

# BARTLEY V KREMENS

Authored by  
**mohammad looti**

November 6, 2025

## RECOMMENDED CITATION

mohammad looti (2025). *BARTLEY V KREMENS*. PSYCHOLOGICAL SCALES. Retrieved from <https://scales.arabpsychology.com/?p=66509>

## BARTLEY V KREMENS

**Date(s):** Filed 1974; District Court Decision 1975; U.S. Supreme Court Action 1977

**Location(s):** Eastern District of Pennsylvania; U.S. Supreme Court

### 1. Summary

The case of **Bartley v. Kremens** was a pivotal lawsuit initiated in 1974 challenging the constitutionality of the voluntary commitment procedures used in Pennsylvania for minors aged 18 and younger who were placed in state mental health institutions by their parents or legal guardians. The core legal argument hinged upon whether such commitment, initiated without the minor's consent and often without an adversarial judicial hearing, violated the child's fundamental rights to liberty and due process as guaranteed by the Fourteenth Amendment of the U.S. Constitution. Advocates argued that treating minors differently from adults in commitment proceedings, relying solely on parental consent and professional medical review, failed to provide necessary safeguards against wrongful or unnecessary institutionalization, particularly given the profound deprivation of liberty involved.

The lawsuit initially resulted in a significant victory for the plaintiffs in the U.S. District Court for the Eastern District of Pennsylvania in 1975 (405 F. Supp. 1070). This ruling declared the state's existing procedures unconstitutional and mandated extensive procedural safeguards. Specifically, the court required that any minor committed by a parent must be afforded the right to legal counsel, a mandatory pre-commitment hearing before an impartial decision-maker, and the opportunity to challenge the commitment decision--provisions mirroring those afforded to adults facing involuntary institutionalization. This decision provided the legal basis for the statement that the case protected the constitutional rights and mandated legal counsel for minors committed to mental institutions by their parents, fundamentally altering mental health law in Pennsylvania for a brief period.

However, the ultimate trajectory of **Bartley v. Kremens** was complex and ultimately shaped by subsequent legal maneuvers. While the initial District Court ruling set a strong precedent for minors' due process rights, the case was appealed to the Supreme Court. In 1977, the U.S. Supreme Court vacated the District Court's judgment, primarily on jurisdictional grounds related to the named plaintiffs' standing or mootness, meaning the substantive constitutional question was not definitively resolved by the nation's highest court through this specific case. This vacation cleared the path for a different, but parallel, case--Parham v. J.R. (1979)--to become the definitive national ruling on the standard required for the commitment of minors by their parents, establishing a far less restrictive standard than the one mandated by the **Bartley** District Court.

### 2. Background and Legal Context

Prior to the litigation surrounding **Bartley v. Kremens**, the legal landscape governing the admission of minors to mental health facilities across the United States was heavily weighted toward the doctrine of *parens patriae* (the state acting as parent) and, more importantly, the traditional authority of the biological parents. State laws, including those in Pennsylvania, often permitted parents to "voluntarily" admit their minor children for psychiatric treatment without any formal, adversarial judicial oversight, based solely on the parent's determination and the concurring assessment of institutional physicians. This system was designed under the assumption that parents act in the best interests of their children and that requiring extensive legal scrutiny would impede necessary, timely treatment.

This legal deference to parental authority created a stark discrepancy in procedural rights. While adults facing involuntary commitment were guaranteed robust constitutional protections, including judicial hearings and the right to counsel, minors--who faced the same severe deprivation of liberty and stigma associated with institutionalization--were not. This disparity became the primary legal grievance addressed by mental health advocates and civil liberties organizations in the mid-1970s. The **Bartley** suit arose as a direct challenge to this model, arguing that while parental intentions might be benign, the potential for abuse, misdiagnosis, or inappropriate institutionalization necessitated an independent check on the power to commit a child for an indefinite duration.

Furthermore, the procedural challenge was deeply embedded in the evolving understanding of children's rights following landmark cases like *In re Gault* (1967), which extended significant procedural due process rights to juveniles in delinquency proceedings. Advocates for the **Bartley** plaintiffs argued that if a juvenile was entitled to legal representation and a hearing before being deprived of liberty in a correctional setting, they certainly deserved the same protections before being incarcerated in a psychiatric facility. The perceived gap between the treatment of minors in the juvenile justice system and those in the mental health system fueled the constitutional imperative driving the lawsuit against the Pennsylvania Secretary of Welfare, ultimately focusing on the vulnerability of children within the institutional framework.

