Vol. V No. 18 JANUARY 1966

PRISON SERVICE JOURNAL

Editorial Offices:
H.M. PRISON SERVICE STAFF COLLEGE, LOVE LANE, WAKEFIELD

CONTENTS

*Reprinted by permission of the editor of the Journal of the Community of the Resurrection.

The Institutional Treatment of Delinquents

W. J. BOOTH

THIS ARTICLE BEGAN as a review of a book entitled *Reality Therapy: A New Approach to Psychiatry* by William Glasser, M.D. (published by Harper & Row, New York, $3.95) but has, it seems to me, become something more than that. Many readers of the PRISON SERVICE JOURNAL may wonder why they should concern themselves about psychiatry, and I urge them, if they have such feelings, not to be put off by the title. Nor should they anticipate that the book is laden with psychiatric jargon, because it is not. Although Dr. Glasser is concerned with the treatment of psychiatric patients, our interest is claimed because this book is also about the institutional treatment of delinquents. The reasons for these activities coming under the same heading of psychiatry in an American book will, I hope, become clear.

Mentioning the title of the book to a member of our Service provoked the instant retort that it involved a contradiction in terms. In part, of course, his reaction was meant to be facetious, he is one of the Service's cynical wits and may well be missing a fortune as a superior Celtic comic, but there is a great deal in what he says and which reflects Service thinking. His experience with institutional treatment of delinquents has brought him into contact with many of the grosser difficulties involved in the attempt to produce more acceptable attitudes in personalities which any society will have difficulty in absorbing, even supposing they had no criminal tendencies. No doubt he has seen the delinquent approached from all angles of the therapeutic compass, from simple but rigorous, institutional discipline, on the one hand, to the ultimate permissiveness of the Freudian psychiatrist on the other hand. My Celtic colleague is confused in this situation, I believe that I am also confused and I suspect that the whole of the Prison Department, not to mention the Home Office and society in general, is equally confused. Perhaps we could spare

a passing thought for the state of the delinquent, who can only be either blinking in bewilderment at the receiving end of whatever this confusion produces, or happily (and more healthily) standing aside and allowing us to get on with it. In either case, there is a reasonable assumption that, in general, the people who most need our help, from either their own or society's point of view, will not get it.

It is, surely, about time that we engaged ourselves in a debate intended to reach agreement on the answers to some fundamental questions. The questions which seem to be most urgent are these connected with the characteristics and motives of delinquents (adolescent or adult) and those connected with the aims and methods of our treatments.

The Personalities of Institutionalised Criminals

There are many arguments in which we are still involved which have their origin in the contrast between sinful and virtuous behaviour and the absolute standards of behaviour which can be derived from these contrasts. It is doubtful whether these absolute standards have ever been completely adhered to. Sinful behaviour can often be justified, in personal terms or more generally, however specious or genuine the justification may be. Similarly, virtuous behaviour can be reduced in value, the saint is made that way and the rich man is rarely tempted to steal bread. Perhaps the most significant departure from absolute standards has occurred following the increase of knowledge of human personality which has flowed from psychological investigation and experiment during the past 70 or more years. Crudely speaking, there has been an increasing tendency to clarify as "mad", those who in former times might simply have been thought to be "bad".

But not, of course, completely mad. No one here has argued for a long time that there is no distinction to be drawn between the average criminal and the average patient of the chronic ward of the mental hospital. And the stigma attached to mental illness is rather different from that attached to the prisoner or ex-prisoner. Would our problems be fewer in number, more susceptible to identification and some formal resolution, if the opposite had been true? In that case we might have handed over our work to the psychiatrists who, no doubt, would have tested out their traditional solutions of a pill, an electric shock, a rollicking or an involvement in a therapeutic process, according to which school of psychiatry claimed their allegiance. To a certain extent this hand-over seems to have happened in America where, as far as a British layman can judge, the emphasis in psychiatry is heavily placed on the psychoanalytic approach to most problems of deviant behaviour, whether criminal or otherwise.

Consequently, a British reader of this book must bear in mind that it is written against a background which is foreign to us. As indeed, are the various articles by other American psychiatrists on the same topic, such as those by Melitta Schmideberg, one of which appears in this issue of the PRISON SERVICE JOURNAL.

To be able to look at someone else's controversy about a problem with which we are thoroughly familiar ought to provide us with opportunities to examine our own position. Perhaps such an examination would help us to make up our minds about what we really think of the characteristics and motives of our charges. Do we, or do we not, accept a straightforward, black or white, division between sin and virtue? Do we, or do we not, believe that the average criminal can be usefully described as "mad", or "bad", or do we think that he comes somewhere in between the two?

If we ask the questions in terms of why people commit crimes rather than ask questions about motives, the answers are likely to amount to a collection of factors which probably contributed to the onset and establishment of delinquency. The tendency is for this to be a hotchpotch of historical factors which can range from the statistically significant to the generally accepted fantasy. For example, from the influence of the urban environment to the supposed necessary connection between divorce and delinquency in the children of divorced parents. One of the connecting threads between these factors is that they are all in the past of the offender and, therefore, irreversible. The problem facing those who wish to attempt treatment of the delinquent condition is largely centred round this, but the confusion of the problem may well arise because we are unable to distinguish the historical conditions such as these from current motivation. There is an apparent contradiction involved in the attempt to juxtapose statements like:

(a) X is delinquent now because of the effect which certain (specified?) environmental pressures have had on him. This suggests helplessness and inevitability rather than positive motivation.

(b) X committed this particular crime for a particular reason (perhaps avarice, wickedness or lust). This suggests positive motivation which can be controlled by the criminal.

Our approach to X and our attitude towards him is likely to be substantially determined by whichever of these viewpoints we adopt and, of course, if our adoption is a consistent one. But since both of these alternatives is likely to have elements which appeal to us at different times our approach may not be consistent. Furthermore we

must regularly face the irreversibility of the factors in (a) and the ineffectiveness of simple reactions to (b) such as punishment, intellectual argument or advice.

