

## Punishment from the Viewpoint of Psychiatry

Robert P. Odenwald

Follow this and additional works at: <https://scholarship.law.stjohns.edu/tcl>



Part of the [Mental and Social Health Commons](#), and the [Psychology Commons](#)

---

This Symposium Article is brought to you for free and open access by the Journals at St. John's Law Scholarship Repository. It has been accepted for inclusion in The Catholic Lawyer by an authorized editor of St. John's Law Scholarship Repository. For more information, please contact [selbyc@stjohns.edu](mailto:selbyc@stjohns.edu).

# PUNISHMENT FROM THE VIEWPOINT OF PSYCHIATRY

ROBERT P. ODENWALD\*

TO WRITE ABOUT PUNISHMENT FROM A PSYCHIATRIC POINT of view is actually a paradox, since psychiatrists in their capacity as physicians have an objective totally alien to punishment. Their aim is to cure, not to punish. A medical doctor does not think of punishing the person who has syphilis, even though the disease may have been acquired in an illicit manner. The doctor's business is to cure him. In the treatment of contagious disease, the smallpox patient, for example, will be isolated, even against his will. But this is not by any means a punishment, and it is not degrading; it is a necessary step to avoid the spread of the disease to other people. In other words, the concern is to protect society.

A person who is mentally ill may have to be institutionalized against his will when he might constitute a danger to society, or to himself. The decision as to whether or not he is such a menace lies in the hands of the physician specifically trained to deal with such matters — the psychiatrist. But the consigning of a person to a mental institution is not a punishment and must not be considered such, even though, unfortunately, it may be looked upon as degrading and humiliating.

The theory of punishment popularly accepted in our society is that the wrong-doer is punished: 1) to reform or rehabilitate him; 2) to protect society; and 3) for the purpose of deterring the person involved or others from engaging in similar criminal activity.

The first element of this theory is tested by the question, does punishment in the form of confinement really help criminals to reform or to be

---

\*M.D. (1923), Frankfort University. Former director, Child Center, Catholic University.

rehabilitated? Do they come out of confinement after serving their terms as better persons? It is indeed doubtful whether this purpose is ever achieved. Academic students of the subject as well as those who work actively in penal institutions — reformatories, jails, prisons — know only too well that criminals, in general, are often more dangerous for society toward the end of their terms than they were at the start.

As regards the protection of society, I am ready to admit that society is entitled to live in peace and tranquility and to be protected from those who have committed asocial or antisocial acts, and who are likely to do so again. But, in my view, society receives better protection if the criminal is confined where he can receive treatment leading to the improvement or cure of the condition or state that helped to make him an offender in the first place.

As for the element of deterring the evil-doers themselves or others, through the punishment that society inflicts, from committing the same or even worse offenses, let us look at the facts. Statistics show that two-thirds of all those confined in penal institutions are repeaters and chronic offenders. And one needs but put the question as to whether crime is dying out — to have the answer.

In summary, then, we have statistical evidence to prove that our present-day forms of punishment for crime simply do not achieve the purposes for which they ostensibly exist. Such punishments were never effective for the purpose of rehabilitation. Punishment of criminals has been, in essence, a kind of revenge on the part of society, a getting-even with the criminal for his criminal acts, a demand by society that the criminal should pay back to society what

society considers to be a debt that he owes to society. Here, once again, we come upon a paradox in the relation of the psychiatrist to punishment, for the psychiatrist, to be worthy of his name, has not the least interest in accomplishing revenge. His concern, and his only concern, is to deal, preventively, diagnostically and remedially, with the behavior of human beings which reflects any malfunction of their mental or emotional life.

Let me explain in brief just what the function of the psychiatrist is. Psychiatry is that branch of the science of medicine and of the art of healing which focuses on the nature and treatment of mental and emotional disturbances. These cover a wide range, from full-fledged psychoses which require confinement, even perhaps permanent institutionalization, to the lesser disorders of the mind, the psychoneuroses, which make up the majority of the cases usually treated by the private medical practitioner in his office. The objective of these physicians is to heal an upset or distracted mind, or to help the patient over a particularly trying emotional experience which has caused psychic or even physical disorders. Contrary to erroneous but popular belief, there is nothing magical or mysterious about such a procedure. It is an endeavor as old as the human race. It can be exemplified by the picture of a loving father holding close and comforting his sobbing child.