### 3. Constitutional Questions and Challenges

The core legal challenge presented in **Bartley v. Kremens** centered on the interpretation and application of the Fourteenth Amendment's Due Process Clause. The plaintiffs contended that the commitment scheme utilized by Pennsylvania constituted a massive infringement on the minor's fundamental liberty interest--the right to be free from unwarranted confinement--without providing the necessary procedural mechanisms to ensure fairness. They argued that "voluntary" parental commitment was, from the child's perspective, entirely involuntary, demanding the highest level of judicial scrutiny.

Specifically, the plaintiffs demanded that the state implement the following **procedural**

**safeguards**, arguing they were constitutionally essential:

The right to a pre-admission hearing conducted by an impartial decision-maker (a judge or hearing officer) who is not affiliated with the admitting institution.

The right to adequate written notice detailing the basis for the proposed commitment.

The right to appointed legal counsel, regardless of financial status, to advocate for the minor's interests.

The right to cross-examine adverse witnesses (e.g., psychiatrists or parents) and present independent evidence.

These stringent requirements aimed to transform the commitment process from a private medical/parental decision into a formal adversarial proceeding, placing minors on equal footing with adults in defending their liberty against state action.

The defendants, representing the state, countered that the requirement of full adversarial hearings would be detrimental to the child's welfare. They argued that such judicial formality would create an antagonistic environment, damaging the necessary therapeutic relationship between the child, the parents, and the treating institution. Furthermore, the state asserted that the medical review process--involving assessments by trained professionals--combined with the presumption that parents act in good faith, provided sufficient protection against arbitrary commitment, satisfying the flexible standards of due process applicable to minors. This fundamental conflict--balancing the minor's liberty interest against the state's interest in facilitating access to necessary treatment and respecting parental authority--defined the legal battleground of the case.

#### 4. District Court Ruling (1975)

In 1975, the U.S. District Court for the Eastern District of Pennsylvania sided decisively with the plaintiffs. The court, recognizing the profound deprivation of liberty involved in institutionalization, ruled that the state's procedures were indeed unconstitutional because they lacked the necessary procedural safeguards to satisfy the Due Process Clause. This ruling represented a monumental, though temporary, shift in the law regarding minors' rights in the mental health context, affirming that the constitutional rights of children could not be subsumed entirely by parental authority when the state was involved in institutionalizing them.

The District Court mandated immediate and sweeping changes to commitment protocols across Pennsylvania. The court held that while parents retained the right to seek treatment for their children, the state could not act on that request and institutionalize the minor without providing an independent, neutral mechanism for evaluating the necessity of commitment. This decision specifically required the implementation of all the demanded safeguards, including the appointment of counsel for the minor, a judicial hearing, and the burden of proof resting upon those seeking commitment to demonstrate that the institutionalization was necessary for the child's health and

safety, and that less restrictive alternatives were unsuitable.

This ruling was widely hailed by civil liberties groups as establishing a standard that strongly prioritized the minor's autonomy and liberty over administrative convenience and blanket deference to parental discretion. The requirement for a formal, pre-commitment hearing and the provision of legal representation meant that minors in Pennsylvania, for the first time, possessed legal standing and a mechanism to challenge their confinement effectively. The immediate impact was the necessity for Pennsylvania's institutional system to rapidly reorganize its intake procedures, placing significant administrative and financial burdens on the state to comply with the new due process standards.

## 5. Supreme Court Disposition (1977) and Subsequent Litigation

The victory established by the District Court in 1975 was short-lived at the national level. Upon appeal, the U.S. Supreme Court reviewed the **Bartley v. Kremens** case in 1977. However, the Court did not rule on the substantive constitutional merits of whether minors required full adversarial hearings. Instead, the Supreme Court issued an order vacating the District Court's judgment and remanding the case for reconsideration. This decision was largely based on technical grounds, as the Court suggested that the claims of the representative plaintiffs might have become moot, or that they lacked proper standing to represent the entire class of affected minors due to intervening events or procedural changes in state law.

