PSYCHOLOGICAL SERVICE IN HAWAII

The Work of the University Clinic

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The University of Hawaii Bulletin is issued in each of the following months: November, December, January, February, March, April, May, June, July, and October. Entered as second class matter at Honolulu, Hawaii, under Act of Congress of August 24, 1912.
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By S. D. Porteus
Director, Psychological Clinic
University of Hawaii

Foreword

Because of Hawaii's unique environmental features, all of its problems whether they be administrative, military, industrial, educational, or social, have a somewhat different aspect from those presented in any part of continental America. To the characteristics of isolation, insular division and racial heterogeneity must be ascribed the great complexity of our social situation. We must perforce proceed upon our own lines of development, which means that, where precedent and experience are lacking, foresight, study and experiment must go hand in hand with service.

Fortunately, there has been, among our leaders, this realization of difference, and among the most interesting products of social planning in the Territory is the Psychological Clinic of the University of Hawaii. It too, like other divisions of our general social organization, has its own distinctive features and fulfills functions that are not quite the same as those of any similar clinic on the mainland.

Established by legislative enactment in 1922, it has made an extremely extensive and varied contribution to the cause of social betterment in this community during the past seventeen years. The fact that it has, during its period of operation, dealt with more than 14,000 individuals is sufficient evidence to show how extensive its activities have been. The varied nature of its contacts is evidenced by the fact that in making a statistical analysis of its cases, an operation now in progress, the Clinic found it necessary to divide the data into fourteen different racial groups. Any summary of the actual problems represented by these cases would run the gamut of emotional and intellectual maladjustments. Our files are in themselves a compendium of human perplexities and social enigmas.
Now, at a time when the need and demand for the Clinic's services are more pressing than ever before, the time seems opportune to set forth in some detail its place in the pattern of social effort in Hawaii. This booklet will undertake such a description with particular emphasis on the Clinic's unique width of reference through its relations to almost every public and private welfare agency and institution in the Territory.

Relation to the Educational System

From the very beginning of its work the Clinic has been closely identified with the schools. This association has been of mutual benefit. The mixed racial and social background of the children here necessitated the working out of mental standards especially adapted for use in the Territory, and one of the first projects undertaken in 1922 was the examination of 400 cases of mental retardation in the schools of all the islands. Based on this preliminary work, various mental tests were adapted for use here, and these were then applied to over 650 children in the Honolulu schools. Thanks to the generous assistance of the principals, such schools as Kaulani under Mrs. Fraser, and Kauluwela under Mrs. Creighton were thrown open to our staff for use as experimental laboratories. Among others, Dr. Wist at the old Normal School, Mrs. Bourke at Ewa, Mrs. Chambers at Waialua, and later Mr. Faulkner at Kawananakoa and Mrs. Hendry at Lincoln School gave us considerable help by allowing similar facilities for our research work.

After this period of experimental work the Clinic began its task of examining pupils and advising with teachers and principals, not only in Oahu but on the other islands as well, with regard to special educational and behavior problems. In the past ten years well over 4,000 children have been referred by teachers for examinations at the Clinic, and each child was given special individual attention and reported upon by a member of our staff. Of the 14,000 cases in our files probably about half (approximately 7,000) were pupils in the educational institutions of the Territory. In addition to this work, more than 100 lectures and demonstrations have been given by the director of the Clinic and his staff to groups or associations of teachers. The subject of most of these addresses was some phase of mental hygiene in the classroom.

Special Educational Projects

The Clinic has been actively connected with such special projects as the sight conservation classes and the classes for physically handicapped or crippled. In recent years, 111 cases have been examined for these
classes and for the Territorial School for the Blind. The purpose of these examinations has been to select children for special educational or remedial work. Obviously this effort should be proportionate to the capacities of the children. If in addition to the sensory handicap there is extreme mental dullness, then time, money, and patience are all being wasted on an impossible task.

From time to time mental surveys have also been made of the Opportunity School and the two institutions for non-leprous children of leprous parents—the Girls’ Home at Kapiolani and the Boys’ Home at Kalihi. The Clinic staff has kept in very close touch with the inmates of the last two institutions, not only in their period of residence but during their after-careers. The adjustment of the children of the above-mentioned three institutions to community life constitutes one of the most serious social problems of the Territory.

