disregard of these natural limitations constitutes a serious abuse of what is a perfectly legitimate means of relief when properly indicated.

It seems to me that the purely mechanical side of surgery has been receiving far too large a share of our attention, for we are not merely mechanics or carpenters. We must not forget that "any operation which does not better the condition of the patient must be regarded as a therapeutic error,"⁸ and that to possess a sound judgment as to the indications and counter-indications for operations, based upon a careful and thorough knowledge of the natural history of disease and of surgical pathology, is far more important and valuable than the acquirement of mere mechanical skill.

In no department of human life are new methods more eagerly grasped at and tried out than in medicine and surgery, and the discovery that the cavities of the human body can be safely explored and their contents removed or re-arranged has very much overshadowed our interest in surgery as a science, and very much over-stimulated our enthusiasm for its practice as an art.

But all this will be changed. The only question is how, and by whom, the change shall be brought about. Shall it be slowly and gradually, by the natural processes of evolution; shall it be forced upon us by a popular demand for the safeguarding of surgical practice; or shall it be accomplished by the efforts of the profession itself to secure a more thorough preliminary training and adequate hospital apprenticeship for all students who are intending to engage in the practice of surgery?

I believe that it can be done best, and that it will be done, by the profession coöperating with the professional school, and I am equally convinced that when the change is made, and the science and art of surgery are brought into proper perspective, much of our over-interference will seem as absurd to our successors, as the over-medication of our fathers in the earlier part of the 19th century seems to us.

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Original Article.

THE STUDY OF THE CAUSES OF JUVENILE DELINQUENCY.*

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SINCE the establishment of juvenile courts, a little over ten years ago, there has come an awakened interest in the causes of juvenile delinquency. In connection with the juvenile court of Chicago, four years ago, a Psychopathic Institute was established under the direction of Dr. William Healy, in which over a thousand of the repeated offenders have been studied. The purpose of this paper is to state briefly the methods used at the Psychopathic Institute, and to show some of the results of the study.

As statistics show that a large percentage of criminals commit their first offence long before their majority, it was thought advisable to begin the study of causative factors before the end of adolescence, both for the advantage of studying them in their beginnings, and that the prognosis might be the more favorable. For this reason study was begun in the juvenile instead of in the municipal court.

The routine study of each patient includes a physical and mental examination, and the ascertainment of many facts about developmental, family and social history from relatives, officers and others. In the physical examination such factors as eyesight, hearing, and nose and throat conditions are given prominence. If there is a question of hysteria, the physical stigmata are carefully looked for. Every physical factor is considered which could possibly effect the present situation of the individual. In the mental examination, Dr. Healy uses his own set of tests, supplemented by Binet in those cases where the mental age appears to be below twelve, or in any other case where it is indicated. Besides these, there are additional tests which are used as required.

In the study of the mentality, the factors which have been sought are: (1) results of formal education, always taking into consideration their advantages; (2), the estimate of native ability aside from formal education; and (3), the natural tendencies and interests of the individual, which may help in the solution as well as the understanding of the problem. The following is a tentative classification¹ of different mental conditions found, which has been adopted for the sake of convenience:—

“(a) Considerably above ordinary in ability and information—the latter estimated with reference to age and social advantages.

“(b) Ordinary in ability and information—the latter estimated with reference to age and social advantages.

* Read before the New England Hospital Medical Society, March 19, 1913.

"(c) Native ability fair and formal educational advantages fair or good, but very poorly informed.

"(d) Native ability fair and formal educational advantages fair or good.

"(e) Native ability distinctly good, but formal educational advantages poor.

"(f) Native ability fair and formal educational advantages poor.

"(g) Native ability poor and formal educational advantages poor.

"(h) Native ability poor and formal educational advantages good or fair.

"(i) Dull from known physical causes, including epilepsy.

"(j) Subnormal mentality — considerably more educability than the feeble-minded.

"(k) Feeble-minded (Moron).

"(l) Imbecile.

"(m) Psychoses."

