

intensive social service investigations; 2 were given physical examinations only upon order of the presiding judge; 10 either refused examination or were discharged before the psychiatrist could see them; 2 have not yet been examined.

*Diagnoses.*—Sixteen per cent of those examined were found to be actively psychotic and were committed to hospitals for mental diseases. Ten per cent were found to be mentally defective to an extent warranting commitment to an institution for the feeble-minded. An additional 6 per cent were mentally defective (borderline), but not sufficiently low for commitment. It happens that heretofore in the majority of these cases our findings of feeble-mindedness have had necessarily to be disregarded by the Court because of the danger of escape from a hospital for the feeble-minded (such as Dixon or Lincoln), and the offender, if found guilty, sentenced to Pontiac or Joliet. However, since the establishment of an institution for the defective delinquents and the passage of new laws by the State Legislature permitting the commitment of such individuals to the Department of Public Welfare, the defective delinquents, so diagnosed by the Behavior Clinic, are being committed to the Department of Public Welfare at the Joliet Penitentiary and from there are transferred to the proper institution. Our findings obviously expedite matters for the Diagnostic Institute at Joliet, for the psychiatrists there accept our findings without further examination and dispose of the prisoners accordingly.

About 8 per cent of those patients examined were found to be suffering from some mental or nervous disturbance or personality defect (psychopathic personality, drug addiction, neurosis, emotional instability, inebriety, epilepsy, ambulatory automatism), but not sufficiently serious to warrant commitment by the Court to a hospital for mental diseases. In most of the cases treatment has been recommended. The remainder were found to be negative, that is, no evidences of organic or functional nervous or mental disease were ascertained.

*Sources of Referral.*—The cooperation of the Judges and every division of the Criminal Court has not only continued but increased. Despite the change in the judges sitting in the Criminal Court, orders for examination originating directly from the judges has increased. In 1932 approximately 35 per cent of the cases referred to the Behavior Clinic for examination were requested by the judges themselves. In 1933 approximately 50 per cent were requested by the judges. Most of the judges sitting in the Felony Court have referred cases to the Behavior Clinic for examination, and several of the judges from the Boys' Court. A judge of the South Chicago Court referred a boy for examination who was being held in the County Jail awaiting trial in his court. The Public Defender's office has requested examinations in approximately 16 per cent, and the State's Attorney's office about 5 per cent. The public at large seems to have become more aware of the Clinic's service for 10 per cent of the private counsels for defense have referred cases to us as against 5 per cent of last year. Referrals by members of the patient's family, or friends, has shown a slight increase from 3 per cent of last year to 4 per cent of this year. The jail authorities (the Warden, Assistant Warden, and Jail physician) have referred 6 per cent; other social agencies, including the Bureau of Public Welfare, Criminal Court division, Rural Service and Veterans Service divisions, and the Juvenile Court, about 7 per cent; the Adult Probation Department 2 per cent. In one instance a Federal Probation Officer referred a female drug addict for examination; the Parole Officer of Pontiac Reformatory asked for examinations of two boys on parole whom he had incarcerated in the County Jail for the purpose of examination. (In both instances the boys were found to be psychotic.)