**High School Activities**

The high schools of the Territory have school counselors who handle many problems connected with discipline, attendance and the scholarship of their pupils. Among these students there are very often many cases of personal maladjustment either in the home or school. In such a school as McKinley, with its huge enrollment, problems in mental hygiene continually crop up. The school counselors of this and other high schools have availed themselves very freely of the Clinic’s resources, and for a time regular case conferences were held at the University, attended not only by the school counselors but, in some cases, by the school principals themselves. In many instances the problems presented were not merely intellectual ones but were due to all kinds of emotional stresses leading to mental and moral confusion.

**Rural and Outer-Island Schools.**

The Territory is to be congratulated on many features of its excellent school system and especially on the organization of its outer-island schools. The most progressive of the supervising principals have always been on the alert to use to the full what assistance the Clinic has to offer.

The length of an outer-island visit varies from a week to a month and the time available is used to the utmost. The amount of work to be done is relative only to the endurance of the worker, and some of the cases presented are, from the standpoint of social adjustment, among the most interesting of our experience. Very often social conditions in rural communities press more heavily on the individual than do
those in the city. It is a mistake to assume that city life imposes greater social strains; very often the country child is more directly and intimately affected by his human environment than the child in town.

In outer-island work it is not uncommon to have a schedule of several addresses and talks to teachers included in a two weeks' visit. The resources of the Clinic are quite inadequate to meet these demands fully and yet the need is recognized to be very great. The best solution would be to add to our staff a visiting psychologist who would do nothing but outer-island work, spending three months on each in rotation. The aims of education in the Territory would certainly be materially advanced by giving as much psychological assistance as possible to the schools on the other islands.

Relation to Courts

The fullest use of the Psychological Clinic has been made by the probation officers of the Juvenile Court, and with the better organization of the Court's work the connection between the two organizations has become increasingly close. In 1928 only eight cases were brought by the Juvenile Court authorities for examination, while in the past three years 731 delinquents have been dealt with. Here again, as in the case of the schools, the extent of the work is limited only by the Clinic's resources. If sufficient staff were available, we could do three times the work already called for. As a matter of fact, the Court could use a psychologist full time.

The work with delinquents is by no means limited to the mental testing. The social background of the individual is taken into account in an endeavor to assess all the unfavorable factors in the child's history. Following our long experience with these cases, we expect shortly to develop a juvenile delinquency index that will help the probation officers and us most materially in picking out the cases which would repay the most intensive social treatment. With the assistance of Mr. Simpson and his staff, we expect to work out a predictive chart that will be of great value in the distribution of individual cases.

Every case is also intervieweby the psychologist with the very definite object of interpreting the social history of the offender. Because we have nothing to do with the correctional side of the work, our interviews often yield a different result from those undertaken in the routine of probation work by the Court's officers. Before a child is sent to either of the industrial schools, very careful consideration is given to his history and personality and his mental make-up, and, as
a result, only those are committed for whom nothing else can be done, either in the way of foster home placement or improved supervision in their own home.

In the past ten years no fewer than 1,232 children have been examined at the Clinic for the Juvenile Court in Honolulu. To these must be added several hundred from the outside islands. Kauai, for example, has an excellently organized juvenile division. The court on Maui has for a number of years made the utmost use of the Clinic's services. Fewer cases have been examined for the courts on Hawaii, where our visits have been less regular.

Though the other courts of the Territory have required a smaller amount of work, approximately 100 cases have been examined and these represent a most interesting series of psychological problems. The director of the Clinic has made special studies of several murderers and has appeared in Court on a number of occasions, testifying as an expert witness for the Territory. In some cases the Governor has requested special reports on prisoners and in other cases the judge concerned has initiated the study and received the report. In the famous Massie-Fortescue case the director of the Clinic acted as advisor to the Territorial prosecutor throughout the proceedings.

The Prison Board

The Psychological Clinic was represented on the Crime Commission which sat in 1928. Under the able chairmanship of Roy A. Vitousek (for some years Speaker of the House of Representatives), the Commission brought in a whole series of recommendations for the improvement of judiciary and penal methods of dealing with crime. It is gratifying to note that almost the whole of these recommendations have been acted upon by the Legislature. Included in the up-to-date social machinery set-up was a Prison Board. Among its responsibilities was the setting of minimum sentences for prisoners, subject to review by the trial judge. This minimum sentence is decided only after a careful study of the prisoner and his record, and to assist in its decisions the Board requested psychological examinations of the inmates of Oahu Prison.

Since the Secretary of the Board, Mr. Joseph Ordenstein, had been successful in setting up a most modern and efficient system of record taking, there was sufficient information available on each prisoner to arrange what we call a Criminal Index, which sums up and weighs all the unfavorable factors such as habits, attitudes, low mentality,
previous juvenile and adult criminal record, work history, and the like.