Institutional Treatment

Because of our persistent failure to deal satisfactorily with recidivists we have long been forced to accept that there is nothing in simple imprisonment which will necessarily bring about changes in criminals towards more acceptable behaviour. This is not to say, that society at large does not derive some satisfactions from the knowledge that criminals are punished for their crimes. But we are committed to the provision of custodial treatment and this implies much more than punishment. For 70 years the basis of treatment has been influencing the criminal away from his former pattern of behaviour and the system has concerned itself with discovering the means of exercising such influence. Increasingly, the importance of relationships, as the means through which influence can be focussed, has been emphasised and after many false starts it is probably accepted now that there can be no grade of staff which can specialize in treatment. All staff are involved in treatment and to the extent that this is not true attempts at treatment may be ineffective.

The need to establish good relationships with individual inmates is inevitably obstructed by the need to maintain authority in the institutional situation. Other social agencies dealing with respectable citizens and their problems do not have the authority difficulty in such an acute form and can evade the issue in many ways not open to us. We have tended to try to use treatment techniques developed in these other spheres and to adapt them to our circumstances. Casework, for instance, is described in general social work as a problem-solving process for those in social distress. Certainly the inmates of prisons, etc. have no shortage of problems and are often in considerable social distress. Therefore, if casework is useful in the one situation it ought to be useful in the other. But casework, and also group counselling, are said to necessitate a certain set of attitudes on the part of the practitioner which are loosely described as permissive and these are often felt to be incompatible with the authority inherent in the whole notion of imprisonment. Both techniques also seem to depend on the development of the self awareness of the inmate as to his real motives for criminal behaviour, the assumption being, presumably, that awareness of deeper motives will set a criminal free from the need to act out former conflicts symbolically in current behaviour. This approach is linked with Freudian concepts about human psychology and the methods which can be used to alter individual personality where it is deemed to be necessary.

It is a feature of such treatment

that it can only begin when the patient (or the caseworker's client) wants it to do so. When he has no motive to change there will be no effective treatment, because he will not make a genuine effort to search within as in (a) above (for the deeper reasons for his criminal behaviour). On the other hand when he has the motive to change the layman will want to say that he can do so, that is, that he is not compelled to behave criminally. In other words, his motives are not linked to the past but to the particular criminal act (as in (b) above).

A growing body of opinion is prepared to assert that there is no similarity between those who are susceptible to treatment of the insight-developing kind, i.e. the neurotic who needs deep therapy, and those whose acts, criminal or not, can be described as impulsive and linked with present situations. The full differentiation between these two groups means that the impulsive behaviour problem is not even developed as a human being sufficiently to be a neurotic, but is suffering from what is termed a character disorder.

In prisons, and residential penal establishments generally, are the inmates neurotic or suffering from character disorders? The answer we give to this question should, if the latest theoretical developments are correct, determine our approach to treatment. Are we to go on floundering, some of us attempting a technique based on Freudian assumptions about criminal character and treatment, some of us resisting this for one reason or another but not proposing any alternative? Those who attempt the Freudian techniques inevitably face problems about their own authority and also the inmate's lack of desire to change. Those who attempt nothing but the transmission of *ad hoc* advice find that this is a futile process and not helped in any way by having simple power to enforce sanctions.

Reality Therapy

Dr. Glasser appears to have become dissatisfied with the American methods of psychiatric treatment almost before he had completed his training. Readers in this country should be careful not to assume that what is American psychiatric good practice is accepted here. The opposite is more probably true and psycho-analytic methods in wide use in America are only used here by a minority of psychiatrists. In his reaction away from these methods he has developed not a variation but something totally different. He makes this quite clear by setting down what he considers to be the six essential convictions upon which the treatments of classical American psychiatry are based, as follows:

1. Mental illness exists, can be classified and treatment can be provided according to the classification.
2. Essential treatment is the investigation of past life,

i.e., searching for the psychological roots of a patient's problems. The idea is that the patient's understanding of these roots will enable him to change attitudes and develop more effective patterns of living.

3. Part of the process of understanding entails the transference by the patient to the psychiatrist of attitudes which were developed in relation to people in the patient's past life who were important. This leads to interpretations by the psychiatrist which will increase the patient's insight.
4. Unconscious mental conflicts are considered more important than conscious problems, and awareness of these is essential for successful treatment.
5. Morality is irrelevant in the treatment process and the conventional psychiatrist avoids any pronouncement on right or wrong behaviour. This follows from the assertion that mental illness produces deviant behaviour.
6. Teaching people to behave better is not important, better behaviour follows from understanding historical and unconscious sources.

"Using these six essential convictions as a basis for both pychiatric theory and practice, conventional psychiatry may appear in many forms from simple counselling through non-directive therapy to orthodox psychoanalysis, but in every situation almost everyone who does therapy in the United States and Canada would concur with these six criteria. Although some people might place more emphasis upon one than another usually they stand unchallenged." (*Reality Therapy*, page 43.)

One may underline two relevant facts here. Although these basic facts may seem to be concerned with the treatment of mentally sick people, the psychoanalyst's definition of mental illness is so broad as to include anyone who behaves in a manner which deviates from the normal, and this includes criminals. Although Dr. Glasser is primarily talking about trained psychiatrists he is also asserting that what he says applies equally well to any way of treating deviance which is derived from psychoanalytic knowledge, that is, it includes caseworkers and group counsellors.

The purpose of stating these basic conditions of classical American psychiatry is to reject them completely and in detail, in theory and in practice. The book is an account of the treatment of psychotic soldiers in a military chronic mental hospital, delinquent older girls in a large correctional establishment, preventive treatment in an ordinary school, and private practice treatment of what would usually be called neurotic

patients, on principles which can be formed when the six essentials listed above are rejected.

People must be regarded, says Dr. Glasser, as either responsible or irresponsible, and the concept of responsibility is defined as "the ability to fulfil one's needs and to do so in a way that does not deprive others of the ability to fulfil their needs". Psychiatry is concerned with two basic psychological needs (there are other needs), namely, the need to love and be loved and the need to feel that we are worthwhile to ourselves and to others. In the normal way the ability to meet these needs is acquired through involvement at an early age with important people like loving parents, but there are situations in which this does not happen or, if it does, development or alteration in life may make the learning inadequate, and further learning may be necessary. In any case, this can only take place through involvement with people who are themselves firmly in touch with reality. At any time when problems arise which can be termed psychiatric or psychological it is to be assumed that part of the problem is a lack of involvement and the consequent inability to satisfy psychological needs.

