imbecile, and far from physically fit, was treated as though he were a complete and responsible man. His physical bigness and illusory appearance of health, together with his nearly normal mentality, prevented justice being done to him by his wife, his employer and the courts.

The case of The Silent Man was complicated by the nervous conditions and ill health of his entire family. The fact that his trouble was a mental one was obscured by his entire ability to succeed in business and the absence of personal violence towards his family. His silence appeared to be sulkiness, and his smashing of furniture, bad temper.

DIAGNOSIS AND TREATMENT OUTSIDE THE COURT A TANGLE OF
RED TAPE

Another feature about both of these cases was that the court, to follow up the clues which it got from time to time of the real difficulty, had to call upon many other people and agencies in the community. In the case of The Man Who Wouldn't Work, much time was lost in trying to get positions for him. The need for a mental examination was almost an accidental discovery, due to the alertness of the physician who made the first medical examination.

In the case of the Silent Man, it required the services of five clinics in two hospitals, and a neurologist, to get at his and his family's problems.

It sounds like a small matter to carry out the doctor's directions to have a child examined for defects of the ear, eyes, nose and throat, and the general constitution, but this is what is required. If a child must be taken to the hospital or dispensary, first it must be known which hospital is nearest the child's home; this may be quite remote from the court, and time is consumed in getting there, or going to the child's home to get him. The various clinics are usually held simultaneously, so that it is impossible as a rule to secure an examination in more than one clinic, or at the most two in a day. It is fre-

quently necessary to go to two or even more hospitals in order to secure the necessary examinations. When it is considered that two or even three visits are sometimes needed in order to determine the diagnosis in one clinic, the real time-consuming element in this sort of procedure is evident.

DIAGNOSIS AND TREATMENT WITHIN THE COURT A CONSERVATION OF TIME, NERVE FORCE AND MONEY

If in place of having to send people to all parts of the city at all hours of the day for examinations and observation, the court had its own staff of examiners that could decide what treatment was necessary, and in simple or short cases begin treatment immediately, the amount of time saved would be incalculable.

In addition to the time saving, the element of nervous conservation is important. To secure the the consent of the individual for his own examination, or his children's examination, sometimes requires long continued and patient effort. The lay person sees little need for more than one examination, and is apt to think the doctor does not know his business if he cannot decide at once what is the matter with him and where.

Much time is also lost from work for a great many people; car-fare enters in as a real drain when many trips must be taken, and whole families suffer when the mother must be absent at meal times or early in the morning.

PROPOSED ORGANIZATION

These considerations all point to the need of a department within the court which should have its own equipment for making all necessary medical or psychological investigations. In order to co-ordinate the results of the different investigations, it would be necessary to have a social director, who, with a group of specially trained workers, should make the contact between the individual cases and the specialists on the one hand, and with the different courts on the other.

THE SOCIAL DIRECTOR FOR CO-ORDINATION

The social director should be responsible for arranging all appointments for individuals with the different doctors. She should be responsible for preparation of family and case histories for the use of the examining physicians. The carrying-out of recommenda-

tions in regard to treatment, including commitment to hospitals and other institutions, whether given by the court of physicians, would devolve upon the social director.

PAID SPECIALISTS AVAILABLE AT ALL TIMES

The department should have as regular members of its staff, working on full time, at least the following: A general medical practitioner for making general examinations; a neurologist to examine cases of nervous disease; a psychiatrist for mental diseases, and a psychologist for making psychological examinations. To these should be added a dentist, working at least half time. Bad teeth are probably responsible for more physical ills, and are the source of more nervous irritations than any other single defect, but dental work is expensive at best, and it is hard to persuade people to undertake anything at once expensive and painful.

VOLUNTEER BOARD OF SPECIALISTS

It will be impossible to have all the treatment necessary carried out in the department, as the regular staff workers at best can treat only minor or short cases. It is recommended, therefore, that a Board of Specialists be appointed, who should act as consultants in diagnosis and superintend treatment, especially of complicated and long-continued cases. This group should act as Board of Directors for the department.

At least the following fields of medicine should be represented: General Medicine, Ophthalmology, Otology, Laryngology, Phthisiology, Dentistry, Surgery, Neurology, and Psychiatry.

To take the fullest possible use of the services of these specialists, without making an undue demand on their time, it is suggested that several physicians be selected from each field, and that they arrange their time according to a schedule, which would make each one available during definite portions of the year.

THE SUBJECT FOR DIAGNOSIS AND TREATMENT

Children

The matter of deciding who should go to this department of diagnosis and treatment would be determined variously in the different divisions. First, all children should be given a general medical examination, especially for the detection of defective vision, defective

teeth, defective hearing, diseases of the nose, throat and glands, and general constitutional disorders of nutrition, heart and bony structures. While this examination was in progress it could be decided whether a mental examination was necessary. As a general rule, all children who are retarded three years in their school work should be given a mental examination to determine whether their retardation is due to removable causes, or whether it is inherited, and an indication of feeble-mindedness. Children of working age might well be given a mental examination to help determine what they are best fitted to do and what training they need before entering their life work.

Misdemeanants

In the misdemeanants' division, medical examinations would usually be a matter of routine, and a mental examination should be given about as often, and for the same reasons as in the cases of the children. For the adults the need for medical and physical examinations will be determined more or less by individual cases. Certain kinds of mental disorders and physical disabilities are so apparent that with some experience the first interviewer could refer the client to the department. In less apparent cases the need would only become obvious after considerable acquaintances. Many cases would probably reach the point of a court decision before the need of a physician and psychologist would be felt.

Unadjusted Individuals

Types of cases that should be regarded as possible clients of the department are the chronic alcoholics or drug users of either sex; chronic beggars; the chronic deserting fathers; the women who make repeated applications for help to the court, but always withdrawing their applications before court action is reached; the hopelessly incompetent housewives; the man or woman with the unadjustable grievances who seems to enjoy prosecution for its own sake. These cases are representative of that large group who seem to be unadjustable by the lay worker, and who come into court sooner or later. The court must decide if they are permanently unadjustable, or can possibly be helped to fulfill a normal social relationship.

CONFIDENCE OF TECHNICAL POINTS GAINED BY CONCENTRATION OF AUTHORITIES

The court with its own specialists to determine technical points in the treatment of individual cases could make its decisions with

much more confidence and more quickly than when it is necessary to go outside to those with many different standards and concepts of the significance of the mental and physical factors determining conduct.

THE INTERDEPENDENCE OF DIAGNOSIS AND TREATMENT

One of the lessons of dealing with many of these apparently unadjustable causes is that only treatment continuously carried out over long periods of time can help to relieve them. Sporadic work, occasional visits at a time of crisis are almost useless. It is as important for the court to provide the mechanism for securing treatment as for securing diagnosis. Frequently treatment is the necessary preliminary to diagnosis. In court work more than any other form of social service the famous medical aphorism that *diagnosis must equal prognosis* applies. This is a matter of peculiar necessity, for it seems to be true that when a case has come into court, the court assumes permanent responsibility for its adjustment.

To summarize: The court needs a department of diagnosis and treatment to achieve its own ends. It does not need it as a pathological or therapeutical divisions grafted upon its legal body.