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SUPPRESSED PREMISES UNDERLYING THE GLUECK CONTROVERSY

DIVORCE TREATMENT FROM ADJUDICATION!

THOMAS D. ELIOT¹

Like the "Hotchkiss Report" of 1912 on the Chicago Juvenile Court, the Glueck report of 1933 on the work of the Boston Juvenile Court² may prove its importance chiefly through the fundamental questions it raises in regard to the functions and efficiency of this social invention, this Hindu Deity of court, clinic, detention, and probation. To the high reputation of Dr. William Healy and of the Boston court, quite as much as to the source of the report itself, may be attributed the amount of discussion following the Glueck study. As other studies are appearing from the same source (the Harvard Crime Survey), further examination of certain underlying assumptions and conclusions involved is still timely.

The Chicago Court, once served by Dr. Healy, has, in general, trended down hill since the war period. The Boston Court (formerly presided over by the late Judge Frederick Cabot) is said to have been ill equipped or operated during the period of the data selected for the study but to have improved since.³

Interested persons might compare with some curiosity the claim by Judge Eastman that the Boston court "has not had the necessary support and cooperation from other social agencies" and had "a dearth of social resources in the community with which to carry out either the recommendations of the Clinic or his own decisions," with the passages in Healy's book⁴ in which he attributes the apparently greater success in his Boston series to the relatively greater variety and cooperative efficiency of the Boston agencies.

The Healy study just cited was a follow-up of clinic cases from both the Chicago and Boston Courts. It was as disillusioning

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²Glueck, Sheldon and Eleanor T., *One Thousand Juvenile Delinquents*, Harvard University Press, 1934.

³Chute, Charles L., "The Juvenile Court Challenged," *Survey*, April 1, 1934: pp. 116-17. Also Harry L. Eastman, "1000 Delinquent Boys," *Survey*, June 1, 1934: pp. 199-200.

⁴Healy, William, *Delinquents and Criminals: Their Making and Unmaking*, Macmillan, 1926: Chapter XIX. Cf. also Glueck, Sheldon and Eleanor T., "A Reply," *Mental Hygiene*, October, 1934: p. 554.

for the supposedly efficient period of the Chicago court as is the Glueck study for the Boston court. But the Healy report showed results from the Boston situation which are hard to reconcile with the findings of the Glueck report. Of Healy's two Boston series, 21% and 25.75% showed "failure";⁵ of Glueck's Boston series, 88.2% showed "failure."⁶

The Gluecks' book, but especially the conclusions drawn by others from the book, naturally drew fire from those professionally employed in the field.⁷ Other reviews and comments have appeared in periodicals of law and of mental hygiene.⁷ Let us briefly review

⁵*Op. cit.*, p. 253: based upon adult court appearance.

⁶Based upon case studies followed up by field work. Dr. Richard Cabot of Harvard went further than the Gluecks themselves in considering their data conclusive evidence of failure ("One Thousand Delinquent Boys," *Survey*, February 15, 1934: pp. 38-40): "(The authors) have done an exemplary job. . . . These two books . . . are the first and, so far as I know, the only pieces of thorough investigation in this field."

⁷The following is an incomplete chronological list of replies and reviews:

1. Cabot, Richard C., "One Thousand Delinquent Boys," *Survey*, Feb. 15, 1934: pp. 38-40.
2. "A New Method Needed for Juvenile Reform," *Literary Digest*, March 10, 1934: p. 19.
3. Healy, William, "One Thousand Delinquents," *Survey*, March 15, 1934: p. 94.
4. Chute, Charles L., "The Juvenile Court Challenged," *Survey*, April 15, 1934: pp. 116-17.
5. Schoenberg, Philip, "1000 Delinquents," *Survey*, April 15, 1934: pp. 140-1.
6. Dow, Charles E., "Is There No Hope for Delinquent Youth?" *The Tree* (Minneapolis Council of Social Agencies), April, 1934.
7. Elkind, Harry, and Taylor, Maurice, "Juvenile Courts and Clinics," *Monthly Bulletin* (Massachusetts Society for Mental Hygiene), May-June, 1934: pp. 1-3.
8. Sutherland, E. H. (Review), *Journal of Criminal Law and Criminology*, May-June, 1934; pp. 144-6.
9. Wechsler, Herbert (Review), *Columbia Law Review*, June, 1934: pp. 1155-1159.
10. Eastman, Harry L., "1000 Delinquent Boys," *Survey*, June 15, 1934: pp. 199-200.
11. Dressler, David, *ibid.*: pp. 200-1.
12. Stevenson, George S., *ibid.*: p. 201.
13. Cabot, Richard C. (Reply), *ibid.*: pp. 201-2.
14. Glueck, Sheldon, "A Thousand Juvenile Delinquents . . ." *Yearbook* (National Probation Association), 1934: pp. 63-65, 90-98.
15. Eastman, Harry L., "The Juvenile Court Today," *ibid.*: pp. 76-89, 99-103.
16. Reckless, Walter C. (Review), *American Bar Association Journal*, July, 1934: pp. 418-19.
17. Glueck, Eleanor, "The Challenge of Juvenile Delinquency," abstracted in Child Welfare League of America *Bulletin*. September, 1934: pp. 1-3, 5-6.
18. Elkind, Harry, and Taylor, Maurice, "'One Thousand Juvenile Delinquents': A Critique," *Mental Hygiene*, October, 1934: pp. 531-52.
19. Glueck, Sheldon and Eleanor, *ibid.*, "A Reply": pp. 553-75.
20. Hiller, Francis H., "1000 Juvenile Delinquents," *Probation* (National

this material as a background for a more thorough-going analysis of the agencies and functions concerned.

The following seem to be the main criticisms of what may be called the Glueck-Cabot findings:

1. Methods of the study are considered unsound because of:
 - a. Alleged unrepresentativeness of the sample: for delinquents, for this court's work, for Boston, and for juvenile courts in general.
 - b. Alleged failures or inadequacy in the utilization of "control" groups for comparison.
 - c. Alleged unsound basis for adjudging success or failure.
 - d. Alleged unsound statistical techniques.
2. The conclusion that the court or clinic is a failure is not considered valid until both are well equipped, thoroughly used, and supported by other adequate agencies.
3. It is claimed that our opinions of an institution should be based upon a comparison with other agencies which preceded it; and with contemporary institutions, such as banks, which are equally under criticism but without thought of abandoning them.
4. It is said that even 12% of success may justify an agency, if, without the agency, the failures are worse.
5. Recidivism is not considered a fair test of the quality of treatment, any more than in the work of medical agencies; also the court and clinic render other valuable services, scientific, diagnostic, interpretive, ameliorative, preventive.
6. Practice is said to have improved since the date of the

Probation Association), October, 1934: pp. 8-9.

21. Mullins, Claude (Review), *Harvard Law Review*, December, 1934: pp. 356-58.
22. Mohr, George J., "One Thousand Delinquents—A Psychiatrist's Comment," *Mental Health Bulletin* (Illinois Mental Hygiene Society), February, 1935: pp. 3-4.
23. Elkind, Harry, unpublished paper before the American Ortho-psychiatric Association, February, 1935.
24. Michael, Jerome (Review), *Yale Law Journal*, March, 1935: pp. 908-13.
25. Eastman, Harry L., "The Juvenile Court—Its Purpose and Function," abstracted in *Child Welfare League of America Bulletin*, April, 1935: pp. 3, 6-8.
26. Healy, William, Bronner, Augusta, and Shimberg, Myra, "The Close of Another Chapter in Criminology," *Mental Hygiene*, April, 1935: pp. 208-22.
27. Massachusetts Child Council, *The Problem of Juvenile Delinquency* . . . (Pamphlet) N. D.

- Gluecks' data, and certain of the Boston group are virtually called behind-the-times.
7. The study is said to have fallen short of certain original objectives.
 8. The authors are said to have judged as a treatment agency a clinic performing an almost exclusively diagnostic function; or, results of treatment by a *combination* of agencies performing distinct functions are said to have been used as a basis for a judgment on *each* of them; whereas the excellence of one agency could be obscured in the end results by the failure of another agency.
 9. The soundness of attempts to predict individual success or failure from statistical studies of symptoms or pre-conditions is challenged. Neither the predictive factors nor the treatments are thought sufficiently standardizable.
 10. The assumption that there are identifiable delinquent types, or inherent peculiarities in the delinquent group, is attacked.⁸
 11. On the other hand, the Gluecks are thought by others to be too mild in view of their data: The Juvenile court is con-