Involvement

Involvement is essential to reality therapy but Dr. Glasser clearly is thinking in different terms to others who use the same word. He means something much closer to ordinary involvement, which does not set out to be uncritical and entirely accepting on the one hand, or reserved and professionally remote on the other hand. Reality, as he sees it, demands something different and, he would say, more genuine.

"The ability of the therapist to get involved is the major skill of doing reality therapy, but it is most difficult to describe. How does one put into words the building of a strong emotional relationship quickly between two relative strangers? And when the patient does not want to be in therapy—as often occurs with delinquents—or does not even know that he is in therapy—as sometimes occurs with severely withdrawn patients in a mental hospital—the task is particularly difficult.

"One way to attempt an understanding of how involvement occurs is to describe the qualities necessary to the therapist. The more a person has these qualities, the better able he will be to use the principles of reality therapy to develop the proper involvement.

"The therapist must be a very responsible person—tough, interested, human and sensitive. He must be able to fulfil his own needs and he must be willing to discuss some of his own struggles so that the patient can see that acting responsibly is possible though sometimes difficult. Neither aloof, superior nor sacrosanct, he must never imply that what he does, what he stands for, or what he values is unimportant. He must

have the strength to become involved, to have his values tested by the patient and to withstand intense criticism by the person he is trying to help. Every fault and defect may be picked apart by the patient. Willing to admit that, like the patient, he is far from perfect, the therapist, must, nevertheless, show that a person can act responsibly even if it takes great effort.

"The therapist must always be strong, never expedient. He must withstand the patient's requests for sympathy, for an excess of sedatives, for justification of his actions no matter how the patient pleads or threatens. Never condoning an irresponsible action on the patient's part, he must be willing to watch the patient suffer if that helps him towards responsibility. Therefore, to practise reality therapy takes strength, not only the strength of a therapist to lead a responsible life himself, but also the added strength to stand up steadily to patients who wish him to accede to their irresponsibility and to continue to point out reality to them no matter how hard they struggle against it."

This, it seems to me, is a relationship of a different category to any which follows from the current tenets of psychoanalysis, whether applied in full by a trained psychoanalyst or in part by a caseworker or group counsellor. As indicated here, it is likely to be much more demanding on the worker since he is compelled to contribute himself as a real person with the ability to fulfil his own needs in a realistic way. He is at once a challenge, particularly to the delinquent, to be tested by attack, and an example of responsible behaviour.

The Teaching of Responsibility

In the normal situation children learn what responsibility is through the care of their parents. They do not learn easily and part of the process is the testing out of the reality of their parents' care by irresponsibility. This should attract discipline, which is, therefore the expression of parents' care just as much as more pleasing demonstrations of love may be. The child needs responsible parents who will undertake this and parents must realise that taking responsible action will never permanently alienate the child. Stated like this, Dr. Glasser's views may seem incontrovertible and, indeed, it is probably only in extreme cases that the apparent opposite has ever been attempted, either from theoretical conviction or parental inadequacy.

Perhaps it can be said, however, that even in this country we are apparently changing towards children and, what may be more important to us, have already given up the idea that more adult people can be dealt with in a similar way. In the latter case it often seems that we are in the position either of providing the discipline without the purposeful involvement, or we become involved and cease to see a function for a discipline, thus, in

Dr. Glasser's terms, stamping the involvement as unrealistic. From our point of view the chapter on the treatment of delinquent girls in the Ventura school has particular interest, because Dr. Glasser's claim is that treatment in residential conditions is more effectively carried out than in the outside environment. Again, one should note that this is the opposite of what is usually believed about institutions.

When I first read this chapter, my immediate reaction was that this might very well be a sort of rationalisation that one could produce very easily when working in an institution geared to deal with indeterminate sentences. In these circumstances, it is all too easy to talk about qualifying by responsible behaviour for advancement in grade, etc., but meaning very little more than keeping a clean bed space and a civil tongue. I hope Ventura is different and that when planning and programming is talked about it is with recognition of the fullest implication.

"The school programme consists of three main parts:

1. The custody programme is administered by warm and skilful counsellors who use the principles of reality therapy. The girl's knowledge that she is in an institution from which she cannot escape is basic to the programme. With the guidance of the staff, she is forced to take responsibility for her behaviour in a total situation where responsibility is continually stressed.
2. The treatment programme is administered by a group of competent psychologists, social workers, and a consulting psychiatrist. The treatment personnel not only work with the girls directly, but they continually work with the custody staff to help them treat the girls according to the principles of reality therapy.
3. The school programme consists of both academic and vocational courses taught by qualified teachers. All girls have a full daily schedule taking either an academic or a vocational course, or sometimes both. Those who enter the Ventura school with sufficient credits and stay long enough and complete enough work to graduate receive a regular graduation certificate which does not indicate that it comes from a correctional institution."

Each part of the programme is as important as any other and each inmate goes through the whole process, e.g. no one is given a special psychiatric treatment programme. Students are held fully responsible for their behaviour no matter what their state of psychiatric health may have been said to be in the past, and exclusion from

the treatment means that no progress is made towards release. Unlike in our own methods, exclusion means total exclusion, living separately, though not necessarily alone, and not having an entirely easy return to processes of treatment.

Standards are high because, as Dr. Glasser puts it: "We have discovered that unless we have high standards, the students conclude that we are 'phony' and don't really care for them".

An initial success rate of 80 per cent is claimed in the treatment of these girls who are described as very sophisticated in their own mileau and poorly motivated for change towards a more responsible life. Many have had psychotherapy as a condition of probation; all have been in juvenile halls, some for many months. Profiting little from this treatment, they have continued to break the law. Finally sent to the Ventura school, the last stop before adult prison, they are confined, in most cases, for six to eight months for rehabilitation.

What is the Treatment?