Historically, psychiatrists have been called upon to give testimony in a court of law, regarding the state of mental health and the legal responsibility of a person charged with a crime. Unfortunately, in the course of such legal proceedings, the exhibit offered by the psychiatrist is often looked upon as an intrusion. The hostility at times displayed toward the psychiatrist

in the courtroom, is difficult to understand. It would almost appear as though psychiatry or the psychiatrist were opposed to the law. This is by no means the case. Then, why does the prosecutor so often regard the psychiatrist, not as a loyal co-worker in the cause of justice, but as an intruder? No reputable psychiatrist goes on the witness stand to interfere with the law. What he does is to give his professional opinion as to the mental health or illness of the individual involved, without regard to the crime committed.

It has to be admitted that the legal profession, in common with the general public, is still largely suspicious of psychiatry. This is unfortunate, but it is a fact to be reckoned with, for the time being at least. It is a truism that emotions are still more powerful than pure intelligence, and the age-old desire for revenge on the part of society still holds sway over vast sections of the population. That, perhaps, explains why the role of the psychiatrist in legal matters is still regarded with fear and even with abhorrence. People are afraid that the psychiatrist will prevent the wrong-doer from paying what they consider his debt to society. In other words, they fear they may be robbed of their revenge, which — whether they admit it or not — is sweet.

That is why the atmosphere in court between the psychiatric expert and the prosecutor or defense counsel is frequently unfriendly, to put it mildly. If the psychiatrist testifies for the prosecution, he is looked upon as a "hireling" of the state; if he testifies for the defense, his role is regarded as though he were, for pay, trying to help the criminal escape his just punishment to the detriment of society. Under the circumstances, it is not surprising, then, that many an outstanding psychiatrist refuses to give testimony in court as an expert

witness because he feels that the existing hostility between the psychiatrist and the legal profession precludes his testimony's receiving the objective hearing it deserves. In this connection I recall an experience of my own, where the prosecutor, after my direct testimony, asked no further questions to ascertain further facts that might be relevant. Instead, in a disparaging tone he inquired how much I had been paid to give the testimony I had given, where my office was located, how much I charged for psychiatric consultation, and how many patients I saw in a day. In other words, by emphasizing only the possible material motives for giving testimony, he was casting an illogical doubt on the value of the professional opinion expressed.

The truth of the matter is that no psychiatrist is against the law, no psychiatrist condones the commission of a crime. His whole point of view is different: he evaluates the person before the bar of justice; he does not evaluate the fact that has been committed. It is farthest from his mind to argue with the judge as to the various schools of psychiatry which unquestionably do exist, or as to the various viewpoints they represent. His function is to make clear to the judge and the jury what is the psychic makeup and condition of the person who is being tried, what made him into that kind of person, what steps should be taken, or avoided, by society to help make him into a person free of psychic handicaps which might lead him into further asocial or antisocial acts — all this to the end that society and the individual himself may be protected. This it is not always easy to do — but that does not mean that every effort should not be made to do it.

It is fallaciously but, again, popularly assumed that a similar degree of under-

standing and malice is expressed in every act which meets Webster's superficial definition of a crime, "Conduct violating the law." Around the small hard core of conduct which so directly and obviously imperils humanity that its malice is quite clear to any sane person tempted to pursue it, the law of man has clustered vast numbers of acts which imperil social values to a degree, or in a way, not easily perceived by the psychologically immature or handicapped person. Among these acts, what is a crime today may not be a crime tomorrow; what is a crime in one section of the country may not be a crime in another. What is a crime differs from country to country; even from state to state. What is unlawful depends on the type of society involved; thus, in the early days of the Great West, where distances were great and a man's horse was his sole means of transportation, horse stealing was a very severe crime. Who would think of horse theft as a serious crime today?

Even a very young child knows the connection between wrong-doing and punishment as do, some say, domesticated animals. In my view, it would be a mistake to dispense with punishment completely in a child's up-bringing. Punishment is as old as mankind — in the very first book of the Bible, God punished Adam and Eve by driving them from the Garden of Eden. Punishment appears to be as old as mankind, and the idea of atonement for wrong-doing apparently has always been present.

