Psychiatric Treatment of Certain Chronic Offenders, The

J. H. Conn

Follow this and additional works at: https://scholarlycommons.law.northwestern.edu/jclc

Part of the Criminal Law Commons, Criminology Commons, and the Criminology and Criminal Justice Commons

Recommended Citation

This Article is brought to you for free and open access by Northwestern University School of Law Scholarly Commons. It has been accepted for inclusion in Journal of Criminal Law and Criminology by an authorized editor of Northwestern University School of Law Scholarly Commons.
The Psychiatric Treatment of Certain Chronic Offenders

J. H. Conn

There are a number of individuals who repeatedly commit the same or a similar type of offense, not infrequently following, and in spite of punishment by incarceration. The study of the life histories of certain of these chronic offenders has revealed a number of emotional factors, more aptly termed personal needs, which appear to be identical with those found in neurotic patients.

There is a healthy, growing tendency to treat this type of offender extramurally. During the past few years the Supreme Bench of Baltimore City, acting upon the suggestion of its Chief Medical Officer, Dr. Manfred Guttmacher, has referred eight of these offenders to me for psychiatric treatment. (Three of these patients had been sent to me previously by their attorneys, and in each of these cases the advisability of such extramural care was discussed in court.)

The case material includes patients who had been sentenced for repeated assaults on female children, one case each of sex assault on male children, arson, burglary, kidnapping and one federal offender, who had been arrested for sending obscene matter through the mails. In each case the usual sentence of one or more years in a penal institution was suspended with the understanding that the offender would begin a two- or three-year period of probation, and concurrently start psychiatric treatment. The probation officer interviewed the patient once a month and psychiatric sessions were arranged twice weekly for the first year, and once a week during the second year of the probation period. Each patient was encouraged to secure employment and contribute at least part of the cost of his treatment. The psychiatrist kept in close touch with the department of probation and in turn received effective social service assistance whenever it was needed.

The patients have been observed over periods ranging from 4 months (one patient) to 8 years (one patient). Five patients have been treated for 1 year and one patient for 2 years. They ranged in age from 19 to 38 years. Up to the present there has been no recurrence of the original type of offense nor have any of these patients engaged in any other type of anti-social behavior. Each patient has remained gainfully employed during the period of observation.

1 Member of Dr. Adolf Meyer’s staff in the Henry Phipps Psychiatric Clinic, Johns Hopkins University, Baltimore, Md. This paper was originally presented at a staff conference.
Take the case of Mr. L., a 38-year old man of Jewish extraction, who had been found guilty for the fourth time of intimacy with little girls. He had been sentenced twice to serve six months in jail, once in 1923 and again in 1931. He was fined $50.00 when he was convicted for the third time in 1937. The fourth offense occurred in April, 1939, when sentence was suspended and arrangements made for psychiatric care. The patient is the sixth (third son) of ten children born to a jealous, domineering father and an over-solicitous mother. The first interview (there were 142 in all) occurred on April 25, 1939. (On that occasion his wife—this was his second marriage—characterized the patient as "full of life and fun and well liked by everyone. He has been wonderful.")

(The patient, who was a neatly dressed, friendly man, said: "I like people and I like them to like me, that is how I like to live." The patient went on to say that he could recall only three occasions in the past during which he had succeeded in doing the same thing he had done in the park with the three girls. But during the next few sessions the patient was able to remember ten such episodes beginning in 1923—age 23—and occurring at one- or two-year intervals until 1939.)

During this interview the patient insisted that he "loved children." He said: "I used to wonder what had I gained by intimacy with a child. Then I would begin to get a headache thinking and worrying about it; worrying that I had done something to hurt the child physically or even morally; it was then I remember my own little girl (born in the first marriage in 1923) and I used to be crazy about her. I have never forced a child."

During the second interview the patient reported a dream which he said had occurred several weeks previously. Mr. L. had been a member of the Reserve Air Corps, in the photography section of the National Guard (1934-1937). (Due to his wife's apprehensions he had given up this activity, 1938.) The dream was as follows: He had been asked to go to Europe where an airplane was turned over to him and in this plane he flew over Germany, and then as Hitler was making an address, Mr. L. "flew right into the balcony and crashed." The patient continued: "I know I struck Hitler as he was right in the center of it all. I awoke with a headache, somewhat excited but not frightened." This dream which was offered spontaneously, is one sample of the many dreams which were presented later, indicating the patient's desire to achieve something which would make him a great hero. As it will be seen later, he joined the army with the same purpose—to be somebody, a person whom everyone would look up to and admire.

Mr. L., who had average adult intelligence, received a fifth grade education and left school at the age of 13. He began to work for an older brother, a show-card painter, who, like his father, bullied him and criticized him on every possible occasion. At the age of 18 the patient enlisted in the army
and after a short period of service requested that he be transferred to China where he could "find adventure." (He apparently was well liked in the army where he was very careful about observing every order, and was later promoted to the rank of sergeant.)

During his service in China he had been introduced to girl prostitutes. There were a number of such episodes. He felt it was his duty "to prove that he was a man and a soldier." There was very little sex desire on his own part, and when he returned to the States in 1921 he was very pleased to become "the hero of his neighborhood." He felt quite content with occasional kissing parties. There were no sex relations from the time he left the army in July, 1921, until his first marriage in June, 1922, and this was followed by excessive activity (and dissatisfaction) during ten years.

The patient's first perverse experience with children had occurred in 1923 (age 23) when he had been married about a year and a half. He wanted to get away from his unsatisfying, excessive experiences and began a return to a simpler form of sex contact. Now he could say that fondling was taking the easy way out; "it certainly is a true explanation of my feelings at that time."