The social aspect of the case includes the child's own story, written down as nearly as possible in his own words, and on separate sheets, the stories of anyone who can throw light on the case, including parents, friends and other members of family, school-teachers, ministers, employers, etc. The probation officer is able to add to this history an account of the home and the child's environment. Every source of information is made use of, and the informant evaluated as far as possible. Information is obtained in this way about heredity, ante-natal and natal, developmental and environmental conditions. Many times there is a wretched heredity with alcoholism, insanity, feeble-mindedness or epilepsy. Often the mother has worked up to the last week of pregnancy under severe physical and mental strain, and the child is a weakling—while other children born under more favorable conditions are strong. Sometimes the mother has made frequent attempts to bring on a miscarriage, and the blood supply has been sufficiently interfered with to affect the mentality of one child, while all other children are normal. Many unstable cases with extreme irritability give a history of meningeal disease. Some have had head injuries of a more or less serious nature, leaving sequelae of varying degrees of seriousness. One case following an automobile accident showed development wholly arrested from that time, while many still bear the marks of a fractured skull.

After a case has been worked out in detail, a summary is made along the following lines:—

1. The physical condition,—general condition and any special defects which could in any degree account for the present situation.

2. Results of the psychological examination, in as few words as the nature of the case will permit—with reference to detailed psychological impressions.

3. Delinquency (briefly).

4. Causative factors in chronological order, beginning with heredity, then ante-natal, natal, developmental, environmental history, and physical and mental conditions.

5. Prognosis.

6. Treatment.

The following history,² which is merely a synopsis of a case, may serve to explain the methods of examination more clearly and to show some of the unexpected results.

Girl of 16, Irish. Gives name which we come later to know is incorrect. Had been to a protective agency in a state of exhaustion. Said she had just come from hospital where she had been nursing her brother till he died and now had no home. Previously had been working as nurse. "Sunday I went out to this position. This woman has paralysis and Sunday night I could not go to bed, but stayed up and took care of her. I nursed my father for a year and a half, and so I know something about nursing. Sunday night did not think it was so bad because I wanted to help her. On Monday morning I was not so active and she began scolding, but I thought she was sick and I must take a lot off of her. Her daughter, she's about six months younger than I am, and Monday night she suggested I stay up half the night and she the other half. The woman said I could do it because that was what I was paid for. I stayed up all Monday night. When it got to staying up all day and all night that was slow torture. Monday night I broke my glasses and took them to the jeweler Tuesday morning. She said if he could do it in half an hour to wait for them. He said, yes; he could and while I was talking to the jeweler's wife a retired soldier came in. I spoke to him and he told me my twin brother was in the D. hospital. My brother told him to look for me and to tell me to come up there. I went up there and the Supt. said it was not so. I worked all day Tuesday and I told her daughter about it. I called up and asked if E. Y., my brother was there. A man answered the phone and said yes, he was there. He said, "Who are you?" I told him it was my brother and he said, if this is his sister you had better come to see him tonight. Said he was too sick to have operation. When I got there my brother was unconscious. He died last night at a quarter to three. I stayed there until this morning—it was light—I don't know whether it was 6 o'clock or 9 o'clock. They said he would be buried at 10 o'clock this morning. They said the Government would take care of him."

At another interview said: "Father died last October. Mother died twelve years ago. Have six brothers, two are railroading, four in the army. Have six sisters. I went through grammar and high school. In Cheyenne, Leavenworth, Des Moines—in the high school there. Was living with father till he died, took care of him for year and a half. Since he died have been living from October till latter part of January with twin brother in flat where father died. In January brother had to go to barracks so we stored the furniture and I boarded. Was doing office work then. Have one sister in Des Moines, one in Cincinnati, two in California. Have one brother in Kenosha, switchman for the L. S. & M. S.—one in Denver, he is firing for the Wabash."

Another interview: "I went through high school. When 17 graduated from the high school. Graduated from the Des Moines high school. Studied for a nurse one year in Cincinnati and one year in Chicago."

Another interview: "I hope there is nothing against me that I should be arrested or anything like that. I had a home till my father died. I was supposed to be married on the first of February. I don't know where he is now—Texas or some place. His name was K. S. Well, if I'm not crazy, I'm near crazy, believe me. We had a misunderstanding before he left. He threatened me so much. He told me if I ever married another man he would kill me and all that. He has an awful fiery disposition and I don't know what he would do. (Questioned again). Well, I don't know where I was. I don't know where I stayed. It is impossible to be doped because I never drink. I never touched a drop of liquor in my life. Well, I hope I ain't crazy."