But if there is to be punishment, it must be both appropriate and just. A child should not be punished for doing what he did not know was wrong; there should be no punishment for his first offense. Punishment is logical only where there is a consciousness of guilt. I would be prepared to say that, in early childhood, instruction

and guidance should take the place of punishment in most, if not in all cases. A child must learn *why* he deserves the punishment he may be receiving. In this connection, of course, we cannot expect a young child to have the respect for the rights of property which, as I need not emphasize to this particular audience, is part of the mental make-up of every healthy-minded adult.

For the adult wrong-doer, too, punishment should be made both understandable and just. The evil-doer will completely lose faith in justice if he does not understand why he should be and is punished, and the justice of the particular punishment.

We hear today of the need to control crime. How is this to be done? A long-accepted notion is that of punishment, and many honestly believe that punishment will, at one and the same time, correct those guilty of wrong-doing, warn others not to commit such wrong-doing, and protect society. Opposed to this is the idea contributed by psychiatry that the wrong-doer is to be studied and understood, and that where indicated, he is to be given psychiatric treatment. In theory and practice punishment and treatment are now frequently used simultaneously.

We have spoken of the psychiatrist in court. Let us turn next to the psychiatrist who functions in the penal institution. This is somewhat of a new undertaking, but in my opinion, has already so well proved its worth that I consider it unfortunate that there are not more psychiatrists in such places. Yet, here again, the prison official and the psychiatrist appear to interfere with the efficiency of each other. Wrong-doers are sent into confinement both as punishment and as a protection to society, and then we make the attempt, while they are being punished by loss of freedom, to

reform them by educational, religious, social work and psychiatric methods. Let us hope that with the use of these newer professional workers and new techniques, the notion that punishment alone is the remedy of crime, is losing ground.

Basic to any discussion of punishment is an understanding of what is right, and what is wrong. This distinction the young child must learn, and teaching it to him is one of the most fundamental functions of parents or guardians.

The infant comes into an already existing world possessing a definite pattern of culture, and a group of persons, parents especially, who influence the child as to what paths to follow.

The newborn infant is the most helpless of all creatures, and at first everything must be done for him. Instinctively, all he knows is how to eat and to sleep and to cry out when he is in pain or discomfort. As yet, he has no knowledge of his own person or of the world around him. Very soon, however, he begins to notice the world around him, to recognize persons and objects in his environment. Before long he notices that he is not alone. Of course he is not yet able to understand the relation between him and this outside world, or how he fits into it. When, for example, he is nursed at the breast, he imagines that this breast belongs to him and that his mother is a part of him.

It generally does not take long for a child to discover that when he cries, he gets attention. This achievement is valued, and soon he begins to manipulate his environment, demanding the service of others. Then he finds that his environment contains people who are not all the same; he senses differences in those around him as well as in their relationship to him and to one another. The most important influ-

ences on him, the dominating figures around him, are, generally, his parents, but not necessarily so. This new little individual then autocratically proceeds to command his environment. He may hold his breath, refuse to eat (the hunger strike aped by adults), indulge in temper tantrums, to obtain what he wants. His whole future personality depends on his own strength and on whether his handling of his environment has been successful or not. What we call the "personality-environment struggle," thus begun in earliest childhood, continues all through the life of the individual.

Of course, the young child still has no clear concept of "yours" and "mine." Whatever he sees, he wants, whether it is the hot radiator, the electric light switch, or a toy belonging to some other child. This is where first punishment begins, for the parent feels that the child must learn that everything he wants he cannot have.

But think of the amount of confusion and misunderstanding that this must bring about in the mind of the young child. For example, the first time he grabs hold of his rattle or a toy, his parents are delighted; everyone in his environment is pleased with his prowess. But when he takes hold of a valuable vase, let us say — everyone is outraged, and the child is punished. How is the young child to understand the difference?

Later, let us say, the child takes his first step. Parents are jubilant and proud. But when Sonny walks out the front door into the street — instead of pride and joy, there is a spanking. Here is punishment which the child at first cannot understand. But as he gets older, he learns that many things are forbidden. Too often it is beyond his comprehension to know just what will

result in praise and love, and what in disapproval and punishment.

The child grows up, and learns what is right and what is wrong in his particular environment. He is learning from those around him how to behave in the society in which he finds himself. But soon he learns that he is punished for wrong-doing only when he is caught. Let us come back to this later when we come to the subject of juvenile delinquency.