⁸In his February review (pp. 39-40) Cabot announced a doctrine which almost seems to imply a regression to the concept of hereditary criminality. He finds in the Glueck book confirmation of his "impression" that criminals as such are very different in capacity from the rest of us. "Most of us go wrong but can learn to do better. The criminal is the person who cannot be taught better in spite of facing the deterrent experiences which would probably straighten out many of the rest of us. Partly by nature . . . he has formed a definite bias for criminal ways Whether . . . we could change these strong biases by any of the remedies yet in sight I do not know. These two books of the Gluecks certainly make me doubt it" (p. 40). He reiterates a similar argument in his June reply (p. 202, par. 2). Dr. Cabot's pessimism seems to rest upon something almost like a belief in predestination. If, however, Cabot's impression is based upon his own definition as given above, the question is begged and the conclusion is foregone without any evidence from the Gluecks or anybody else!

Such environments would doubtless make the susceptible among "the rest of us" become "different" in the way we dub "delinquent." But in his June reply (p. 202, par. 2) Cabot further implies that a community environment is not etiologically important unless it can be shown to be universally effective. This seems self-evidently fallacious. The Gluecks themselves, and several of their reviewers, aver that successful reform depends upon community reorganization and improved environmental conditions. Cabot claims that tuberculosis and rickets have been effectively combatted medically without radically changing community conditions; yet these are the very diseases in which a return of the patient to the old social environment produces "recidivism."

To answer these points thoroughly would require a course in social logic, from the theory of social causation through the concept of "sequence of total situations" to Thomas' and Zaniecki's "Methodological Note"! They are aside from the main argument of this paper which has to do with agencies and their functions, but the writer could not let them pass unchallenged.

sidered no better than a criminal court, if it has no better results; the clinic's prognoses are weak and cases handled on its recommendations are no better than without it; custodial care should be increased.

Aside from these points the excellencies of the book and its sponsors are recognized.

Cabot and the Gluecks have replied to those who defend the court or attack their report. Answering Chute and others, Cabot⁹ gives his evidence that the Gluecks' data are soundly representative for the court's work, and for other Boston courts. He sees no justification for court and clinic in mere fact-finding or interpretive work; he quotes Healy on the failure of the court, but not his point that the best physician cannot (indeed will not) guarantee permanent cures. He insinuates that his critics are professionally biased and again throws upon them the burden of proving their courts and clinics successful. His claim that there is no difference in views between himself and the Gluecks is hard to reconcile with the latter's later defenses. Perhaps, however, there is a difference between the Gluecks' private views and their published conclusions, the latter being all they are publicly defending.

Mrs. Glueck replied to certain criticisms in a paper presented at the Eastern Regional Conference of the Child Welfare League of America in June.¹⁰ She agrees with most of her reviewers in attributing failures more to individual, home, and community situations than to shortcomings in treatment. (By way of analogy: if cases unsuitable for X-ray treatment are nevertheless given X-ray, we can only criticize the prescription of X-ray for such cases, or their acceptance by the laboratory; we cannot attack the competence of the operators as such.) She does, however, claim with Cabot that the cases studied were a typical sample; and that the court is hampered in its legal and administrative equipment.

The Gluecks, in a more or less successful attempt to answer the elaborate critique by Elkind and Taylor,¹¹ claim that the latter misinterpret the objectives of the survey; that they ignore or belittle two control studies which confirm certain conclusions of the Gluecks; that skepticism rather than condemnation is their conclusion regarding clinic-courts in general; that the favorable difference in results

⁹See Note 7, No. 11, above.

¹⁰See Note 7, No. 14.

¹¹See Note 7, No. 16. Elkind and Taylor have also rebutted the above (see Note 7, No. 17).

when clinic recommendations were followed made unnecessary the study of non-clinic groups; that further controls were impracticable, unnecessary, or both; that 88.2% failure is significant even if the district's non-court boys were proved 95% offenders during the same period; that the "recidivism" was based on the same criteria as the original court-intake; that prediction scores are not proposed, as anything but supplementary guidance to agencies and case workers.

It is not the present writer's purpose to enter into the statistical wrangle which seems to have developed over the Glueck reports. There are certain elements in the *status quo* which are apparently taken for granted by both the Gluecks and their critics. It is these elements which this paper seeks to bring again under the lens. An unsound definition of the situation seems to be in danger of making both groups of critics propose illogical programs.