She gave a description of the high school at Des Moines. Said it was part grammar and part high school, which often is the case in smaller towns. Described the seals on the rocks at San Francisco. Told of an obstetrical case, which was the only case of nursing she had had since in Chicago. Said she had had one year of training in a hospital in Cincinnati and one year in Cheyenne—and so on.

The story given to the protective agency was quite convincing until they had gone over to the hospital to have the alleged brother buried. Then it was found there never was such a fellow there. Much medical detail was elaborated by the girl, and she wept on a lady's shoulder as she told the story and went willingly with them to the hospital.

Psychological: Girl is pleasant and apparently frank. Emotions show most normal relationship to what she asserts. Good and remarkably vivid language.

Tests: (1) 1' 10"—no repetition of error on triangles; (2) 1' 8"—5 errors; (3) 18"—11 moves, 2 errors; (4) 40"—16 moves; (5) 35"—1 error before learned combination; (6) full functional account, no suggestions accepted; (7) a OK. first trial, b OK. second trial; (8) no errors; (9) OK. first trial; (10) OK. first trial; (12) 17 items. Approximate verbal accuracy; (13) 12 items. Approximate verbal accuracy; (14) OK. third trial; (15) average time, 6"—1 error; (16) 92 taps in 30"—1 error first trial; 94 taps in 30"—no errors, second trial; (17) normal; (18) OK., sixth grade, interest; (22) reads much—loves stories, Alger. Contemporary history and geography items accurate. Scientific items nil.

After a number of days the girl's family was found by expert detective work. Up to the moment her mother entered the room, the girl denied her existence. She was asked, "what would you say if I told you your mother was just outside the door?" Answer: "I should say she would have to rise out of her grave to do it."

From her family and several different sources the following information was obtained. She has good home, was never outside of Chicago, never studied nursing, no army connections. Developmental history quite negative except that at two years of age she was seriously sick, "spinal meningitis," etc., few convulsions then. She was born with instruments, but so were all the others, and no trouble with them. She is one of four children. During pregnancy the mother was witness to a tragedy on boat, but evidently not greatly upset. This girl de-

veloped well mentally and physically. Operation on eye at 8 years—strabismus—blind in the one eye even then. Menstruation at 13 or 14, normal. Heredity quite negative. School 8th grade, but for long complaint by teachers of lack of attention to her work. "Queer and hysterical" and avoided in consequence by other girls. Not nervous in any ordinary way, is indeed calmer than others of her family. Once wandered for hours after school and told fantastic stories of her experiences—also another time about being chased by a horse, etc. Went to a church quite outside faith of family and was suddenly converted. Soon lost interest, however. Peculiar for a year or two in several ways. Used to be very tidy and neat, but now opposite. Once took money and denied it although it was found among her things. Always addicted to lying. Mother would have to check her up often about it. Some months ago had little quarrel at home with sister and ran away to friend's house for a month. Few months ago, before and after father's death, he had been long ill, she was hysterical and queer, claimed to see his face after he was buried, etc. But no great emotion.

Just lately has been lost to family for about a month, but had written remarkably "housewifely" letters home saying she was married. This was all fiction. For part of the time she was away was staying with different men one, at least, of whom she picked up on the street and with whom she went at once to live. There was not the slightest reason to believe she was ever immoral before.

After truth came out about her family she still lied and lied to them and others and about immaterial details, although told about her own misdemeanors. In explanation of her knowledge about out-of-town places, she says she is a great reader and learned things in that way. Used to enjoy writing compositions about going to places and thought she would like to become a story writer.

Physical: 117 pounds; 5 feet 2 inches; attitude slouchy, untidy; strabismus, one eye practically blind, vision of her other eye imperfectly corrected by her glasses; development about normal; strength good; color good; distinct analgesia over arms and face; palatal reflex diminished; teeth fair condition; expression normal, but not specially prepossessing.

This case might be summarized as follows:

SUMMARY.

Physical Condition. Very well developed. Untidy. Stigmata of hysteria. Loss of pharynx reflex. Strabismus marked. Vision partially corrected. Gonorrhea.

Mental Condition. Native ability good; well informed. Pathological liar. Hysteria.

Delinquency. Extreme sex delinquency, plus excessive lying.

Causative Factors. (1) Developmental condition. (Spinal meningitis at two years. ?)

(2) Mental condition—hysteria (psychosis. ?)

(3) Recent illicit sex experiences.

Outlook. Impossible at home—questionable in institution.