Today we know that no child is born "bad." Nor do we any longer accept the notion that because he is born "bad," he must be punished to make him fit into the "good" world. When a child falls into evil ways, it is either due to inherent physical or mental defects with which he was born (which will not occupy us further in this article), or because he had improper training, or because he had an improper environment, or because he was exposed to bad examples. It is because no adequate effort was made to check his early behavior tendencies which, in most cases, grew out of a child's natural and healthy instinct to see, to explore and investigate, to learn for himself.

Give a child the advantage of love and understanding, and the chances are good that he will respond readily. What we call "delinquency" is basically a revolt against the figure of authority, whether this be the parent, the teacher, or society as a whole. Not that authoritative guidance is not essential for successful training. It is, and obedience on the part of the child is basically necessary. With a secure place within the family, with love and understanding surrounding him, the child soon learns to accept obedience. He has the experience that it leads to approval and love from those surrounding him — in other words, he finds "it works."

I cannot help repeating that no child is born "bad." If he grows up to disobey the law, and later becomes a wrong-doer against whom society feels that it must protect itself, he must have experienced such wrong-doing or been "taught" it somewhere. Perhaps he may see a bill collector at the door, to whom mother reports that father is not at home, while father is actually sitting reading comfortably in his easy chair by the lamp. Or the child is told to say he is only twelve, an age that entitles him to a half-price admission at the swimming pool or trip on the train, although actually he has passed his thirteenth birthday. Or he may see his father, driving the family car, pass a red light or go way over the speed limit, especially when no policeman is in sight. Perhaps the boy's father is seen drinking to excess and behaving in a way that is noisy and rowdy, or the girl sees her mother overdressed in a way that is unbecoming to her age and position. Things of this sort are apt to make a deep impression on a child or a teen-ager, and may lay the groundwork for later disregard of the law, or even of criminal activity. Children observe all too easily that you don't actually have to obey the law; you merely have to see to it that you do not get caught.

Cheating at school seems to fall within this same category. Not only is it frequently not even frowned at; in many circles it is actually esteemed, so long as you do not get caught. The recent much-publicized disclosures on the rigging of TV quiz shows and "ghosted" college theses indicate the need for fortifying and strengthening the moral basis for behavior in our children and youth, not to speak of adults. This is of course not to imply that all people are crooked. But we must face the fact that the ethics of our society are deteriorating

when the emphasis falls on "getting by" instead of on behaving in an ethical, moral way.

The stealing of a nickel or a dime by a child may be lightly treated by parents and society, but the theft of \$100 becomes a juvenile delinquency, about which there is much talk and writing at this time. I do not wish to deny its existence, or to underestimate its impact on society, or society's impact on it. What I do maintain is that much delinquency, if it is recognized early and adequately treated, whether by the psychologist, the psychiatric social worker, or the psychiatrist, can be cured. Let us bear in mind that adolescence is the age of delinquency par excellence, the period of anti-social acts, major or minor. Most youngsters and teenagers live through this daring age, when running away from a cop is exciting fun, without any serious implications. They may desire to steal for the thrill, perhaps an apple from the fruit stand, or a trinket, or a little cash from parents or friends. But for the most part, the teenager steals because he feels that his parents have denied him something he particularly desires, for no "good reason." As a young teenager, he may not be held responsible; punishment for his wrongdoing may be left to the parents. However, if the offense is more serious or the parents inadequate, society "punishes" the adolescent by sending him to a reformatory.

I have already pointed out that any lasting reform from such a "reformatory," is more than doubtful. More likely it is that the boy will be discharged even worse than he was before; in the institution, his environment may have consisted of seasoned criminally-minded juveniles who served as leaders. It is of significance that while many delinquents do come from the broken homes and blighted neighborhoods

which figure so importantly in the lurid writing on the subject, many also come from what are considered good and cultured homes. Whether the family is rich or poor, of high or low education, we can be almost certain that there is to be found in the family, tension, discord, or abnormality of one sort or another. There may be a great diversity and variety of contributing factors: parents may be too lenient; they may be too severe; they may treat offenses too lightly; perhaps they are of the nagging type. But I repeat, if recognized early enough, and treated with suitable techniques, juvenile delinquency is subject to cure. In my experience of lecturing to boys in a reformatory home, on such subjects as psychology, or psychiatry, or on religion from the layman's point of view, I have been tremendously impressed by the willing and intelligent acceptance of such lectures, by the keen attention which the audience paid, and by the many sensible questions the youngsters asked when the meeting was thrown open to questions.

