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Delinquency.⁽¹⁾ By W. A. POTTS, M.A., M.D., Physician to the Tavistock Clinic, Psychological Expert to the Birmingham Justices.

DELINQUENCY is a big subject, but the time available now is limited, so I shall be able to put only a few facts and a few ideas before you.

First I ought to direct your attention to the Birmingham scheme for dealing with abnormal cases before the courts. This was inaugurated in 1919, thanks to the energy and intuition of Mr. Gerald Beasley. The principle established was that there should be a whole-time medical officer at the prison specially experienced in insanity and mental defect, who could, when called upon by the justices, examine persons remanded in custody, who might be not fully responsible, either through mental defect, or some other mental abnormality. At the same time there should be available a part-time psychological expert to examine similar cases remanded out of custody. This makes expert investigation possible in every case of doubtful responsibility. In the opinion of some a weak point is that the decision as to which cases should be examined rests with the justices. It is a question, however, whether the decision ought to rest with anyone else in the present state of public opinion.

(1) A paper read at the Annual Meeting held at Birmingham on July 9, 1925.

In actual practice the Prison Medical Officer, Dr. Hamblin Smith, has some 200 cases referred to him every year at the prison, while of cases remanded out of custody, only some two dozen are referred to me in a year. However, when the lay mind understands that the only way to prevent delinquency is to examine, not the seasoned offender with previous convictions, but the first offender, particularly the juvenile delinquent, whenever the seriousness of the offence or other special circumstances suggest that treatment, rather than punishment, may be desirable, a larger number of first offenders, and especially cases in the Children's Court, will be The habitual criminal, who is often the greatest examined. anxiety to the authorities, was a first offender once. Besides, the first offender has frequently been going wrong for years, although it is only his first appearance before the court. It is a fact that the habitual criminal usually begins his unfortunate career at an early age-often nine or ten-and can only be dealt with satisfactorily in the initial stages of his career. You will understand, therefore, that the experience that forms the subject of this paper has been gained not so much in the Birmingham Courts as in the course of private practice, and especially through delinquents referred to me from other centres on the strength of my Birmingham appointment. The time will come when all sexual offences, all young persons who have done anything serious, all who have to be sent to a remand home. and all cases who are not understood, will be referred for special examination.

The subject of delinquency can be approached from many angles. The simplest view-point is to see that as stealing is the commonest offence, the root cause is often either inability to earn a living or to earn what is thought to be enough. Inability to earn sufficient is generally due to lack of training or some definite handicap. If it is not merely a living that is wanted, but an addition for luxuries and pleasure, there is a wrong attitude to life. Training or education are required in many cases. But first it is necessary to make sure there is no definite handicap. Handicaps may be divided into two classes-physical and psychological. Excluding insanity, the psychological may be subdivided into inborn and environmental. Often it is not possible to differentiate the two big groups, because many, possibly all, physical disabilities carry with them a sense of inferiority, which may be a big factor in the case. Besides, the fact of a physical disability never means that there may not be a psychological one too. Physical factors must always be excluded first, because physical conditions are easier to diagnose and treat than psychological. Besides, even if there is a psychological factor in addition, it may disappear when the physical factor has been treated.

BY W. A. POTTS, M.D.

One of the earliest and most satisfactory cases I treated through the courts in Birmingham was a youth of 18 convicted of stealing. He was suffering from phthisis-a condition which had not been suspected. The Medical Officer of Health kindly arranged for him to go to the best of the city sanatoria: three months' treatment restored him to health. On his return he had the advantage of being able to secure lighter work. Several years have now elapsed, during which his conduct has been good. This was accomplished by placing him on probation, and making necessary treatment a condition of the probation. More than one young offender has been successfully dealt with by probation, the first condition of which was an operation urgently required for adenoids. In America cases of delinquency have been described, which were due to defective vision, and were cured by glasses. Though on the watch for this I have never seen such a case. This is probably due to the excellent school medical service in this country. It does not require much imagination to see that the child with a serious, but untreated, eye defect will not only miss much that others learn, because he cannot see the blackboard, but will be further bowed down by a deep sense of inferiority, through not being able to do what his companions can. The sense of inferiority is an important subconscious factor in many cases of delinquency. It may drive the incompetent ill-developed boy of a better social class to steal such a sum of money as may enable him to buy a gramophone, and so seek to impress his school-fellows.