On May 7, 1939, he and his present wife, whom he married in 1938, entered upon a program of sex hygiene. The treatment plan was then focused upon the patient's attitude toward his wife. During a few weeks following his second marriage there were reports of many instances in which he had surrendered his self-respect and independence at home. He went on to say: "If a crumb falls upon the floor at breakfast, my wife will yell at me, 'If you keep on doing this the house will stink,' and then she will make me pick up every crumb. Five minutes later she will say, 'Kiss me,' and I will give in although I feel I am being forced to do so every time, but I will do anything to avoid an argument." The patient had been considering running away from home during the year preceding his last arrest (1939). At this time a definite attempt was made to get him to stand his ground, and gradually to give his own opinions. His imaginations concerning little girls also were being discussed. During the day he would constantly be imagining the pleasure he would have in talking to any little girl who might walk in. Heretofore he had explained these experiences as being part of his "great love for children," but now (May 27) he could say: "I can see that these were all sources of relief."

On June 6, 1939, Mr. L. reported that he was able to speak up without constantly apologizing to his wife and constantly appeasing her. He said: "I am getting more confident, I am not so afraid she will get angry if I don't give in to her. I used to make believe that I loved her when I really hoped that she would get sick and I could get rid of her. I was always afraid that she would yell at me." He was surprised that when he stopped trying to placate his wife, her tantrums gradually began to decrease and he began to regain his self-respect. Mr. L. began
to see how he had always given in to everybody. From his earliest days in school he had tried to be a "good" boy. He said: "I used to think that everybody should be good and kind, but I see that this philosophy was only because I was afraid to refuse anybody anything."

In July he brought the following dream: "I dreamed a little girl presented me with a box and in it were enormous plums; it was like a reward and when I tried to get near the little girl to thank her for it she ran around the rear of the box as if she were afraid of me, and then I stopped dreaming. I figured it out myself that the dream meant that if I kept away from these little girls I would reap the reward of these plums of extra size and value; it was not necessary to thank her by coming into contact with her; I could thank her at a distance. These little girls themselves will reward me if I don't molest them." Mr. L. continued: "You see I always thought that I was pleasing them by making them feel good, but I can see I was fooling myself."

On August 24, 1939, the patient stated that he felt much more at ease at home, and reported the following dream: "I dreamed that I met myself as a sailor coming off a boat. I saw myself in a sailor's uniform opening a trunk and taking out a lot of short lengths of heavy chains. Then I saw the sailor take out a picture of himself sitting on a chair with his arms around a young attractive lady; there were rows of little children sitting in front of the sailor, but he was far behind them. He seemed so happy and he laughed loud as if he had won a victory." Mr. L. went on to say: "I have always wanted to have the same sense of freedom as the sailor in the dream; the sailor has a girl of his own age and has no use for the younger children. I don't care to look at them any more; they are getting obnoxious to me."

(November 6th.) His opinion of himself was definitely changing. He stated: "I feel like I was worth something. I am not going to let people step on me. I am beginning to do things for myself now." He presented actual evidence for this transformation in his personality by relating how he had asserted himself at work and in his own home. During the past few months he had the courage to demand an increase in salary and got it. He has been able to present his own opinions at home, where previously he would have given in. His abnormal sex life has been corrected.

During the past two years of treatment there has been a gradual but definite change in his attitude toward his wife, and his fellow employees. He has felt himself more like a grown man and less like a timid, inadequate person who must give in to everyone's whim. His physical health has improved, as well as his feeling of satisfaction with himself.

Concluding Statements

The clinical material would seem to indicate that certain chronic offenders are timid, fearful individuals, who have experienced parental repudiation, educational failures, economic hardships,
and social handicaps. In this setting they lose their self-respect and take refuge in a system of self-deception which offers little personal satisfaction. They are repeatedly driven to engage in what appear to be irrational, anti-social activities in the vain hope of regaining some measure of self-esteem.

The factors of personal inadequacy and inferiority, the need for prestige, the sense of fear and guilt, and the resentment against authority seem to play as great a role in these life histories as they do in the lives of our clinic patients. The futility of punishing these offenders by repeated incarceration has been a common experience. The psychiatrist in the community when given an opportunity to study and treat these individuals over a period of years can help them to achieve a sense of personal balance and social perspective which make for happier, healthier living.

OPERATING DIRECTOR OF THE CHICAGO CRIME COMMISSION

Virgil W. Peterson, for 12 years a special agent for the Federal Bureau of Investigation and most recently in charge of the bureau's Boston office, has been appointed Operating Director of the Chicago Crime Commission. He succeeds Henry Barrett Chamberlain, who died last July.

Mr. Peterson was a member of the F. B. I. staff in Chicago from 1933 to 1935, during which time he gave more than a year of exclusive attention to the crime wave led by John Dillinger. He also worked for the government on the kidnapping of John ("Jake the Barber") Factor.

Mr. Peterson was graduated from Parsons College, Fairfield, Ia., in 1927 with an A.B. degree. He then studied law at Northwestern University and was graduated in 1930. He joined the F. B. I. immediately after being admitted to the Illinois bar shortly after his graduation.

During his service as a special agent for the federal government Peterson has worked in New Orleans, Jacksonville, Fla.; New York, Philadelphia, Washington, St. Louis, Milwaukee, St. Paul and Boston, as well as Chicago.

—from the Chicago Daily News, April 1, 1942.