Although each case may be the result of several important causative factors, still the cases very naturally fall into definite groups. The

following are some of the more important ones:

Subnormal. One of the most interesting types that one finds, and one which is very difficult to deal with, in the so-called *subnormal* type. The mentality of these cases in an adult may be roughly estimated as showing no more development than that of a twelve-year old child. There are many varieties of subnormal individuals perhaps not yet classified. We may find a girl of fifteen, who talks very convincingly, who is able to read rapidly and understandingly, but who has been unable to learn arithmetic even after several years of teaching. One rather typical case which I have in mind is a girl who showed marked immoral tendencies, which could not be controlled in any degree by her foster-parents. She had been in an orphan asylum for several years, where she had attended school only part of the time. However, when the results of her formal education were tested it was found that while she could read with ease, and talk well, she could do nothing with arithmetic. It is surprising how common this particular class is; they show the ability of a twelve year old child in most of the tests which are given them, and yet they are unable to cope with arithmetic, sometimes being unable to tell how much 3 plus 4 are, or 4 times 5, or even 2 plus 2. The inability to learn arithmetic is seldom an isolated factor or special defect, but rather an indicator of other deficiencies not so easily computable. Erotic tendencies in this type are common, and the child who is spoken of as "a little dull" or "not very bright," and is consequently thought by the majority of people to be the dupe of evil-minded individuals, is more often an active offender and a menace to the community. There seem to be very few tests which are adequate for the determination of this class. One of the best which we have found is the code test, which may be found among Dr. Healy's tests and among Dr. Goddard's revision of the Binet-Simon tests.³ It seems to us that their inability to learn arithmetic may well explain the foresight which they lack in understanding moral situations, and their lack of comprehension as to where their situations are going to bring them. Every individual who is supposed to come in the realm of normality is like a pair of scales in which emotions and impulses on the one side are balanced by inhibitions on the other, some inhibitions being mental and others physical. Many inhibitions come from an intellectual source, that is, we appreciate the results of certain things which we may be tempted to do, through the realization of the harm they will do others, or by knowing the results to ourselves. If the reasoning power is lacking and the emotions are ordinarily strong, the balance is destroyed, and the emotions run riot, or the individual has not the power to resist, being carried the way of least resistance. Many times it seems as though the emotions are stronger in these individuals than in the normal person, making the lack of balance the more marked.

There is another class of subnormal individual, in which the mind works very slowly, in which all mental processes seem equally retarded; still another where there is special defect in one direction only, corresponding to a lack of ear in music, or to color-blindness. How much the behavior of the individual is influenced by this defect depends largely upon its location.

Another type which may be called subnormal is that which is below twelve years mentally, but nevertheless is able to support himself in the community and does not come under the cases needing institutional care. For this reason, such a case, although a moron, strictly speaking, might not be considered feeble-minded, on account of his mechanical ability, or whatever it was that enabled him to earn his own living; and instead might be classified as subnormal.

The difficult question is what to do with such an individual. Many are capable of supporting themselves, but the majority are unable to keep out of trouble unless closely supervised. They are often unable to concentrate their minds for any length of time, and give a history of from four to a dozen positions in a year. The girls are particularly susceptible to the temptations offered them, and besides not having the power to protect themselves, are often a moral menace to their environment by the active form their tendencies take.

This class presents a long and varied list of delinquencies. The following are a few examples of concrete cases: much unreliability, truancy, staying away at night, sleeping in basements and under stairways, inability to hold positions, general incorrigibility, including such things as breaking windows in a school, lack of cleanliness, irresponsible behavior, such as cutting off children's hair and holding baby out of window by its heels, being many times suspended from school, repeated burglarizing, exhibitionism, and very erotic behavior.

Moron. The second type, known as the *moron*, or high grade feeble-minded individual, corresponds roughly to a mental age between seven and twelve years. This type represents a more pronounced type than the *subnormal*, and there is usually greater difference in the balance of the emotions and inhibitions. The majority of these cases require very close supervision, even though they are frequently able to be very useful. One girl of fifteen, who was able to keep house for her father and four brothers, doing washing and ironing, cleaning and cooking, suddenly tired of it and left. After staying at first with a married sister, and then with a friend, she later proved wholly unable to protect herself, and came to the notice of the court, where she was found to be guilty of several offences, which the fact of her being a high-grade feeble-minded girl readily accounted for.