The many-sided controversy has all been most interesting to one who has for twenty years publicly advocated the superior effectiveness of case work in behavior problems when the treatment is carried on under *non-court* auspices.¹² For a generation the trend has seemed to be distinctly in that direction. Dr. Cabot's characterization of the "Juvenile Court with a clinical adjunct" as "society's most modern device for coping with juvenile delinquency"¹³ is therefore surprising, unless in the scope of the word *delinquency* are included only such cases as have actually been declared delinquent by a juvenile court.

Says Dr. Cabot:

"Certainly one ideal juvenile court judge and two expert and widely experienced psychiatrists with their corps of assistants cannot reform juvenile delinquents with such backgrounds *so long as diagnosis and treatment are in separate hands*. These noble people, handicapped . . . with this hopelessly unscientific and inefficient technique, are bound to fail . . . until they cease to divorce responsibility for diagnosis from responsibility for treatment."¹⁴

And again:

"Suppose all the diagnostic and therapeutic influences concerned with the delinquent boys were united under a single ministry of justice, so that psychiatrists, independent probation officers, foster parents, heads of in-

¹²A partial list of the writer's publications on this point will be found at the close of this paper.

¹³See Note 7, No. 11 p. 202.

¹⁴Cabot, Richard C., "1000 Delinquent Boys," *Survey*, February 15, 1934: pp. 38-39. This is doubtless the passage which led the *Literary Digest* (See Note 7, No. 2, above) to refer to "the ambitious scheme of juvenile reform in Boston as "The Failure of a Noble Effort."

stitutions, and parole boards all worked together under a common plan and in view of the same state of facts about their boys"¹⁵

To the writer, Cabot seems to be declaring a non-viable monster that which is only a fissible Siamese twin which could function better if, by their surgical separation; both pairs of feet could be on the ground at the same time. The Gluecks, on the other hand, propose to force the twin to take on a triplet in the hope of getting one fully integrated organism. The writer claims that the result would be hydra-headed and web-footed.

The figure breaks down in this respect: the court and the probation office are not only not twins but are actually of different species, the latter grafted upon the former. To change the metaphor, the court should be referee of a game in which probation office and clinic are two teammates. Teamwork would not improve by tying the players to the umpire, or requiring the latter to carry the ball or even run the game. The juvenile court has unwarrantedly assumed the role of coach or captain when it should be referee. Despite the admitted incompatibility of essentially legalistic procedure and the psychiatric social-work approach, Mrs. Glueck proposes their further fusion:

"Clinic should be part of the court or very closely coordinated with it (service branch and experimental branch). Conflict in point of view between judges and clinicians must be resolved. . . ."

"Integration not only of clinic and court, but also of these two with the community facilities for aiding in treatment so that the treatment process may be complete and unified."¹⁶

In this respect, however, the Gluecks merely accept a program frequently advanced or taken for granted by certain juvenile court people. Glueck quoted with approval¹⁷ statements from Chute, Abbott, Lou and others which give to the court as such the administration of treatment, cure, and prevention. Thus Chute's argument and the Gluecks' own arguments all assume or accept the conventional court-probation-clinic set-up and defend its continuance on the ground that it has never had a real chance to show what it could do.

Dr. Stevenson of the National Committee for Mental Hygiene differs somewhat:

"The plea for complete merging of the clinic and court is not, excepting in our larger cities where specialization is possible, conducive to the close community coordination of schools, social and health agencies. . . ."¹⁸

¹⁵*ibid.*

¹⁶See Note 7, No. 15.

¹⁷See Note 7, No. 13.

¹⁸See Note 7, No. 11.

But (the writer would add) it is precisely in the larger cities that differentiation of judicial from treatment agencies is most desirable and most feasible. His statement is acceptable without his exception.

Healy's current views on this point are not so clear; he merely says:¹⁹

"Juvenile courts in the main do not have adequate facilities for carrying out therapy that may reform delinquents."

"Should the Juvenile court be abolished? . . . We know . . . that it cannot be, at least now. But the burden of effort for the prevention and cure of delinquency must be placed where it belongs. It is a community affair."

I find myself in agreement with Judge Eastman of Cleveland in the following extract:²⁰

"When I say that the third function of the juvenile court is supervision, your sociologists will want to substitute or include the term—treatment. It is on this point that critics and authors confuse the facts and try to hold the courts responsible for a function that belongs to the community and not to the courts. The treatment of delinquents requires highly specialized services for which the court is not equipped and which it cannot be expected to render. After having diagnosed the situation and determined the treatment needed, it should obtain and supervise that treatment by whatever agencies in the community are best adapted to administer it."