Both individual and group methods are used, although Dr. Glasser has an obvious preference for group methods for reasons which he gives. In both cases the emphasis is on present behaviour and responsibility. A further indication of how far Dr. Glasser has parted from the psychoanalyst is his insistence that dwelling on the past of patients is useless. Finding the psychological root of present behaviour, he would say, does nothing to control the behaviour and it is this with which we are concerned. The psychiatrist or counsellor spends no time on this but insists on examining current realities and future possibilities. The adult person who attempts to achieve his basic psychological ends by bad behaviour has become involved in a self-defeating process since respect and love are given to those whose behaviour attracts it. This they need to learn immediately and to be able eventually to be similarly successful in the future. Incentives, rewards, punishments (however disguised) and restrictions come into this learning process and all is focussed through the relationships in which staff are involved. There is no easy way out for staff here, because to provide less than is necessary in any sphere is to nullify the treatment. One part of the staff cannot see itself as concerned with treatment and leaving the custody to others, or vice versa. We would have a very long way to go before we could claim to have devised anything resembling the Ventura system, if it is as described, and in many areas we have not yet begun.

This book ought to be read by everyone concerned with the custodial treatment of delinquents and it has the distinct advantage of being quite easily readable. It will satisfy no one who wishes to become better acquainted with the causes of delinquency, because it

does not make this attempt in any detail. For those who need this kind of justification, it seems to me that Dr. Glasser's method could be easily related to the theories being developed about character disorders and the use of authority rather than passivity in their treatment, but this would only be in the area of delinquency. What the reactions of psychiatrists may be to the denial of the basis of their expertise, i.e. by the assertion that patients are not mentally ill but merely irresponsible, is more than I can say. But here also Dr. Glasser's claims to have successfully treated so many patients, formerly classified as chronic and untreatable, to the point where they could be successfully released from the closed wards of mental hospitals, are too formidable to be ignored.

Nor, of course, is this a book without faults, even if one recognises that it is a description of a treatment system rather than a comprehensive study of the personalities of criminals and psychotics. Dr. Glasser makes a point very strongly about the superiority of group treatment over individual treatment, but his case histories are presented in a way which reverses this emphasis. His treatment programme for Ventura clearly depends upon the full participation of all staff in custody, treatment and education, but for our purposes there is too little detail about the achievement of this advanced co-operation. To say that the treatment staff work with custody staff to enable this to come about will not satisfy us. Perhaps, now that the claims for the primary aim of the treatment have been made, we can look forward to further enlightenment on staff training at all levels. In the last analysis, this sort of development of his theme will prove to be the most important aspect of his new approach. As it stands, where the publication of this book leaves it, there is much in the system that can be dangerously misinterpreted. On the one hand, the caseworker or group counsellor who has long feared that he is more authoritarian in his relationships than he ought to be, may find comfort and self justification without accepting the responsibilities of working for the wider participation by others in his work. On the other hand, those who unwillingly accept their department's primary task of treatment may equate "reality" with discipline and regimentation without making any move towards personal involvement. Notwithstanding these criticisms and dangers, I repeat my recommendation that the book should be widely read by all ranks and grades in this Service. If we have the intelligence and the wish to do the work well, as I believe we have, we shall survive the dangers. The result may be that, even if we never wholly accept the method and its implications, we will benefit from the arguments which this book ought to raise.

Making the Patient Aware

Reprinted from *Crime and Delinquency*, 1960

MELITTA SCHMIDEBERG, M.D. (LOND.)

Formerly Director of Clinical Services
Association for Psychiatric Treatment of Offenders, New York

THE AIM OF rehabilitation by probation or psychotherapy is to make the offender an acceptable and accepted member of the community. To do so, it is necessary to stop his anti-social behaviour and develop his social assets and his sense of responsibility.

It is fashionable to believe that people with "problems" (whatever that means) are helped by a "relation" and by "insight." (Both these terms are used rather loosely and broadly.) However, a therapeutic relation and therapeutic insight will socialize an offender only if they are specifically adapted for this purpose. Moreover, most offenders are not only unwilling to develop but incapable of developing a relation to a socially oriented person.

Differing Methods of Treatment

Two important approaches have been worked out to overcome this fundamental handicap. Some social workers try to approach the patient by deliberately descending to his level, seeking him out in his own habitat, hanging out in poolrooms, mixing with the gangs as street workers. The danger of this approach is that the worker may go down too deep, so that the offender either develops contempt for him, as in *West Side Story*, or thinks the worker condones anti-social behaviour.

The other approach is that of probation. If he has been deeply shaken by his arrest and conviction, the offender appreciates the probation officer's interest. Though probation has developed empirically, the underlying psychological approach is ingenious and is admirably suited to the offender's mentality: It combines supervision and encouragement, threat and help; and the probation officer can stress either aspect according to need and utilize both almost simultaneously.

Probation is more than "casework in an authoritative setting". Casework is essentially uni-directional; its stress is usually on help, permissiveness, *nonpunitiveness*, insight; but "insight" in therapy or casework usually means patient-centred insight, the patient's understanding of his own past, his own emotions, motivations, and mental processes. In the probationer, on the other hand, we want

to develop community-oriented insight; we want him to understand consequences, recognize his share of responsibility for the reactions of his employer, his probation officer, or the judge, all of whom he resents.

The therapeutic approach followed by the Association for Psychiatric Treatment of Offenders (APTO) has been largely fashioned by the concepts and practices of probation. Our situation in regard to the patient is not quite the same as that of the probation officer, but in many respects it is akin. We work with the courts but are not employed by them. We see the patients referred to us by the courts in the APTO office or, more frequently, in the private offices of our therapists—a fact that in itself has a socializing effect. As a rule, the patients attend only under pressure and it is up to the therapist (like the probation officer) to turn the enforced relation into a genuine one. Like him, we utilize crises to establish a relation and to gain influence, and we need pressure on the patient or he would not come.

The Sense of Consequence

To influence an offender we have to establish a relation, but once a relation is established, it must be used to influence him; if it isn't, it will remain therapeutically ineffective. Since the offender is a failure in socialization the aim of treatment must be to correct the fault in development.

The ordinary citizen refrains from breaking the law because (a) he is afraid of the consequences; (b) he would experience shame, guilt, remorse; (c) he has positive moral, social, religious, or civic values; (d) he is part of the community, has feeling for others, and derives satisfaction from behaving well.

The failure to anticipate consequences, to foresee what would be obvious to a small child, is characteristic of most offenders. Because they believe (contrary to experience and evidence) that they will not be caught, the threat of punishment does not deter them. It is the task of therapy to make them aware of consequences, to sensitize them to social pressures, to develop their sense of reality. If the offender is insufficiently motivated by normal social incentives, the task of therapy is to develop these incentives, to build upon whatever rudiments of social attitudes he has, and to utilize them toward social orientation and behaviour.