Imbecile. The imbecile or low-grade feeble-minded individual corresponds to a mental age of between three and seven. Among them we find all sorts of delinquencies. It is a surprise to find

how many of this type are not receiving institutional care, but are at large in the community.

Among the delinquencies of the last two classes may be found the same which are found among the *subnormals*, with possibly greater irresponsibility and more frequent acts of violence.

The different classes of mental deficiency have the usual variety of causes. Heredity is a very important factor, the parents often representing the lowest types of society both mentally and physically; the mother possibly a prostitute and the victim of opium and cocaine; or the father deficient, and continually under the influence of alcohol. Then again we find very unfavorable ante-natal conditions, birth injuries, and illnesses during their development, such as meningitis and encephalitis, leaving a great variety of defective conditions behind.

Epileptic. The epileptics represent perhaps the most varied type of individual there is, and the delinquencies vary as much as the types. In some cases, with difficulty, a history of convulsions in childhood, unaccompanied by fever or intestinal disturbance, is obtained. In other cases, all that can be obtained is that the girl sometimes drops dishes while wiping them, and seems not to hear when reprimanded, standing with eyes fixed. The mentality of these cases is often very characteristic and may be recognized in the way they perform the tests. There is often great irregularity, some tests being done surprisingly well, while others are done very poorly. The difficulty with the epileptic is that much of the time he is able to do good work. He presents one of the most serious problems in criminology, because it is by this class that some of the worst crimes are committed. Yet in many of our states there is no provision made for their care or their treatment.

The following is a classical case⁴ in the Chicago court:—

“A strapping lad who is a terrific problem on account of his frequent commission of offences. At times the poor fellow is full of ambition and shows, indeed, normal ability. He particularly desires to be a professional man, a lawyer. In addition to his school work he has started law studies. And yet, the first time I saw him, he was in such a dazed condition for hours that he hardly knew his own name. He had been involved in a miserable affair which sent a degenerate man to prison for a long sentence. Sometimes he has been found full of vindictive spirit toward even his own relatives. At other times he has displayed much contrition at the offences he has, in his uncontrolled moments, committed.

A terrible train wreck of a west-bound flyer was almost perpetrated, being narrowly averted through the discovery of the obstruction five minutes before the train was due at that point. The wreck was deliberately planned by our would-be lawyer under the spell of one of his whim-controlled states. He knowingly placed some angle irons in the best way to do the work, and then went about in the unfamiliar neighborhood, met some boys and invited them to come down soon and see a train tumble

over. I repeatedly asked him why he did it, and all he could answer, while expressing deep regret, was that somehow he remembered he had just wanted to see what a wreck would look like. A few of his deeds have aged his mother a score of years, and have kept not a few policemen busy. But if met only in his better moments one would scout the possibility of his being the source of so much trouble.”

Among the *epileptics* we have, perhaps, the widest range of delinquencies, and the most serious offences. They are often vicious and wholly incorrigible at home and in school, cruel to children and to animals. They may attempt to commit suicide, make grave sex assaults or be perverts. One of this class was the evasive type of jail-bird; another was a vagrant; another an unmitigated fighter; while another had been forging checks, and was exceedingly destructive.

Hysterical. There is the *hysterical* type. It is sometimes difficult to differentiate these cases from the *epileptics*, especially as many individuals have symptoms of both diseases, and the two may be associated. These individuals may make very serious accusations, on account of which innocent people are arrested and kept in custody for months pending their trial. The testimony which they can give is appalling. The first case cited is a good example.

Among the aberrational cases, there are at least four or five prominent types. Besides the cases of definite psychoses, there are several rather distinct types found.

Neuropathic Personality. First, there is a type of nervous instability or neuropathic personality, which in our opinion is a very important factor in delinquency. There is nothing tangible except rather erratic behavior with lack of normal inhibitions and general nervousness. The condition often follows supposedly cured cases of meningitis, or head injuries. There seems to be in these cases just enough lack of inhibition and balance to make possible and easy many different forms of delinquency. This type, in which we find a large number of individuals with fair educational advantages and good native ability, still has associated with it a long list of serious delinquencies. Besides the usual list of lying, stealing and running away, there are more serious ones, including vicious conduct and rather desperate deeds, such as violent fights while intoxicated and assault with a knife; insulting and aggressive behavior. One boy attempted to hang himself on account of a superstition of his race. They also do not hold positions, and may show general trickiness and untrustworthiness. They may chafe at home discipline, and in consequence run away from home or stay away nights, which rapidly places them in the way of the greatest temptations imaginable, to which only the unusual boy would not succumb.