Though this work was well begun, our restricted examination facilities interfered with the operation of this service. Therefore, in 1936, at the request of the Prison Board, the Legislature approved an addition to our staff of a professional worker to serve as the prison psychologist half time. He not only interviews prisoners but examines them mentally as well. From a low record of 5 prisoners examined in 1931, the number studied at the Prison rose to 195 in 1938 and will continue to rise in the future.

relations to institutions

The responsibility of examining boys and girls committed to the Industrial Schools at Waialae and Kawaiola has already been referred to. This duty belongs by law elsewhere, since the Legislature of 1934 passed a bill stating that before commitment all juveniles must be given a psychiatric examination. As there was no psychiatrist available, the Clinic continued with the work of giving psychological examinations. This was in accord with the intention of the framers of the bill, the change from “psychologist” to “psychiatrist” having been made at the last minute without the knowledge of the representatives of the American Legion, which sponsored the bill. In addition to the examinations given at the request of the probation officers of the Juvenile Court, 280 inmates of the two reform schools have been examined since 1928 at the request of their superintendents.

Waimano Home

The responsibility which is taken most seriously by the Clinic staff is that of mentally diagnosing the feeble-minded. When Waimano Home was first established, a rather haphazard system of committing inmates was followed, with the result that some individuals were institutionalized who were not feeble-minded. The Board of Commissioners, however, soon remedied this situation by recognizing the Psychological Clinic as the sole agency through which mental examinations and commitments were to be made. This rule insured uniform and conservative standards of diagnosis throughout the Territory. Considering the varied racial and social backgrounds of the cases, a cautious policy with regard to segregation of the feeble-minded is most advisable. Standards which apply on the mainland in the diagnoses of mental deficiency are of little value here, and a special interpretation of intelligence quotients is very necessary. For example, the following
of mainland standards would have made 4 per cent or 16,000 of our population feeble-minded—an absurdly high number.

With the limited accommodations available at the Home, the matter of selection of cases for segregation is very important. The social situation, habits and peculiarities of the child, the ability of the parents or the community to provide supervision are also matters which are very carefully considered before a child is committed for permanent custodial care. When parole is to be considered, Dr. Taylor, medical superintendent at the Home, is always very careful to obtain further examinations and recommendations. As part of his system of management, he has adopted the wise principle of seeing that no individual is ever kept at Waimano Home without the fullest justification, including thorough and repeated psychological examinations to check the mental development.

Other Institutions

Our relations with other private and public institutions in the Territory have always been excellent. St. Mary's Mission has made it a point to have all children in its care examined from time to time. The Salvation Army has referred many of its charges, and, in some cases, a survey of all children in a particular home has been carried out. Susannah Wesley Home also has referred a number of individuals for examination. In ten years over 400 cases in semiprivate institutions have been studied by the Clinic. Among government institutions, Kaneohe Hospital is one which has referred a number of cases. St. Anthony's Mission (Catholic) on Maui is another institution for children that has always pursued a farsighted policy of using mental examinations as a basis for planning the scholastic and social futures of its wards.

Public Health Relations

The Board of Health through its doctors and nurses is also responsible for the initiation of mental examinations of many cases. In the past ten years, 270 individuals have been brought to the Clinic through public health nurses, especially on the outer islands. Maui, in particular, through its superintendent of public health nursing and the cooperation of the district court and the head worker of the Alexander House Settlement, has pursued a most advanced policy of locating the mentally defective throughout the whole community, having them examined and committed so that when accommodations at Waimano are provided they will be on the waiting list. If each of the islands were
to pursue the same policy, it might be possible to have a register of all the feeble-minded in the Territory, with information as to where they are and how urgent the cases are for custodial care. We should then know exactly what the problem is and what provision should be made to cope with it.

Incidentally, we may remark that Maui’s well-coordinated social welfare organization, Kauai’s public health and juvenile court work, and Hawaii’s well-supervised school districts provide examples of efficiency that rural communities elsewhere might well take note of. The Clinic staff has had exceptional opportunities for judging these developments and to note the remarkably fine growth that is taking place in all social welfare work outside Honolulu. On the outer islands there is a healthy spirit of rivalry which makes for progress and insures that none of these separate communities will knowingly lag behind in any social development.