Co-operation: A Practical Necessity

As APTO Director of Clinical Services, I used to do most of the intake and one of my main objectives was to change the "unwilling patient" into a more co-operative one. This is a practical necessity, as otherwise he cannot be treated; but also it is already part of the therapeutic process.

To give some examples:

CASE 1

Jimmy, aged 17, was sent to us

by the court clinic. Pleased with himself and smug, he asserted that the judge and the clinic had pleaded with him to take treatment but that he did not see the point of it. After some discussion, in which I was not unfriendly, I told him we had many more patients than we could cope with and really had no need to take on patients who were not willing. But I added: "Do not tell your probation officer that I said you do not need treatment".

"What should I tell him?"

"Use your brains in this situation and generally", I said, "and realize that you will have to take responsibility for all your actions and accept the consequences".

Then he used his trump card: "And what if I continue to steal while I am having treatment?"

"The answer is simple", I said. "You'll go to gaol and not the doctor."

This seemed to impress him, but there was no immediate proof. I asked the probation officer to continue to press him to come for treatment.

A month later Jimmy telephoned me and asked whether I remembered him. I said "Certainly" and asked him why he was calling. He answered rather vaguely. I repeated what I had pointed out to him before—that we were rather busy people and I would not allow him to take up our time for nothing.

He said, "My probation officer is mixed up".

I said, "*You* are mixed up."

We had three similar telephone conversations at monthly intervals, after which he asked to see me. He now wanted treatment, he said. I saw him and made it clear that I would have to be convinced of his seriousness before sending him to a therapist. He is now taking treatment and is doing well.

Probation and psychiatric treatment of offenders should be regarded as a privilege, not as a right. If it is made too easy, they are not grateful for it; on the contrary, they resent it as irksome. Sometimes a blunt manner with the persons with whom you deal is the only way to make them aware of certain facts. I told a middle-class father: "You complain about your sons being on probation, but you ought to realize it costs the community several hundred dollars a year. People like you should be able to look after their children themselves; probation should be for boys who have no father or don't have a decent home". He said indignantly, "I pay my taxes", to which I replied, "So do I, but I don't take advantage of this service".

CASE 2

John, aged 30, had spent more than half his life in correctional institutions. Since he was not on parole, and I had no legal hold over him, I had to see how I could gain a quick influence over him. I asked him how many felonies he had committed, and he said with some satisfaction, "I have been sentenced for only two—that

means I would not get 'life' the next time"*.

"How much time would you get?"

"Probably 10 to 20, but maybe only five, which would be a bargain, so if somebody suggested an easy job, I might do it."

I asked him how long he thought he was likely to live—another 30 years?

"Oh no, 20 at the most."

"Well, you have spent 17 years of the last 20 in institutions, so at that rate you will have three more years at liberty."

In the next interview I took his detailed history, and to impress him, I listed all his convictions and commitments and the total time spent in gaol. Then I asked him: "What is your conclusion about all this?"

After a while he replied, "A wasted life".

He has not committed any offences for quite a while now. But the work he does is the worst possible kind for him: he's a bartender. He drinks himself sick. I dwell on all the likely physical consequences and he admits he saw patients with delirium tremens and liver cirrhosis when he was in Bellevue, and he has not forgotten how terrible it was. He also tells me how his little daughter begs him to stop, and I remark, "Sometimes children have more sense than adults". I ask him why his wife is sticking by him, and what it does to her. Since then 18 months have passed. He has changed his job, and has not committed any crimes, though occasionally on weekends he gets drunk. Never before has he managed to stay "clean" for so long a time, so maybe an awareness of the utter futility of his previous behaviour has finally penetrated.

Making the patient aware of the realistic consequences of his behaviour often helps to establish a relation. Many therapists are too eager to be "nice", to reassure when reassurance is out of place. This attitude neither socializes the patient nor helps to establish a good relation to the therapist, largely because the approach is too shallow and fundamentally insincere. When a patient is obviously heading for disaster, yet has not got the strength to change, it is up to the therapist to give him strength and make him change. The word "support" is often misused to mean condoning or explaining away any type of irrational or undesirable behaviour. Therapists too ineffective to change the pathological behaviour often tend to glorify their ineptitude by calling it tolerance, sympathy, support, and other clichés, by trying to make the patient feel better about something that rightly makes him feel bad and about which he should be still more upset, so upset that he changes.

If you were a patient would you believe that a therapist was genuinely interested in you if he was

*Fourth felony In New York State carried a mandatory life sentence; for this reason sometimes the courts reduce a felony to a misdemeanour.

unconcerned about the fact that you were likely to spend the rest of your life in prison or drink yourself to death? Much that appears as a positive attitude to the worker does not impress the patient as such. Many a therapist thinks that by merely listening he is showing sympathy and tolerance, but the patient sees only indifference and so reports grumpily, "He said nothing". Delinquents are outcasts, and are not happy about their condition. Most of them would change if they had the strength, and if pressure is successfully used to change them, they are often grateful or at least relieved.

CASE 3

George, aged 26, is an African Negro who came to the U.S.A. at an early age. His parents are majors in the Salvation Army. One brother and a sister study art; another brother is in a mental institution. He himself did not get very far in school and has been in trouble since adolescence. He has six convictions, the last one for selling heroin. He was facing a five-year sentence when he had a schizophrenic breakdown. He spent two years in a state hospital and is currently on probation.

He asked for psychiatric treatment because he was worried about other breakdowns. I told him, and also wrote the probation officer, that the situation that causes him the greatest strain is to be at odds with society; this is what brought on his last breakdown and might precipitate the next one. Hence, it is vitally important that he settles down to a law-abiding, normal life.

He admitted to me that he was taking marijuana, and that his probation officer did not know it. I prevailed upon him to move out of the neighbourhood, and he did. He told me to take his marijuana addiction more seriously, so I told him strongly to stop, and he did. Further, I advised him to develop some interest and to have a purpose in life.