Psychopathic Constitution. More pronounced than this is the psychopathic constitution,⁵ which

constitutes an important class, and which is extremely difficult to deal with or help. There is always a question of an incipient stage of mental disease, or there may come to light in a suspected case of this kind, an early epilepsy, which at present is showing no other symptom except mental traits, such as cruelty to animals or playmates, and no amenability to authority of any kind.

Constitutional Inferior. There is the constitutional inferior, in whom there is a marked lack of power of endurance. These individuals, while they may have good minds, cannot hold out long in any position, and there are usually found to be physical defects and stigmata, and an inferior general physical condition, which point to the foundation of their difficulties.

There is a very interesting class which presents symptoms of a beginning psychosis. They are frequently associated with the stress of adolescence, and often get their bearings before a definite or permanent psychosis develops. The lack of reasoning power which these cases exhibit is very interesting. This is demonstrated to a certain extent by the so-called 'completion test'. The test consists of a picture with ten holes, in which different objects are inserted as in a picture puzzle. There are also given the child many more pieces to choose from, and he is told to pick out the one making the most sense.

The wild results obtained in this test from aberrational types are amazing. A baby will be put upside down in place of a window, a dog will be suspended in mid air, head downwards, and there may be innumerable impossibilities and incongruities, the reason for which they seem wholly at a loss to give. There is a definite lack of reasoning ability in these cases.

Usually there are many factors in each case which contribute to the whole. One of the commonest of the individual factors is the difference in physical and mental age, or in other words, the premature physical development in an individual in whom there is normal mental development. In a perfectly normal individual puberty may appear before the normal physiological age, and before the mental inhibitions have been developed. This results in a great amount of emotional activity, which is far more than the individual is able to cope with. Many cases of adolescent instability, which subsequently regain their equilibrium, are found to have such an inequality of development as a contributing factor.

No one who has not followed a case of this kind in an individual who perhaps may have more than the usual mental development for her age, but still far from enough to cope with an excessive physical development, can possibly realize the importance of this factor in adolescent delinquencies. These cases are usually able to right themselves if they can be sufficiently guarded until they regain their equilibrium. Thorough understanding of the case, however, and an unlimited amount of patience are necessary to bring them through.

Besides the factor just mentioned, there is a definite type which should be considered at the same time. In this type there is not a temporary incompatibility between the physical and the mental sides, but a permanent one. This may be an inherited characteristic, and represents what is commonly known as a sensual type, with the characteristic stigmata of thick lips and heavy features. In one case of this kind the father was in prison for attacks on young girls. While giving the boy's history, the mother told of evidences of physical stimuli even in infancy. Even while in the Detention Home, he tried to get some of the younger boys into his power. The whole physical development, but particularly sexual development, is marked and the earliest memories of the individual may be of a passionate nature.

Among the "A. type," which is almost a genius class, are found individuals whose mentality is far above their environment. They have an unlimited supply of imagination, energy and courage, with no possibility of expression. They go to moving-picture shows, become imbued with the "Wild West" spirit, and try it out in the heart of the city. A boy of this class may enter open windows for the fun of seeing if he can get in and out again with the family in the next room. Being successful in this, he tries something more daring, which may be stealing an automobile, or leading his gang into the systematized robbery of a fruit stand or candy store. Unless the cause is discovered, and his energy directed into the right channel, it may direct itself into another channel. Thus, a too bright boy, with no healthy interests, is likely to be as unstable and as much a problem as a dull one. The great difference, however, lies in the difference of the prognosis, provided the diagnosis is made and proper treatment instituted. Often in these cases the home training has been only repressive, and there has been no understanding of the individual's needs. Again there may be instances of horror or of mortification in their lives, which have been repressed and which no one has understood or has been able to weed out. In one case, a child of four set the house on fire, causing the death of his mother. His father confessed that his feelings toward the boy could never be the same after this tragedy. The boy grew up with this horror constantly before him. Again, a boy who had been brought up by his grandparents, suddenly discovered that the girl whom he supposed to be his sister was his mother. This, of course, gave rise to all kinds of imaginings and distrust. A similar condition may be caused by the discovery of illegitimacy.