**Palama Settlement**

Among the health and recreational organizations of Honolulu, Palama Settlement has always maintained, with the Psychological Clinic, a mutually helpful association. About 150 cases in the last few years have been referred by Palama, and in each there has been a definite and specified problem, in the solution of which the mental examination has been very important. This kind of work is most satisfactory because there is the assurance that any recommendations made by the Clinic staff will be intelligently considered and, if possible, carried out. We have benefited greatly from the work of the doctors at Palama, for in very many cases a medical history has been obtainable, especially on Juvenile Court cases. We have been fortunate in working so closely with such a unique social welfare agency as Palama.

**Tuberculosis and the Mental Health**

While the Tuberculosis Preventorium was active, an excellent liaison existed between it and the Clinic. Dr. Doolittle was instrumental in arranging that all children entering the Preventorium should first be given an examination to determine the extent to which intelligent cooperation on the part of the patient could be expected. This was another economical and effort-saving plan. We have records of over 120 examinations carried out for this purpose.

Leahi Hospital also has referred about 100 patients, principally in relation to the vocational guidance of discharged patients. The medical
authorities there are fully alive to the necessity of combating the institutionalizing effects of prolonged hospitalization and are concerned not only with the medical care but with the social rehabilitation of tubercular patients. Again, the Clinic could have done much more work in this field had our staff been adequate to meet the demands.

Social Service Agencies

The social welfare agency with which we have had the longest association on Oahu is the Social Service Bureau. In the past ten years we have examined 513 cases for this organization, during the administrations of both Miss Bergen and Miss Findley. Of late, the character of the work of this bureau has changed so that the number of referrals has materially lessened. The children's work, for example, has been undertaken in part, by the Children's Service Association, for which we have examined 432 cases in the past three years. The Commission of Public Welfare has now entered the same field, and in consequence we expect, as time goes on, to increase our service for this organization.

The Queen's Hospital Social Service has referred 160 cases to us. Here, again, there is considerable satisfaction in working with an organization that is in a position to make intelligent use of the psychological findings.

The Y. W. C. A., especially the International Institute, has used the Clinic in a fairly large number of cases, the total number approaching 100. Other organizations, such as the Columbus Welfare, the Territorial School for the Deaf and Blind, and the Kalihi Orphanage, are among those which have at various times made use of the Clinic's services.

To give a complete list of all welfare agencies with which we have had contact would be to call the roll of all the foremost institutions and agencies in the Territory.

Queen's Hospital Training School for Nurses

A most interesting relationship has existed for a number of years between the Queen's Hospital Training School for Nurses and the University Clinic. There is a great waste of expense and effort if a student, after completing several years of a nurses' training course, is found to be unsuited for that profession. Dr. Larsen, medical superintendent at Queen's Hospital, became interested some years ago in the problem of selection of students so as to eliminate as far as possible this wastage. He felt that it was far better, both from the standpoint of the students and the school, to eliminate the unpromising candidates at the outset.
To do this an exhaustive battery of tests and scales has been adapted and the choice of students has been put on a much more scientific and certain basis. With the cooperation of the superintendents of the training school, research as to the best procedure in this field of vocational guidance is still being carried on.

Affiliation with the University

A tremendous advantage, and one which should be placed to the credit of those who initiated the idea of the Clinic, was the connection that was established with the University of Hawaii. From its beginning, the Clinic has been under the general oversight of the President and the Board of Regents of the University. Under the administrations of both Dr. A. L. Dean and of Dr. D. L. Crawford the utmost understanding of our purposes and sympathetic treatment in every respect has been accorded to us. There is no doubt that the stability and prestige of the Clinic in the community has been immeasurably increased through this affiliation. We are also fortunate that, in the seventeen years of our operation, the Board of Regents has been under the chairmanship of Mr. Charles R. Hemenway, whose understanding of the social problems of this community has been so full and continuous.

Finances

Until 1930 our funds were voted as a special appropriation, but since that time the Clinic has been regarded as an integral part of the University and financed directly from its funds. This arrangement has been a stabilizing influence in our work.

During the years since 1922 the growth of the Clinic has been gradual and its budget comparatively modest. In relation to the number of cases dealt with, it is much more economically financed than any similar clinic on the mainland. Other than the provision of a worker exclusively for outer-island activities, there is no contemplated expansion of our staff.

Academic Contributions

Obviously, since our debt to the University is so great, we must in our turn represent something of value to the parent institution. Our obligation has been partially discharged in several ways.