He started to learn diamond-setting, which gave him much satisfaction. He showed me various items of second-hand jewellery which he had bought cheap, and told me he could get me diamonds cheap, and on one occasion showed me 1,000 dollars in cash. He wanted the probation officer's permission to go to school days to learn diamond setting; he intended to live on his "savings" and from earnings on part-time jewellery repairs and wanted me to back this plan. The probation officer telephoned me and told me the school was a legitimate one and had spoken well about John, but he felt the patient should go to work, like anybody else, and learn diamond-setting in the evening, to have some discipline. I agreed and he laid down the law to John, who burst into tears. John later called me up and told me he could not see me any longer since he had no money to pay me. I said I wanted to see him and would not charge. I was

moderately sympathetic but did not back him.

The next I knew was that he had committed an assault and was in the prison ward for observation. The probation officer told me he had interviewed the victim, who was not pressing charges, and that he was ready to continue probation. I visited the patient. The psychiatrist told me that in view of his peculiar manner and his history he wanted to send John to a state hospital; but I dissuaded him.

My conversation with John was brief: He started to argue his innocence, and I merely said, "Do not argue. You have enough trouble anyhow. Behave reasonably and get out of here. You are lucky you have a good probation officer; he could have sent you away for five years for breach of probation".

When the patient saw me next time at my office, he said he would give anything to have the pending court case straightened out. I was quite friendly but non-commital. He failed to keep the next appointment. I called him up and he said he had forgotten. I reproached him and said he was under obligation to me. He asked me why, and I reminded him of my role in preventing his incarceration in the state hospital. He said, "There must be something wrong with my thinking".

I said, "Yes. Better start thinking things out". He also told me that he had quit the job he had taken after his discharge from the hospital and that he wanted to walk out on his wife. I told him to avoid trouble. He had had too many crises, too many long periods when a new disturbance arose every week. It was high time for things to go smoothly. A season of peace and quiet would make a good impression on the probation officer.

At the next visit he looked cheerful and seemed glad to see me. He told me he was happy with his family and had a new job where he had to do heavy work which he liked. He even spoke about the probation officer without bitterness. His assault, his quitting his job, his quarreling with his wife —all these had been precipitated by his resentment of the probation officer and by his annoyance with me for not supporting him against the officer. Once he accepted discipline and worked, he felt happier and his resentment disappeared, and he became attached to me. He is still unstable, however, and changes his job quite frequently.

CASE 4

Tony, 21, stopped work in a schizophrenic condition 18 months ago. He had delusions and was hearing "voices". For six months he had psychiatric treatment. The doctor humoured the boy and told the parents not to pressure him. When he came to me, accompanied by his father, he looked most peculiar; for one thing, he seemed to be trying to create an impression that he was much younger than he actually was—for example, he was chewing bubble gum.

I started straightaway to talk about his taking a job. I told him I understood he was afraid of it, but that in the long run he would feel much better if he worked. He agreed, and although he did not act on the suggestion, he looked more his age at the second visit, and by the time he made the third visit he had stopped chewing bubble gum without my having told him to do so.

For a working-class boy to stay home and not work is peculiar; it makes him feel and look peculiar, and the result is a vicious circle. At the fourth visit I brought up the voices he heard, the phenomenon that had so much impressed the last psychiatrist. I asked him what they were like. He said, "Like you talk".

I said, "Is that so terrible? If you had a job, you'd be kept busy and you'd have no time to pay attention to them, so they would disappear".

The next week I asked about the voices again and he said, "I can still hear them a little".

I said, "And of course, if you tried, you could hear them much better, and then you would have a good reason not to take a job". Though he is not very bright, he understood what I meant. He found a job a short time later and is now working steadily. I had seen him altogether 12 times for short interviews and he has been well now for over a year.

Of course not every schizophrenic patient can be pressured into a job. One of the functions of a psychiatrist is to decide when and how much a patient can be pressured. However, many therapists tend to leave the patient alone; in many cases this is not desirable therapeutically and it even discourages the family from trying to bring the patient back to normality.

Many parents and others in authority who ought to be guiding their charges fail to assert themselves for fear of being disliked. Actually, however, the indulgent parent does not get more affection or gratitude than the stricter parents of a generation ago. Love and strictness are not necessarily mutually exclusive, and if we have somebody's interest at heart we do not allow him to jump out of the window, drink himself to death, or remain illiterate any more than we would remain inactive if we saw him bleeding to death.

One reason this false "supportiveness" has such a bad effect on the patient is that it implies a slight, unintended by the therapist but felt and reacted to by the patient. He is assessed too low.

Popularity is not Primary Aim

The main concern of the therapist or the probation officer should be with being effective rather than nice. A patient who seeks help from a physician prefers, or should prefer, medical skill to a good bedside manner, though of course, it is pleasant if he has both. We do not really help offenders by being merely "nice" to them;

we must be able to get them to act normally or they will spend the rest of their lives in and out of prison, a misery to themselves and a burden and danger to others. For this reason the short-sightedness of some workers who merely try to get their charges out of immediate trouble, without looking at the whole picture, is incomprehensible to me.

A neighbourhood social worker rang APTO on behalf of a 17-year-old boy who was in a state mental hospital because of alcoholism. The boy had never worked. The hospital would let him go if it were assured that he would receive psychiatric treatment, to be paid for by the mother. When I insisted that the mother make it a condition before she took him out, that he go to work, and that he be paroled to the hospital on this condition, the social worker was so indignant that he hung up on me.

Quite a few workers seem to regard authority or restriction as a sort of brutality or "mental castration" when obviously some authority is needed to normalize offender patients. Moderate punishment with plenty of warnings is more in the patient's interest than short-lived leniency, which encourages the patient to get into more serious trouble, with dire consequences. Patients are aware of this, even if they refuse to admit it, and often a much better and genuine relation is established when the therapist is frank and realistic. Even harshness is not resented if it helps to achieve better adjustment.

It is not our job to be liked. It is pleasant if we are, but this should not be our main concern. So often weakness and confusion are covered up with pretentious clichés, or the worker tries to see the patient in an unduly favourable light, almost like a rider who has no control over his horse but continues to praise it, hoping that the horse will eventually live up to the compliment.