Sheldon Glueck, on the contrary, made this comment:

"At one place in his paper Judge Eastman decries the attribution to juvenile courts of the treatment function; at another he includes among the duties of a modern juvenile court the supervision of 'the social treatment of those delinquents whom it selects as most likely to profit by such treatment.' I venture to suggest that the second is the sounder view."²¹

The writer ventures to suggest that the first is sounder!

Glueck apparently interprets Eastman as using "supervision" and "treatment" synonymously. I had taken Eastman to mean merely the issuing of orders, with such contacts with treatment agencies as would assure the court that the agency to which the child is allocated maintains the appropriate responsibility for its treatment.

Probation reviewed some of the reviews and arguments in its October issue. Mr. Hiller there expresses the "hope that this discussion will continue and that it may result in a better understanding of the proper functions of the juvenile court." The present writer's continuation of the discussion is to the effect that an important cause

¹⁹See Note 7, No. 3.

²⁰See Note 7, No. 14: p. 81.

²¹See Note 7, No. 13: p. 97.

in the total situation is the lack of understanding by the National Probation Association of the proper function of a juvenile court—*quā Court*.

The right of the court to exist has been defended by many of its spokesmen, not on its *own* merits but on the merits (or demerits) of the *treatment machinery* more or less tied up to it, but wrongly identified with its essence. One is reminded of those theologians who endanger public faith in the church by asserting that, if you cannot accept this or that particular ritual or intellectual doctrine you cannot be religious.

According to Mr. Hiller, the test of success should be a comparison of present with past agencies. There is truth in this; but if that were the only test, we might claim the success of nineteenth century bread pills, poultices, or anodynes, as compared with earlier bleeding, prayer, or sympathetic magic in the treatment of septicemia. If the present set-up has been proved largely palliative, such studies as the Gluecks' should help us to discover and apply more efficient combinations of our social resources.

It may be laid down as a useful principle that the limited effectiveness of a given agency for its desired purpose may be due, not to any intrinsic flaws, but to some state of affairs which is external to the agency but is part of the total situation within which the agency is expected to operate.

The writer wishes to defend the permanent value of the court, not by virtue of clinic treatment or probation, but on its own grounds as adjudicator. I have repeatedly urged that our thinking about the courts *as such* be disentangled from our thinking about the various kinds of *treatments, processes, and treatment agencies* which are *not* of judicial character but are merely administered by courts. Certain kinds of treatment of delinquents have never been under court administration (*e. g.*, reformatories, placement by foster home societies). Probation and/or treatment clinic seem to be under court operation largely by historico-legal accident. From the writer's viewpoint there is (except for local circumstances) no more reason for attempting to assay the *combined* efforts of court and treatment clinic than for trying to measure the results of the *combined* efforts of court and placement-agency, of court and attendance department, of court and policewoman, or of any other selected treatment-agency, arbitrarily paired with the judicial agency.

Here is the basic principle: The essential (*i. e.*, the judicial) functions of a court are: to hear conflicting claims in cases where

treatment cannot be settled on a non-court basis, and, if necessary, to investigate the facts in such cases; then to make decisions and issue orders to make them effective. But *enforcing* a decision is, in matters of social treatment, not the same as *carrying it out* by means of the court's own officers or with court equipment. In accordance with this principle a court order merely appropriately allocates or transfers or confirms certain custodies and treatments by homes or social agents.

So long as there remain otherwise-irreconcilable disputes between families and agencies as to the place or character of custody and treatment of children, so long will juvenile courts (or better yet, inclusive family courts) be useful and necessary in any child-caring system, to investigate and decide such cases. But such courts should directly employ not therapeutic *practitioners* but merely *investigative and recording and enforcing services*.

For both administrative and social-psychological reasons the valuable case-work functions now called probation²² could probably be carried on more effectively under *public welfare* auspices rather than under direct *court* control. Many such cases might thus be routed through to proper treatment without the conflict and stigma inevitably involved in court procedure.

Court action implies or imputes compulsion in the orders for treatment, even where compulsion may have been unnecessary. Even the legal fiction of compulsion may elicit unfortunate responses in a client or his group. Judicial process and compulsion (court orders) should be reserved as last resort. Compulsory and non-court treatment would be administered by the agencies.