This disposition meant that while the District Court's ruling was nullified, the fundamental constitutional question--the level of due process required for minors committed by parents--remained unsettled at the federal level. The vacating order created legal uncertainty and signaled the Supreme Court's reluctance to affirm the stringent due process requirements mandated by the Pennsylvania court. Following the remand, the complex procedural issues made **Bartley v. Kremens** less suitable as the vehicle for resolving the national constitutional debate, effectively shifting the focus to parallel litigation proceeding in other states.

The constitutional issue that **Bartley** had raised was ultimately settled two years later in 1979 by the Supreme Court's definitive ruling in **Parham v. J.R.**, a case originating in Georgia. The Supreme Court in **Parham** rejected the argument that minors required full judicial hearings and mandated legal counsel prior to commitment. Instead, **Parham** established a much lower standard of due process, requiring only that an admitting psychiatrist or physician conduct an independent, clinical review of the child's condition and the necessity of commitment. Thus, the stringent due process safeguards briefly established by the **Bartley** District Court were explicitly rejected as a national constitutional requirement, solidifying the authority of parents and medical professionals over judicial oversight in these matters.

## 6. Key Figures and Groups Involved

**The Plaintiffs (Bartley):** A class of minors, represented by individuals like Bartley, who were involuntarily committed to state psychiatric institutions by their parents or guardians. They were represented by legal advocacy groups dedicated to civil liberties and children's rights, who sought to ensure that minors possessed the same due process protections as adults facing similar confinement.

**The Defendants (Kremens):** The Secretary of Welfare for the Commonwealth of Pennsylvania, representing the state's mental health system and administrative procedures. The state argued vigorously to uphold the traditional commitment process, emphasizing parental rights, administrative efficiency, and the therapeutic necessity of prompt, non-adversarial admission.

**Civil Liberties Organizations:** Groups such as the American Civil Liberties Union (ACLU) and various public interest law firms provided crucial representation and amicus support, viewing the case as a critical step in advancing minors' rights against institutional power structures.

**The U.S. District Court, Eastern District of Pennsylvania:** The judicial body that issued the initial, expansive ruling in 1975, finding the state's procedures unconstitutional and establishing high due process standards.

## 7. Consequences and Impact on Minors' Rights

Although **Bartley v. Kremens** failed to establish a lasting national constitutional precedent due to the *Parham* decision, its impact remains significant within the history of civil rights litigation regarding minors. The District Court ruling, while short-lived, stands as a strong example of a federal court affirming the fundamental liberty rights of institutionalized children against administrative convenience and parental authority. The required implementation of legal counsel and hearings in Pennsylvania, even for a brief period, demonstrated the feasibility of providing minors with legal agency in the commitment process.

The legacy of **Bartley** lies primarily in its role as the high-water mark for the argument favoring full judicial review for minor commitments. The case framed the constitutional issues so clearly that subsequent courts, including the Supreme Court in *Parham*, had to directly address and reject the stringent standards articulated by the **Bartley** court. This forced judicial examination helped define the limits of minors' rights in the medical context, even if the ultimate ruling favored medical and parental discretion.

Furthermore, **Bartley** influenced state-level reforms and advocacy efforts long after *Parham* became the national standard. Many states, recognizing the potential for abuse highlighted by the **Bartley** litigation, subsequently adopted internal administrative or statutory safeguards that went beyond the minimum constitutional requirements set by *Parham v. J.R.* While legal counsel and judicial hearings were not nationally mandated, **Bartley's** challenge ensured that the ethical and

procedural necessity of protecting minors in commitment settings remained a central topic in mental health policy and law.

## 8. Further Reading

[Parham v. J.R. \(1979\) - Wikipedia Entry on the Controlling Supreme Court Decision](#)

[Bartley v. Kremens, 431 U.S. 936 \(1977\) - Oyez Project](#)

[Full Text of Parham v. J.R., 442 U.S. 584 \(1979\)](#)

[Commitment of Minors to Mental Institutions: Due Process and the Parham v. J.R. Standard - Academic Review](#)

ARABPSYCHOLOGY.COM