There is a common form of stealing in which money and articles of value are stolen from the parents, and the parents only. In such cases it is almost certain the parents are depriving the child of something to which it has a right, such as proper arrangements for fresh air, exercise or suitable recreation, or even proper education, or education in some special accomplishment, suited to the child's station in life. Among such unsatisfactory parents we can include well-to-do people, who never give their children any pocket-money, but do not hesitate to spend freely on themselves. In many cases of juvenile delinquency the problem is the parents. The relation of child and parents is a subject for a book rather than a fragment of a paper. I will say no more now than that the parents must be honest in their whole life. Many cases of wrong-doing in children may be not unfairly ascribed to the father habitually sailing as close as he dares to the wind, though he may never have committed any technical offence in his business. Mentioning honesty of the parents reminds me of a boy who stole a cricket-ball at school. His mother said it was impossible, but to her dismay found the ball in his room. She tackled him, and after assuring

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him she trusted him absolutely, and putting him on his honour, asked if he had stolen the ball. "Would you believe it," she said, "he told me a lie to my face?" "Of course he would," I said, "as you had told him a lie first." "What lie did I tell him?" I replied that when she told him she trusted him, she trusted him so little that she had the cricket-ball in her pocket as confirmation, if necessary. Children must not be trusted till they are old enough, and have been trained to be trusted. But many parents evade their duties, and when they say they trust their children, it only means that the policy of closing their eyes is the easy course they choose.

You must not deduce from anything I have said, or may say, that I think there is ever one factor, and one factor only. Every case is complex, with many roots, and we must take it as a whole. One factor may overshadow the others, but the whole business is failure to adjust to life. All handicaps must be removed as far as possible, and training given along many lines.

When speaking of looking at delinquency from many angles, I had in mind not only toxæmia, but also the endocrine glands. Some enthusiasts, chiefly Americans, would explain every case in endocrine terms. Even if such an extreme idea were correct, we know how difficult it is sometimes to decide which gland is at fault, and how much more difficult it is to administer the particular hormone, so that it will act. Even the extremist therefore must often fall back on other methods in the meantime. It is unnecessary to say anything about thyroid cases, which are recognizable and amenable to treatment, though even here I would deprecate pinning our faith to one line of treatment only. Equally obvious cases, but far more difficult to treat, are young adolescents of either sex in whom there is hyperpituitarism. They may be exceptionally capable and obviously fitted for married life, except for the fact that they are not experienced enough, or sufficiently trained, to earn sufficient to maintain a home, or in the case of a girl to take her place in every way as a wife. We must also look at delinquency from the social angle. We must have vision broad enough to see that it is intimately interwoven with the housing problem, and with the provision of public parks, and open spaces for games. Joining the Boy Scouts may be the best form of treatment. The Scottish inquiry into juvenile delinquency, among other important findings, ascertained that the greatest amount of juvenile crime was committed on Saturday or Sunday. Such knowledge makes us realize that not every child has vet had a fair chance.

But it is time I was more definite and told you how I suggest the examination of a delinquent should be conducted. First, a thorough

physical examination. Is there disease or disability? If there is nothing definite, is he physically inferior or not?

Then mental defect must be considered. Some extremists, knowing that mental defect is the explanation in some cases, have jumped to the conclusion that all delinquents are more or less It is clear now that even the defective. This is not the case. 10 per cent. of defectives found in prison by some of the investigators to the Royal Commission on the Feebleminded was inaccurate, and that from 2 to 5 per cent. is nearer the mark. If not a case of mental defect, is the subject of examination dull and backward? If dull and backward, with physical inferiority as well, he is nearly as badly off as if he were feeble-minded. Indeed a few feebleminded persons succeed in virtue of their physical strength. In these cases an estimation of the mental age should be made. I never certify a case on the mental age, but independently of it. But the mental age is a useful confirmation, especially as something so concrete may appeal to the legal mind. All cases examined from the Children's Court should be so classified, for it is a great help to the magistrates, especially when they realize that the older child with a mental age of 6, say, will behave like a child of 6, and choose companions of that age. When it is a case of going to an institution the mental age is a useful guide to its managers. Besides, the mental age is a help in prognosis. For instance, if at 16 the mental age is below 9 it is almost certain the individual never can be self-supporting; if the mental age is between 9 and 10 there is a chance; with a mental age above 10 it should be possible to earn a living unless there is a physical or moral defect as well. Further light may be thrown on the possibilities by using one of the numerous form-boards. When a feeble-minded boy does the form-board quickly I seldom advise his being sent to an institution till he has had a thorough trial outside.