In the first place, the Clinic's service can be regarded as a direct contribution by the University to community welfare. In this respect it ranks with the Agricultural Extension Division, the Adult Education
Division, and the various research departments and stations. Through the Clinic and its related agencies, the University is making its contribution to the study of human or social problems, especially those that are concerned with the under-privileged, the subnormal and the abnormal wherever they are to be found. Thus the University's part in the life of our community reaches down into the lowest social strata. Through the activities of the Clinic, the University's influence is widened so as to include not only the training and development of leaders but also the rendering of assistance in all the great community problems with which those leaders must deal. In other words, the University can never be accused of a merely academic interest in social affairs but can rightly claim that it keeps very much in touch with the Territory's most pressing human problems. Hence, it stands at all times ready to use the same scientific approach to the world of human relationships as it fosters in its studies in the more material sphere of crops and other productions.

University Teaching

The second way in which the Clinic may play a useful part within the University is through the teaching of various courses. Because of the pressing demand for actual social service, the Clinic has not attempted to make itself a training center for psychological work. Its staff has, however, given lecture courses each year on some phase of its work. These courses have mainly come under the headings of social psychology, racial psychology, and mental measurements. A future development might be the use of the Clinic as a training ground for school counselors, social workers, etc., by provision for courses in clinical psychology. But that would require a larger staff than is at present available.

Besides this regular University work, non-credit series of lectures have been arranged for extra-mural students. Such lecture series have been given before the public health nurses, the American Association of University Women, the P. T. A. and many other associations and clubs. Thus, indirectly as well as within the University, the Clinic staff has served as an educational medium.

The Clinic and Research

Undoubtedly the real contribution to one of the basic purposes of the University has been in the field of research. A University of high rank must do what it can to earn and maintain a national as well as a
local status. Otherwise, its courses go unrecognized, its degrees are looked down upon, so that interchange of students, credits, and faculty are difficult. There are, of course, many things that give an educational institution national status. The calibre of its teaching faculty is very important, and along with this goes its contributions to research. If that research is of such wide significance that it adds at all significantly to the world's knowledge in any direction, or increases to any noticeable extent the sum of academic or scientific information, then a university may even gain international recognition quite out of proportion to its size and endowment. This is the enviable situation of the University of Hawaii, and to this result the Psychological Clinic has contributed its share.

**Scientific Expeditions**

A good deal of the psychological research undertaken has been in the field of racial psychology, and it is noteworthy that due to those researches other countries have come to our University for help in their racial problems. In 1929 the Australian National Research Council became interested in the problem of the present mental status and the educational and social future of its aborigines. The Council therefore invited the director of the Clinic to carry out field work among the natives. The resultant expeditions to central and northwest Australia served to stimulate further studies by such investigators as Piddington, Fry, and Pulleine among the aborigines of Australia. In 1934, at the instance of the South African Council, the Carnegie Foundation financed a similar expedition to study the Bushmen of the Kalahari Desert, and also Bantu tribes in the African sub-continent. Using the same methods, similar studies were carried out by Stewart in northern Japan, the Philippines, and Malaya, and later on by Vicary among some of the aboriginal tribes of India.

**Publications**

The results of these studies, together with other investigations, have been reported in various books and publications. It is only possible to list here the most important of these and their dates.

*Studies in Mental Deviations*, which appeared in 1922, summarized the results of various researches on feeble-mindedness. *Temperament and Race* (1926) by Porteus and Babcock reported the first racial studies undertaken in Hawaii. *The Matrix of the Mind* by Wood Jones and Porteus (1929) combined the viewpoints of the comparative anatomist
and the psychologist in telling the story of the evolution of the mind and brain. This book was republished in 1930 in England and has been used widely as a text book. Next in order came the publication of The Psychology of a Primitive People in 1931. This was the main selection of the Scientific Book Club for November of that year. It describes the results of the expedition to central and northwest Australia. Then followed, in 1933, a book on mental tests entitled The Maze Test and Mental Differences, dealing chiefly with the diagnosis of mental deficiency. The most recent book was Primitive Intelligence and Environment. Published in 1937, it gives the results of the African expedition. Like The Psychology of a Primitive People, it was a chief selection of the Scientific Book Club. In all, these books contained well over 2,000 printed pages, a not inconsiderable contribution for seventeen years of work.