If we separated these two phases, adjudication and treatment, so generally confused even by those supposedly closest to the problem, the courts as such might avoid many of the attacks which have been made upon them because of the present limitations and failures of probationary treatment and because of the identification of the court proper therewith.

When we confuse the judicial with the social-treatment phases of this institutional hybrid, we get such garbling statements as that "The Juvenile Court was established as a humanitarian adventure; the hope of its being curative has not been fulfilled";²³ or, that "if such institutions as the Juvenile Court . . . do not cure *or ameliorate* delinquency, it is not obvious why they should exist";²⁴ or, "In

²²I refer not to probation as the mere legal status, but to the *social process* of probation.

²³Healy, William, *op. cit.*

²⁴Cabot, Richard C., "1000 Delinquent Boys," *Survey*, June, 1934: p. 202.

many progressive communities the Juvenile Court has taken on the functions of a social service agency";²⁵ or, "Our major objective is to make it possible for Juvenile Courts to improve their case-work," or "Greater integration between the work of the judge, the probation officers and the clinic, with the suggestion that the clinic should be incorporated into the court and assist in treatment."²⁶

If we could free the courts from being identified with any particular kind of treatment-work (which may or may not prove effective in the long run), the courts would be on safer and saner ground, and all voluntary diagnosis and actual social treatment of behavior problems could be more efficiently coordinated under educational and welfare auspices, private and/or public.

If a clinic were "merged" with the court, it should not (as proposed by the Gluecks)²⁷ carry on treatment. A strictly court clinic should not try to do non-court work. It should be diagnostic (fact-finding) only. It might check up any facts in dispute, and provide advice to the court in subsequent crises and rehearings. In all smaller cities, a non-court clinic can serve these court functions equally well when called upon; while if it were part of the court its non-court work would be thusly handicapped.

The Gluecks' shortcoming, as above suggested, seems to be this: They take for granted the hybrid nature of the present court-probation unit. They see that the court needs psychiatric diagnostic work which should be integrated with it. Therefore they advocate attaching a clinic to the *court*, but for *treatment* purposes as well as for diagnosis. (They seem to recognize that consistency would similarly put under the court the child-placing and other special treatment-services of the child-caring system also; they merely note that this would be impractical!)

Integration of treatment agencies is desirable; but it would be simpler to integrate probation (as a social-case-work process) *with the non-court clinics and thence with all other non-court treatment agencies*, than to jerk the treatment clinic out of its present and increasingly well-integrated status in the non-court child-caring system, a move which would publicly confuse clinical service with judicial compulsions, even as probation²⁷ is already so confused.

If present child guidance clinics were turned over to the courts, it would become at once urgent to set up a new set of non-court guidance clinics, free from the stigma of court auspices.

²⁵Eastman, Harry L., *op. cit.*: p. 200.

²⁶Chute, C. L., "The Juvenile Court. Challenged," *Survey*, April 15, 1924: p. 117.

²⁷Glueck, *op. cit.*, pp. 258-9.

For these reasons the writer feels, with Dr. Stevenson,²⁸ that (while a court should have access to competent fact-finding and diagnostic personnel) the merging of court and treatment-clinic would be a regression from the forward step made several years ago by the second of the Commonwealth Fund demonstration clinics, and since followed in nation-wide child-guidance policies. For preventive purposes child-guidance treatment is far more accessible and more widely sought by non-court agencies and families, when it is not put under court auspices.

Coordination of preventive and treatment services under non-court administration, with the backing of a competent court with family jurisdiction is the ideal set-up. It is to be hoped that the actual trend in this direction so often pointed out, may be encouraged wherever proposed changes in administration, legislation, or architecture are under consideration. Such a court should have ample jurisdiction for both "mild" and "tough" situations, but should be used when court sanction is required for protection or enforcement. Family courts should also be given the power of injunction against persons and places responsible for conditions imminently causing delinquency.

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 "The Trend of the Juvenile Court," *The Annals*, March, 1914.
 "The Back-to-the-School Movement: The Unofficial Treatment of Pre-Delinquent Children," *Journal of Delinquency*, November, 1922.
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 "Apropos des tribunaux pour enfants en Amerique," *Revue Internationale de l'Enfant*, August, 1929.
 "Saving School Children from the Hand of the Law," *The Nation's Schools*, August, 1930.
 "Subordinating Legal Compulsion to Social Re-education," *Revue Internationale de l'Enfant*, September, 1930.

²⁸*Op. cit.*: p. 201.