

but two basic institutional programs—prisons and hospitals. Human beings do not fit into neat compartments.

There are many different types of persons with all gradations between. Surely, there is a need for modes of approach other than those provided by prisons and hospitals as they are now operated in the District of Columbia—something inbetween. In fact, other countries and other jurisdictions in this country have developed some alternatives. The Netherlands, for example, has adopted the basic concept and procedures I have just set forth, and has several different types of facilities to which its guilty may be sent. Some States, for example, Maryland, have special institutions with well-developed security features in which programs are provided for persons involved in unlawful acts who are mentally ill, but who are not out of contact with reality.

I might say parenthetically that many of these patients in mental hospitals are out of contact with reality and therefore require a different type of a program than those who are in touch with reality.

Before turning to the specific provisions of H.R. 7525, let me observe that some of them clearly would be unnecessary were you to accept the concept and its related procedure that I have just discussed, and of which I strongly urge your favorable consideration. Decisions as to blameworthiness contribute little to the solution of the essential questions:

Was an unlawful act committed by the defendant?

If so, what is the proper disposition of him, taking account of the best interests of society and those of the individual involved?

The CHAIRMAN. Under your theory, Doctor, how would you determine degrees of murder?

Dr. CAMERON. Sir?

The CHAIRMAN. Degrees of murder, how would you determine it under your theory?

Dr. CAMERON. It would be irrelevant to me as to whether he—

The CHAIRMAN. In other words it is irrelevant whether he killed a man or did not kill a man?

Dr. CAMERON. If he is grossly psychotic and mentally ill, it is irrelevant whether it is first-, second-, or third-degree murder, unless you are preoccupied with the purpose of pinning a label on him.

What I am suggesting is that instead of being preoccupied with the label, let us let society be more preoccupied with the man and what ought to be done with him.

He has committed a murder. It is unlawful—it is an unlawful act. What should be done with this man?

It is—if it is determined that he is not mentally ill, then go ahead and apply first-, second-, or third-degree murder in any way you can, which is part of the moral judgment involved. But if he is mentally ill, then the question is, What do you do with him? Put him in a hospital? And if so, for how long and where and so on and for what kind of a program?

The fact that it is first-, second-, or third-degree murder contributes little to this solution.

The CHAIRMAN. Thank you.

Dr. CAMERON. I might say parenthetically that in many Federal jurisdictions where the *McNaghten* defense is often used, that many