The classification of wrong-doers is one of the important functions of psychiatrists attached to the courts. Viewed from the basis of mental health or illness, criminals are classified into four groups: 1) the psychotic; 2) the psychopathic; 3) the psychoneurotic, and 4) the so-called "normal" criminal. What should be done with them depends on the group to which they belong.

About the *psychotic* wrong-doer, there is not much to say. He is seriously ill, and requires incarceration, not in a prison for a specific term, but in an institution for psychiatric treatment as long as this is indicated. The prognosis, of course, is often doubtful. Such a psychotic may be influenced by "voices" which he heard bidding him to commit a criminal act. He may be a



schizophrenic, a manic depressive, or he may be suffering from brain injuries.

The *psychopathic* group is probably the one most difficult to understand. The question has even been raised whether this group properly belongs in the category of mental disease. It is a group not easy to define, and such various terms have been used to designate the conditions as: moral insanity, psychopathic inferiority, or sociopathy. According to Benjamin Rush, often looked on as the father of American psychiatry, it is "derangement of the will."

The behavior of the psychopath at times resembles the behavior of psychotics. Impulsive and irresponsible, he lacks control over his emotions, and proves both inadequate and unstable in his adjustments, educational, occupational, marital, or social. This inadequacy and instability may be evidenced by a quarrelsome aggressiveness towards others, by pathological lying, or by a general rebellion against society and what it demands of him. The psychopath may forge checks, indulge in sexual perversions, or use alcohol to excess. He is never able to give a satisfactory explanation for his erratic behavior. Without realizing it, the psychopath is in a constant struggle against his environment, much as a trapped animal struggles to escape from the cage or trap that confines him. In this connection we recall what has been said about the "personality-environment struggle" when the individual was still an infant.

Often psychopaths turn up among the frequenters of Skid Row — the tramps, the alcoholics, the drug addicts, the prostitutes, the fanatics, and the quacks — but they are also to be found among scholars, artists, and such idealists as conscientious objectors and leaders of religious sects. They always exhibit some form of asocial or antisocial activity. For this reason, the

layman or even the legal practitioner is apt to sum up his impression of one of them by such a time-honored expression as: "That fellow ought to be in jail!" Yet this is often far from the truth. Considering the many evidences of psychic deviation that this group of psychopaths reveals, on second thought it will be realized that jail is *not* the proper place for him. Such people belong in mental institutions, under psychiatric treatment and care.

*Psychoneurotics* may suffer from maladjustments, anxieties, shyness, phobias, compulsions, or obsessions. Their condition may bring on such functional disorders as disturbances of vision, speech, or hearing, respiratory ailments, stomach and intestinal disorders, convulsions. Kleptomaniacs and pyromaniacs fall within this group.

Sexual offenders are a special class of wrong-doers among psychoneurotics, who owe their criminality to a specific kind of personality. It is well known that a sexual offender may get a jail term of six months for his sexual wrong-doing, and that that will not prevent him from committing the same or a similar crime later on; more and more judges are today asking that minor sex offenders, such as exhibitionists and homosexuals, on a first offense, should undergo psychiatric treatment instead of being sentenced to jail.

According to the head of the Federal Bureau of Investigation, sex offenders are increasing. Many of those who commit serious sex crimes are very sick people, whom the layman may well regard as "degenerates." With no control over their strong sexual impulses, these sexual psychopaths commit the same serious crime time and time again if they are let loose in society. Society, in punishing such sex criminals with jail sentences, after which

it releases them, with every likelihood of their repeating the offense, is admitting its failure to understand the drives behind the personality and actions of these people. Often, but not often enough, judges order psychiatric treatment for these victims of their own impulses who, by their actions, show no regard for their victims.

In this class of psychoneurotics belong also the alcoholics, people who, in my opinion, are mentally sick. Yet the law, in classifying intoxication as a legal offense, has, to a certain extent, removed the alcoholic from treatment by the physician.