To treat, we must face facts; we must know the degree of the patient's abnormality or the extent of his anti-social behaviour as well as its likely consequences. We must face reality and make the patient face it; this is the only way for him. What is wrong with him is that he cannot face his own faults and failures or cope with life, and it is up to the therapist to face them, and enable him to face them, and teach him to cope with them. The patient is not likely to change unless he wants to change, and he will not want to unless we get him into a frame of mind where he feels sufficiently bad about his offences and his mode of life. Once this is achieved or rather, hand in hand with it, we must help him to gain positive satisfactions and hope in a social way of life. We must provide the incentives for change and utilize them constructively.

We cannot adjust offenders socially unless we have definite, though not too rigid, moral and social values ourselves which we

are not afraid to impose on the patient. This is what normalizes him. We must make the patient aware directly or indirectly that his behaviour was bad so that he does not repeat it; we must make him aware that it is contrary to his interest to do so; and at the same time we must give him some hope of succeeding socially. Evoking anxiety or guilt and deflating and challenging him are as essential tools of therapy as encouragement, and usually should be used alternately.

Guilt is not necessarily a pathological reaction. Often it is a major therapeutic achievement to get the offender to feel guilty. The next step then is to utilize this guilt for constructive purposes, to motivate him to behave socially.

"You're home, dear! That's all that matters."

Drawing by F. B. Modell; © 1964, The New Yorker Magazine, Inc.

Danish Training Chief Examines "The British Way"

CARL AUDE

THE AIM OF the Council of Europe Training Seminar at Wakefield was to provide an opportunity for senior administrators and others working in the correctional field in a number of European countries to gain first-hand knowledge of the British penal system, by means of a course of lectures and discussions, interspersed with visits to a representative selection of establishments.

The seminar, however, had a scope beyond that. The participants were all concerned with training of staff in their respective countries, the lectures and visits had, to a great extent, a bearing on training problems and last, but not least, the frame of the seminar was the Staff College, Wakefield and its personnel made contributions to the seminar as lecturers and participants in the discussions.

It was my first meeting with the English prison system and my expectations were great. England has always been ahead in prison reform. John Howard and Lionel Fox are the first and the last names in a long line of world-known reformers. From the annual reports of the Prison Department I was informed of the heavy problems connected with overcrowding in outmoded buildings and the endeavours to solve them. England has been characterized as a land of contradictions in the prison system, for instance, the rigid discipline of the detention centres compared with the permissive regime of H.M. Prison, Grendon.

It is impossible to give full information about the rich variety of ideas and thoughts in the valuable contributions of the English lecturers. I will confine myself to some remarks on essential points. We spoke frankly during the seminar without any harmful influence on the friendly and co-operative atmosphere and I intend to do the same in these remarks and apologize beforehand if insufficient knowledge of English should make them too unpolished.

Our basic problem in the present state of penology is the confusing lack of a clear philosophy, some

kind of a firm concept of our aims. It was an ever-returning assurance in the lectures that we have changed our basis from that of punishment (retribution, deterrence) to that of rehabilitation. This is only partly true. We risk to betray ourselves and the inmates too if we take this for granted. The reaction of society is based on a disapproval of a forbidden act and the reaction is something unpleasant for the person against whom the reaction is directed. He conceives it as a punishment even if we try to disguise the fact by those equilibristic exercises in terminology in which we have achieved so great a dexterity.

Another source of confusion is the discussion between the psychological-psychiatric orientation and the sociological orientation in criminology. A lecture given by Dr. Howard Jones demonstrated how different are these two approaches. Is the ultimate cause of crime a deviant personality or the fact that some persons do not accept the norms officially approved by the ruling class but norms of another culture? It is evident that the choice of a programme of treatment must be heavily influenced by the answer to this question.

This has in its turn essential bearing on the problem of training the staff of all levels. It is easier to tell *how* we shall teach than *what* we shall teach. The organization of training and the teaching methods *are* important subjects but not so important as the content of the training.

There are some basic points from which training can start without reaching unsafe ground. One is how to combine safe custody (when needed) with a humane treatment. This is part of the classical prison profession. It is a very complicated task and should not be overlooked in the search for a "scientific" approach. All too often we confound humanization of the punishment with treatment. Treatment itself is an ambiguous term. It can cover every way of handling a prisoner. And it can mean the most ambitious approach to a changing of the personality. We have to keep quite clear in which meaning we use it. Ping-pong is not necessarily a kind of treatment.

Admittedly, there were in the lectures of the seminar more questions than statements of the real content of "treatment". But the lecturers strove hard to point out possible ways to establish a better foundation of our work. "GROUP WORK" and "CASE WORK" were the recurrent watchwords.

CASE WORK is used in variety of activities, ranging from an activity demanding several years' training and hence only mastered by very few people to mere collecting of some initial information on the individual inmate and routine social work done by a prison officer. More in focus is the widespread use of the various forms of GROUP WORK. Manuel Lopez-Rey

talks in an article "Administrative Penology (England and Wales)"* of "penological inflation" and mentions as an example the use of group psychotherapy and group counselling. "More often than not", he says, "penological inflation, like other inflations, is an index of failure of administrative penology to solve its fundamental problems". Although I would not put it so hard, I must admit that Mr. Lopez-Rey is touching a very sore point of many modern penal systems, the British not excluded. There is an analogous point in the improvement of soil. Most of the "improvement" is in fact reconditioning of a soil, spoiled by human inconsiderateness.

I sincerely admire our English colleagues, trying so arduously to counteract the harmful influence of the Victorian prison building, shortage of staff and other inconveniences imposed on them. But I doubt whether these heroic efforts and among these, the analytically inspired group sessions, guided by modestly instructed guards will be the signpost of the new penology. The visit to the new Blundeston Prison and the highly intelligent and inspiring explanation of the basic ideas of its treatment did not entirely reveal how the British penology will proceed. In this prison the structure itself encourages the dynamics of small groups leading some sort of community life in a limited, easily controlled, living unit. So far as I understood it, the whole prison functioned as one community, the prisoners swarming all over the central buildings, living quarters included, to a certain extent disturbing organised activities and in any case excluding the forming of small controlled or at least influenced groups. That things can be done otherwise (and in my opinion in a way more favourable to development of the personalities of the inmates) is demonstrated in the functioning of the women's prison, Styal, Wilmslow. I suspect that the system put in practice here will be the starting point for a new reform and, if so, I presume that much group activity in the analytical place the officer functioned as a style will be superfluous. In this group leader in a natural and practicable way. The Styal approach indicates that you in no way need modern concrete buildings (often so grey and cold) to replace the huge corridors of the 19th century prison. The demands are two fold. The units must be small and the frames must permit the creation of a comfortable atmosphere. This was achieved in Styal. None of these demands can be met in the old prisons. The abandoned camps of the military forces, so generously left to prison purposes, may be rebuilt in this way but so far, worn-out barracks and insufficient

*The British Journal of Criminology, Vol. 5, No. 1, January 1965, page 5.

resources of personnel (quantitatively), make them poor frames for a work aiming at rehabilitation.