Notices in reviews are usually to be regarded as an index of the importance of published works. The books listed have been very widely reviewed by scientific magazines, including the best known foreign journals. Altogether these reviews contain as many words as any of the books themselves. Dealing as these studies do with the highly controversial subject of race, it was not to be expected that reviewers would agree unanimously with the conclusions reached. There has, in fact, been considerable cleavage in opinion, but at least there is no danger that our scientific contributions will be neglected or unnoticed. One foreign anthropological journal devoted no less than thirteen pages and 7,000 words to a review and discussion of one of these books.

Dr. Oswald Black, government psychologist of South Africa, who came specially to visit the Psychological Clinic in 1934, published his report to the Carnegie Corporation two years later. In this publication, after commenting on the international reputation of the members of the staff of the Clinic, he says, "Small wonder that the Clinic in Hawaii is a very active organization which accomplishes a great amount of routine work and yet devotes much time to research ... In Hawaii, more contributions have been made to racial psychology than by any other country."

From this evidence it is clear that the University of Hawaii, through the Clinic, has made a widely recognized contribution to research in its field. This statement is made without any desire to overestimate that contribution, but is necessary to justify the Clinic's existence from the scientific as well as from the practical standpoint.
Contributions to Clinical Psychology

Because of the nature of the work here, the experience of the staff of the Clinic has naturally been both full and varied. Probably no other clinic in America has as wide contacts through its varied clientele as has the University Clinic. This is partly because ours is a small community served by one psychological agency, and partly because social welfare work of all kinds is well organized here. In other words, our work must be many-sided because the demands are so various. Naturally, in our experience, we have been compelled to evolve many modifications of the clinical approach, and some of these have been found useful in application elsewhere.

Among these, the Maze test, devised by the director of the Clinic, is now part of the standard equipment of psychological and psychiatric clinics everywhere. A recent study of clinics throughout the United States shows that the Maze ranks second to the Binet-Simon test in point of frequency of use. Among what are called performance tests, it has the distinction of being the one most widely used throughout the world.

Because of our varied clinical experience, the American Book Company has recently concluded a contract with the director and Dr. Hunter of the Clinic staff for the writing of a college textbook on clinical psychology, which, when published, will be one of the well-known "American Psychology Series."

The Clinic and the Community

Quite apart from its regular examination service, teaching, and research, the Clinic staff has kept contact with the community in other ways. Staff members have filled the posts of secretary to the Territorial Conference of Social Work (three times), chairman of the program committee of the same organization (twice), and chairman of the research committee on juvenile delinquency. From time to time they have also served on various civic committees.

Looking towards still greater usefulness in the educational program of Hawaii, we have recently added to our staff a psychologist well-trained in remedial work in the schools, who will act as organizer of programs aimed at helping children with special disabilities, a plan that would add measurably to the efficiency of our educational system by eliminating misfits whose unsatisfactory school experience frequently becomes the starting point for careers of delinquency.
Clinic Methods

In concluding this brief summary of the seventeen years of service of the Clinic, there is one point that needs emphasizing, namely, that mental testing is only a part, and in some cases a small part, of psychological service. There are, of course, many individuals for whom the question of mental deficiency is the chief issue, but even in these cases the problem is not simply an intellectual one. Emotional control and social attitudes are vital considerations. Both mental testing and interview provide the psychologist with special opportunities for observing the emotional state of the individual. When we come to the other problems that confront the psychologist, for example, vocational guidance, the emotional trends and interests of the individual are of utmost importance. Hence, in dealing with these cases, the examiner must avail himself of all the means for exploring personality that are available, such as trait inventories, questionnaires, and the like. Where the problem is one of delinquency or crime, the satisfactions and dissatisfactions that cluster about various life situations must all be considered and balanced against the personal and environmental factors before any advisory measures can be suggested.

The Clinic’s Function

Hawaii, in many respects, has much that other places envy—equable climate, interesting peoples, a quiet atmosphere, unending beauty—but it would be foolish for us to overlook the fact that beneath the surface are social tensions that have elements of complexity unmatched elsewhere. The factor of race alone, with its resultant clash of cultures, may and does lead to a more plentiful crop of social bewilderment, individual frustrations, and disappointment than we realize.

Any organization that can intervene in human problems and can assist individuals to adjust themselves to what must often seem a puzzling and even antagonistic world is worthy of support. Every community needs shock absorbers, and Hawaii, because of the complexity of its problems, needs lubrication at many joints and contact planes of its social structure. Among the agencies that can rightfully claim this function, the Psychological Clinic of the University of Hawaii takes its place. As has so often been mentioned, its usefulness in its own particular field is only limited by its resources. In view of its record, it should be given consideration in any program for the advancement of social and mental hygiene in this Territory.