In the District of Columbia metropolitan area (in which I reside and practice), it is estimated that there are approximately 25,000 chronic alcoholics, of whom 600 are chronic drunkenness offenders. In the single month of August 1958, there were 4,301 arrests for public intoxication; in September 1958, over two-thirds of the 2,226 prisoners in the District jail and 80 per cent of the 1,412 confined at Occoquan, were chronic alcoholics. Some of these chronic offenders have made the same cycle from fifty to 100 times: drunk, arrested, convicted, confined, released; drunk, arrested, convicted, confined, released. A single individual has been arrested for alcoholism over 250 times, and it is estimated that he alone has cost the District over \$47,000. Such a senseless method of processing these cases through police department, courts, and jails is, it goes without saying, a tremendous financial burden on our community. Even worse is its ineffectiveness in curing the individuals involved, or in reducing the size of the problem. As a matter of fact, the problem increases from month to month.

If these individuals were treated not as criminals but as the sick people that they

actually are, great benefits would accrue to them as well as to the community as a whole.

Of most interest, however, is that vast army of wrong-doers who do not fit into any of the above-mentioned groups — they cannot be considered psychotic, psychopathic, or psychoneurotic.

If we examine into the past history of any one of these wrong-doers, we are apt to come upon hereditary factors which point only to the individual's capacity to commit a lawless act under certain circumstances. Today hereditary factors are regarded as being of minor importance in the causation of crime. It would appear that the environment is of far greater importance. Thus, we find bad childhood influences, disturbed family conditions, broken homes, drunken parents, immoral behavior, parents who emotionally reject their children although they may not go as far as sending their children to foster homes or institutions, as some do. Generally, although not always, there is a poor economic background; in the immediate background there may be prostitutes, gamblers, professional criminals and underworld figures of one sort and another. Such children run wild, without adequate supervision, and with no suitable examples to follow. Perhaps at an early age they were exposed to constantly fighting parents; perhaps they witnessed sex relations and even sex perversions. Without fear of contradiction, we can conclude that something was wrong in the upbringing of these children, in their education, in their maturation. For a boy with a strong sense of inferiority, perhaps in conjunction with abnormal psychosexual development, a gun will often be a symbol of the strong aggressiveness and masculinity that he feels he lacks. Such an indi-

vidual is not to be looked upon as insane; on the other hand, he cannot be regarded as sane and normal. He belongs in that borderline group for whom psychiatric treatment and care are indicated, for they offer the best possibility of improvement or even cure.

In its legal aspect, the crux of the question of punishment is a person's responsibility for what he has done. That is why the psychiatrist in court is generally asked to give his expert judgment as to whether the man before the bar is responsible for his deeds or not. If the man is responsible, it seems logical, and perhaps just, that he should be punished. But is a sick person responsible? In the Middle Ages, many psychotic persons were burned at the stake as witches. We no longer hold psychotics responsible for their crimes; we regard them as insane and incarcerate them accordingly. However, today, many mentally and emotionally sick persons — men, women and children — are punished by confinement in penal institutions.

For the legal profession, then, the significant question is whether a wrong-doer is really a sick person or not. Only a psychiatrist, well trained and experienced in the intricacies of his profession, can answer that question. And if the criminal is sick, we must ask ourselves, to whom is to be entrusted the treatment with the best chance of leading to improvement and possible cure? I understand the part to be played by the prison authorities, by the prison educator, the prison social worker and the prison occupational therapist, but I am convinced that the bulk of responsibility rests with the psychiatrist — at first,