Perhaps one of the commonest causes of delinquency is bad environment, which includes two large factors,—home environment and companions. Such factors, joined with poor innate qualities, present a very unfavorable prognosis. Many boys live in a community where every boy takes pride in robbing fruit-stands or indulging in immorality. The gang is an important factor, and

often, with a single evil-minded boy as a leader, is a great menace. Sometimes the home seems wholly to blame; there may be alcoholic parents, or the boy may have been taught to lie and steal from early childhood. Often his mother supports herself and her family by taking lodgers of no good sort, and the boy has never known anything but immorality. In cases such as these, the ingenuity of the probation officer and judge and examiner is taxed to the utmost, because even if they can be removed from their environment temporarily, it is difficult to remove them permanently.

The following cases represent some of the worst environmental and developmental conditions:—

CASE 1. A girl of nine years who was an illegitimate child was brought in for running away and being found terrifically intoxicated, and for being a sex delinquent. She bore evidences of congenital syphilis. Her mother was a colored woman who had been insane, and who was the lowest kind of a prostitute. Her father, probably syphilitic, was an Irishman, and alcoholic. She had associated with men who made her intoxicated, and one of whom had assaulted her. Even with "E mentality" (native ability distinctly good but formal educational advantages poor, according to classification), what could possibly be expected of a girl with this history?

CASE 2. A boy of 15 was brought in for stealing watches and diamond rings, for being abusive at school, and for throwing a knife at his mother. He was the typical sneak-thief type. The father was alcoholic and had been arrested many times for drinking and fighting. The mother who did washing was scatter-brained and careless. The boy was an irresponsible type, but showed a wonderful deftness with his hands. He easily fell into the clutches of a woman who induced him to steal, and who then acted as fence and disposed of what he had stolen. He was graded as "C" mentality, (native ability fair and formal educational advantages fair or good—but very poorly informed), but had this frightful environment to contend with.

CASE 3. One boy was rescued from a dive where he had been fed with beer and whiskey, his father a bad character, his mother a sporting woman. His delinquencies were truancy, lying and stealing. Among other mental peculiarities he was found to have poor moral comprehension. Could one have expected anything else?

Sometimes the delinquency and even the deficient mentality may be the result of poor physical condition. In such cases it is unfair to make a mental diagnosis until the child has been given good medical care, and his physical condition has been improved.

There is an interesting group of cases presenting a field for further study, which is still well worth mentioning. In this group is found a definite repression of certain impulses in one direc-

tion which results in their expression in another. Thus in many cases of stealing where the temptation comes in a wholly inexplicable manner, there is found to be a marked repression of some kind, often of a sexual nature. As one studies the mechanism of the individual's mental processes, it may be found that the mental images which prompt the stealing belong to the repressed complex, and it is not until that complex is brought to light and explained that the secondary manifestations can be righted. This group of cases furnishes material for psychoanalysis and is a study in itself.

These are a few of the distinct types and the more common causative factors. There are many others, of course, and almost as many combinations as there are individuals. Delving into children's confidences bring many things to light which would have been undreamed of in the hurried trial in the court room. Many times children are willing to confess things to one whom they feel to be sympathetic, which their own parents never dreamed of, and many times just the discovery of this key-note is enough to put them on their feet again permanently.

This is simply an outline of the work which has been done in one of our juvenile courts, and which is being started in several other cities.

The study of the cases individually and their classification, is of the greatest importance possible, and such study is recommended for delinquents and criminals of all ages. Still, that such study and diagnosis may bear fruit, it is essential for the community or state to have resources at hand with which to provide proper treatment. Under such resources may be included feeble-minded institutions, sufficiently large to receive all applicants, epileptic colonies, institutions for the treatment of inebriety and drug habits, reform schools, where individuals who are educable may receive training, and penal institutions adequately equipped for the correction of all physical defects.

In providing for the individual study of the delinquent and his appropriate treatment, the community is protecting itself against present delinquents and future criminals. The community is responsible for a large percentage of the crimes now committed, rather than the individuals themselves.

The greatest need at present is the education of the public, and bringing them to a realization of the community's needs and their own responsibility. In order that this may be accomplished, the enthusiastic support and co-operation of the medical profession is needed.

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