Some of you may be surprised that I am not describing the moral imbecile. The reason is that, while not denying the possibility of such a person, I have not yet seen a so-called moral imbecile who was not really a mental defective, unless he happened to be a case of incipient insanity, or a post-encephalitic, or psychological case, amenable to treatment and capable of behaving properly in a satisfactory environment. I have no intention of discussing the question of the moral imbecile now, because the controversial discussion involved might keep us here far too long. All I say is that I have not yet seen one.

Just as mental defect explains a small percentage of delinquency, so does insanity; but it only accounts for a small percentage, not more than $\frac{1}{2}$ per cent. of all cases. It must be kept in mind, LXXI. 48

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and also the fact that dementia præcox is often closely allied to mental defect, and sometimes difficult to distinguish. At the present time there is a further difficulty, owing to the not infrequent sequelæ of encephalitis lethargica that come along.

Finally, you will have gathered that we must consider whether the case is a psychological one. In spite of the objections that may be raised by many respected authorities, I would say the time has come when we must recognize a mental conflict as a definite clinical entity, to be diagnosed and treated as such. If you ask me what is the proportion of cases of mental conflict I can only say I have no idea. Every delinquent I have seen, unless he was insane or mentally defective or physically ill, has been, to some extent, a psychological case; but I only see a very small proportion of all offenders. An extensive investigation to ascertain the proportion is badly wanted. The mental conflict may be a father or a mother complex, or it may be a "Peter Pan" case, or one of many other common types, including an unsuitable or uncongenial occupation. But I must say again there is seldom only one difficulty; the delinquent usually fails along more than one line, and requires corresponding help. One or two cases may be of interest. A few have been dealt with by a thorough analysis, but for many, psychological talks were all that was required. In the case of young persons under eighteen I never do a regular psychological analysis, and always reduce the interviews to the minimum, both as to their duration and number. A little girl of twelve, who stole pennies from the pockets in the cloak-room at school, was clearly a Mary Rose. Some of you may accept that the subconscious motive was the idea that if I steal pennies, although I can get as much pocket-money as I like, you cannot say I am growing up into a responsible girl, who must be prepared to face the difficulties of life. To the heretics I can only say that a few psychological talks over a period of three months, without any endocrine treatment or elimination of toxins, resulted in a different type of girl. Her teachers noticed that she worked better, extended her interests, and developed in many ways, in addition to behaving well. She never had any dreams, but she wrote some original fairy stories, which we analysed together, while I helped her to understand her father, an able and sensible man to whom she was devoted.

Just as I warned you that we must never fix on one factor only, so I would deprecate the idea that in any but the rarest instances one interview is all that is required. With that warning I would refer to a young woman of 21, a cashier, who had embezzled f_{17} . It was not the first offence, as she had embezzled f_{10} before. The case never came into court, as on both occasions the money was

refunded by a lady friend before the deficiency was discovered. She came a long journey, and the expense and conditions of her work made it impossible for her to come back for treatment. It seemed therefore hopeless, but when I realized that she was a particularly intelligent young woman of a good disposition, while I could have the further advantage of an interview with her mother, who was also a sensible woman. I determined to do all I could to make a success of the single interview-a very long one. When I asked her why she stole the money, she said she took it to spend on herself, and the explanation was that she was much too fond of silk stockings and chocolates. It appeared, however, that while she bought expensive boxes of chocolates, she never ate more than one or two herself, but gave the box away to her younger brothers and sisters. I told her the reason was inadequate, and that we must go more deeply into her life. Then I spoke to her about her mother; at first she was indignant at the idea of discussing her mother, who was, she said, a wonderful woman, who had done everything possible for the family. But gradually I drew her out. She was the eldest of a superior working-class family, whose income, however, had often been limited. Her mother was one of the devoted selfsacrificing type, who did everything for the children, and never made them do their own mending or any work she could undertake herself. Brought up in such an atmosphere, the girl, although clever at school and also at her work as a cashier in a business, all the wages of which passed through her hands, still remained in many ways undeveloped. Gradually I got her to see that her mother was her difficulty, and that so far from making a mistake in leaving home and going into lodgings near her work, she had taken a wise step, and must not think of going home again, as she had been recommended to do. The mother was as sensible as the daughter; indeed she had already partly realized that she had spoilt the child, and was largely responsible for the offence. The girl had no other treatment. She wrote to me eighteen months later to say she had repaid all the money, had had no further difficulties, but had passed a special examination qualifying her for a better post. The only trouble was that the new post was far away from her home, and she wanted to make sure I approved of her going so far. As a reminder that there is always more than one factor in a case, I should say that this girl was very proud of her book-keeping and the beautiful way in which she kept her accounts. But the manager of the works trusted her, and never looked at her books. All of us, especially if we are young, like, indeed possibly require, commendation for good work; while no young person should ever have sole control of large sums of money.