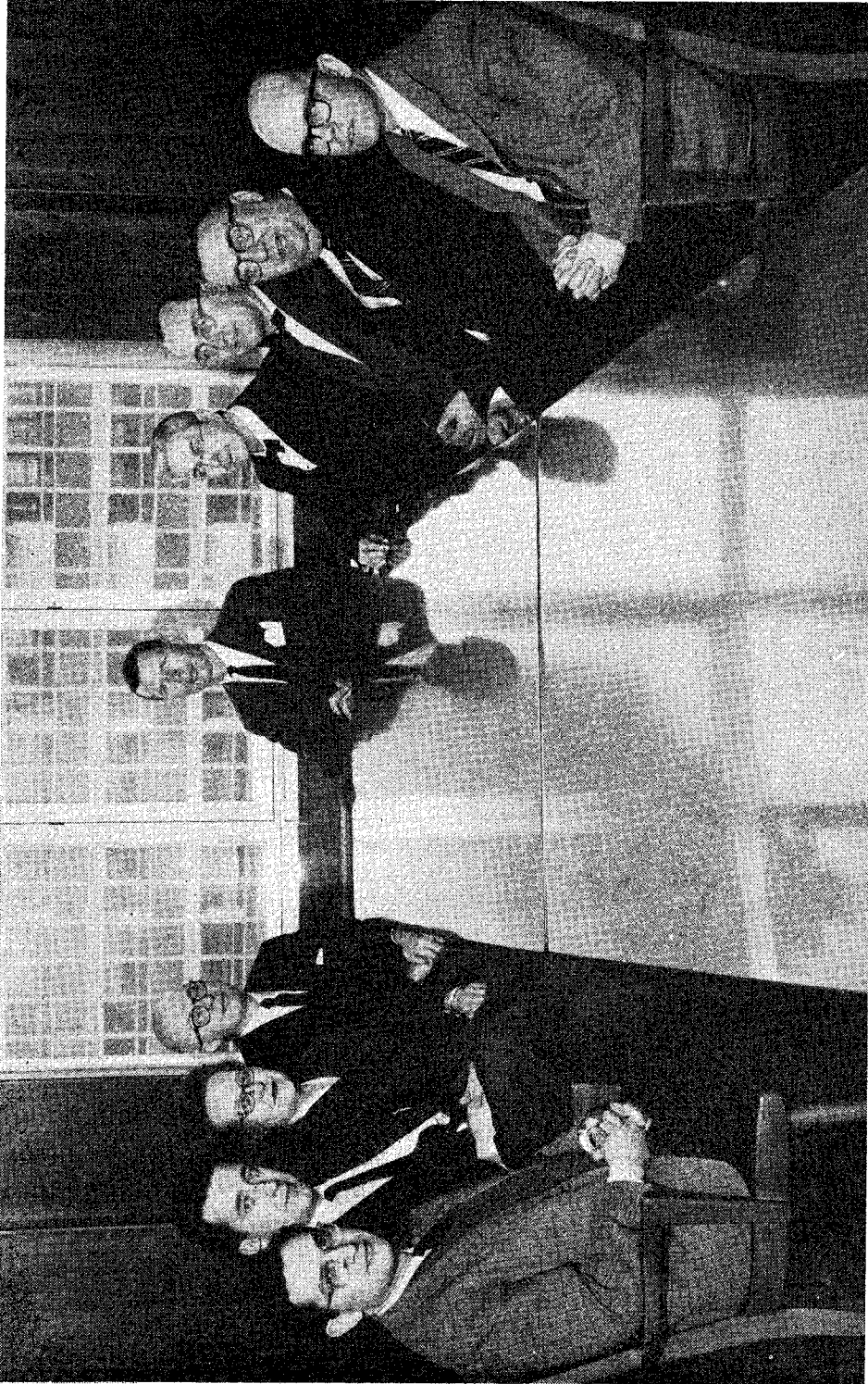
in court, later in the institution to which the wrong-doer is sent.

Instead of the maximum penalty for which a man is today sent to prison, what we ought to have is a minimum period of rehabilitation, with the triple aim of reforming the wrong-doer, protecting society from his further depredations, and fitting him to return to society as a worthy member of it. Rehabilitation should be understood to include psychological evaluation, social work handling, and psychiatric treatment. And, as before mentioned, the time the treatment will take cannot be determined in advance.

The protection of society is indeed a worthy objective. Here is a young first offender, tried, sentenced to jail, let us say for six months. Chances are he comes out, only to return to further wrong-doing. Had the need for psychiatric treatment been understood, he might have been committed to a mental institution on an indefinite basis. Perhaps his treatment would last from 2 to 4 years until he could be regarded as rehabilitated and ready to return to society. Is this not a better way to protect society than to prescribe "punishment" at the end of which, with every likelihood, he will return to commit the same crime, or an even worse one?

I do not by any means wish to imply that the work of psychiatrists with offenders will be a panacea for every criminal. But I am confident it will reduce repetition of crimes by fully one-half or more. I further believe that even greater success would be achieved by psychiatric treatment of juvenile delinquents in the early stages of their delinquency.

---



*Faculty of the School of Law — Daniel L. Rotenberg, John E. Murray, Jr., Elizabeth M. Scheib, Leonard H. Levenson, Dean Thomas F. Quinn, William H. Lacey, Walter A. Rafalco, Joseph A. Sinclitico, Jr., Edward F. C. McGonagle.*