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Some cases can be understood best through their psychological type; for instance, many of a feeling or emotional type must learn to reason and think more, and to make themselves harder and less sensitive. A young man of good family, who had served two long sentences of imprisonment, was of this type, which was an additional difficulty to that arising from the Puritanical atmosphere in which he had been reared. Whenever anything went wrong his impulse was to run away, which he usually did in a stolen motor. If he had any money he abandoned the car, after travelling a good distance; if he had no money he sold it. One of my aims was to make him, when impelled to dash off, stop, and think, if he did so, where would he be in ten hours, ten days and ten weeks respectively. This was a great help. It was a very complicated case, but he is now earning his living, and for the last two years there has been no misconduct.

The great difficulty in many cases is a craving for adventure, or an intense and reasonable desire for something they cannot get; artistic ability, love of music and the beautiful must be given some form of expression. But there is not time now to describe cases of this kind. Just a few words about two special offences. First, homosexual offenders, if not mentally defective, are psychological cases; their development is retarded, especially on the emotional side; they respond well to treatment by analysis, but it is essential that it should extend over a sufficient length of time.

Secondly, cases of chronic alcoholism require serious consideration. I believe the possibilities of treatment in some cases are much greater than is generally realized, and that there are many lines of treatment not yet explored. The tragedy of some of these cases is that they are not only charming personalities, but very capable. The question of toxæmia must first be considered. Many are, I think, hypothyroid, and this perhaps explains the fact that some drinkers from the beginning can take enormous quantities of strong liquor without showing any of the ordinary effects of intoxication. Then I saw a brief account once of a system tried successfully in America of getting drink cases to work with and help one another. The essential condition was that they should join a club, the President of which, and all the officers, were reformed drunkards. In this connection I would tell you of a young man who used to soak himself with beer every day, but who has been treated so far (seven months) with success in that he has abstained and has had promotion in his business. He was sent first to a special sanatorium. He told me that when he arrived there it was the greatest encouragement to find that the other inmates were not degenerate imbeciles, but very decent fellows. In all cases of daily drinking there must be physical treatment and some control in the first instance, but when the habit

has been temporarily stopped, and in cases where there are only periodic bouts, psychological analysis is invaluable. Experience has taught me, however, that in the case of some married people such treatment may be useless unless the married partner collaborates in the analysis. I need hardly say that alcoholism due to mental defect cannot be treated in this way. Apart, too, from mental defect I must warn you that many cases of mental conflict are not suitable for analysis. Many are hopeless, at any rate at the advanced stage at which we first see them. Besides, Sir Frederick Mott has rightly impressed on us the importance of estimating the inborn potentialities. It is less necessary to warn such an audience as this that cases requiring analysis should only be taken by those who have themselves been analysed. It is a fact that no one can take anyone else further in analysis than they have gone themselves; an attempt to do so involves great strain, and often ends unsatisfactorily. Psychological analysis is sometimes condemned because of the failures of untrained workers. It is as unfair to do this as it would be to judge surgery by the performance of practitioners who had never been surgical dressers, far less house-surgeons. But those treated must have possibilities in themselves.

As a final word I would say that though no one could attach more importance than I do to the pathological and bacteriological laboratory, and to the value of suitable drugs and endocrine preparations, yet, if we want to understand delinquency and other forms of abnormal conduct, much of our time must be spent, not in the laboratory that deals with death and disease, but in the consulting room, where there is an investigation into life and the mainsprings of action.

The Psychopathic Personality.⁽¹⁾ By M. HAMBLIN SMITH, M.A., M.D., Lecturer in Criminology, Bethlem Royal Hospital, London.

I PROPOSE to deal briefly in this paper with a group of cases which is a large one, although ill-defined. The group is of much social and medico-legal importance, and its consideration raises questions of fundamental moment. As generally described, the group is heterogeneous. But I shall try to show that the conditions comprised in it are related to each other, as also to other kinds of mental abnormality. The members of the group are characterized by their inability to make satisfactory social adjustments. But I

(1) A paper read at the Annual Meeting held at Birmingham, July 10, 1925.