In discussions it was often asked what was the real aim of group work and first of all the demonstrable effect of it. One lecturer openly admitted that the only effect so far proven was that discipline (in a modern sense) improved. Less tensions, relaxed atmosphere, more tolerable working conditions for the staff. This should not be underestimated since various therapeutic activities (if such are undertaken) could not succeed in a hostile atmosphere. But apparently a relaxed atmosphere may be consistent with a failure of rehabilitation. The non-British participants remarked that more was heard about the brilliant effects of group work on staff attitudes and staff satisfaction than about the effect on the personalities of the inmates. One answer was that all good prison reform has to start with the training of the staff, which is certainly true, but nevertheless, our final goal has something to do with the attitudes of the inmates.

In the English prison system more and more responsibility is laid upon the basic grade staff. This is a healthy and promising development. It calls upon not only more courses, local and central, but also on more advice and supervision. The senior staff will, to an increasing extent, have to assume the role of advisers and supervisors. This development makes the need for a theoretical framework more urgent. What can the basic grade officer do in his role of a therapist and what can he not do? It must be emphasized that even the brightest guard cannot replace a trained psychologist or an assistant governor with far more extended educational background. It is true that if the ratio psychologist-inmate is 1 to 1,200 (or if the forensic ones are excluded perhaps 1 to 2,000), the psychologist cannot deal with other roles than the advisory. But this in no way means that there is no other role for a psychologist. For certain members of this esteemed profession it is certainly a more attractive role to be kept out of the burdensome face to face activity and assume a more detached role. This, however, does not change the fact that some problems of the inmates are so complicated that only a psychologist (maybe even a psychiatrist) is the appropriate person.

I just mention the initial courses for newly appointed officers. To my opinion the curriculum of these courses ought to be reconsidered from the viewpoint that everything that can be learned in the local institution should be learned there, which would give more place for the introduction of basic viewpoints in the centralized instruction. The refresher courses seem very short. This permits more officers to be trained but prevents a more profound study. In my country refresher courses have a duration of eight weeks but cannot

be arranged so frequently as in England.

The real pioneering element among the English training activities seems to be the training of the assistant governors. The development of this will be followed with great interest in all European countries. In Denmark as in many other countries of the region, full academic training (academic degree) is a minimum qualification for the governor grade. This gives a good basis for further studies, which deplorably, are entirely left to the individual members of the class. There is an urgent need to establish a regular training in penology for this group. The level of training will depend on the entrance requirements. Also here the maxim is valid: "What could be learned elsewhere should be learned there". Still, there will be subjects enough. The training for the governor grade should not only be a series of lectures from related branches (a tablespoonful of this and a teaspoonful of that), but comprise what could be called "essential penology", a subject so far modestly described but covering offensive realities.

The problem in this respect in smaller countries is that the number of candidates for such training is too small for building up schools with a sufficiently numerous and sufficiently qualified staff of teachers. There are at least two ways of solving this problem. The one is to make penology a department in the universities so that the student can combine this study with the studies of criminology, psychology and sociology. Another is to establish training centres on a regional basis (say, for the northern part of Western Europe).

Perhaps my remarks will seem to my English colleagues and friends too critical and too little appraising the unquestionable merits of the English system. I beg to take this as a vote of confidence. I suggest that the criticism is of more interest than appraisal and ask again for forgiveness if any judgement should be hasty and insufficiently founded. I take the opportunity to thank all who contributed to this memorable experience. We were all deeply impressed by the zeal of all English colleagues whom we met. Together with them we work under the fateful motto of "less eligibility". We have to convince the public of the value of our efforts which in any case run no risk to be overevaluated. In this endeavour we have to be careful not to over sell our products. The recovery work in the English prisons has been criticized. To the extent this work is concerned, not with metal scrap but with human beings, the criticism is out of point. This is just the core of the matter. We refuse to characterize any man as refuse. We believe in recovery. I was glad to meet this attitude, in England, as strong as I have met it anywhere.

Our New Prisons: Adapting Building Design to Community Patterns

BRIAN PROCTOR, DIP. ARCH.

Research Scholar, Architects Registration Council, 1962

THE GOVERNMENT White Paper, *Penal Practice in a Changing Society*, published in 1959 announced the first major prison building programme for well over half a century. Since the Victorian prisons were built advances have been made in the social sciences and in building techniques, and there is now in existence a body of knowledge which has not been fully related to prison training. Certainly a re-appraisal of penal building is needed, and it should be carried out before too much of the new building programme is implemented.

What is needed above all in our building programme is a flexibility which will enable buildings to be adapted to meet the needs of new advances in sociology and penology. The old Victorian prisons, having been designed for purposes other than that of rehabilitation, failed because they could not accommodate new methods of training. The mistake must not be repeated.

Alexander Paterson said that modern methods of penal treatment must be based on the principle that a man cannot be led to adjust himself to the demands of society if he is deprived of every form of social experience while in prison. If this is so, how much of the normal community pattern can be retained within the limits of an abnormal and captive community? The best service that the architectural approach to prison reform can render is to find this out through the design and lay-out of buildings, which can then be used for further experiment.

It would seem logical to introduce into the abnormal prison community as much normality as possible. With a realistically functioning community in prison there would be the opportunity for skilled staff to assess the ways in which an inmate shows maladjustment, and to practice reorientation within the prison community framework. Furthermore it should be possible to

make a more accurate assessment of an inmate's rehabilitative progress based on his showing in the community of the new prison. The ability to control, essential to any method of rehabilitation, must no longer be viewed only as the rather negative method of keeping the inmates from escaping, but as the means whereby this artificial community can be manipulated in any way conducive to the rehabilitation of the inmates.

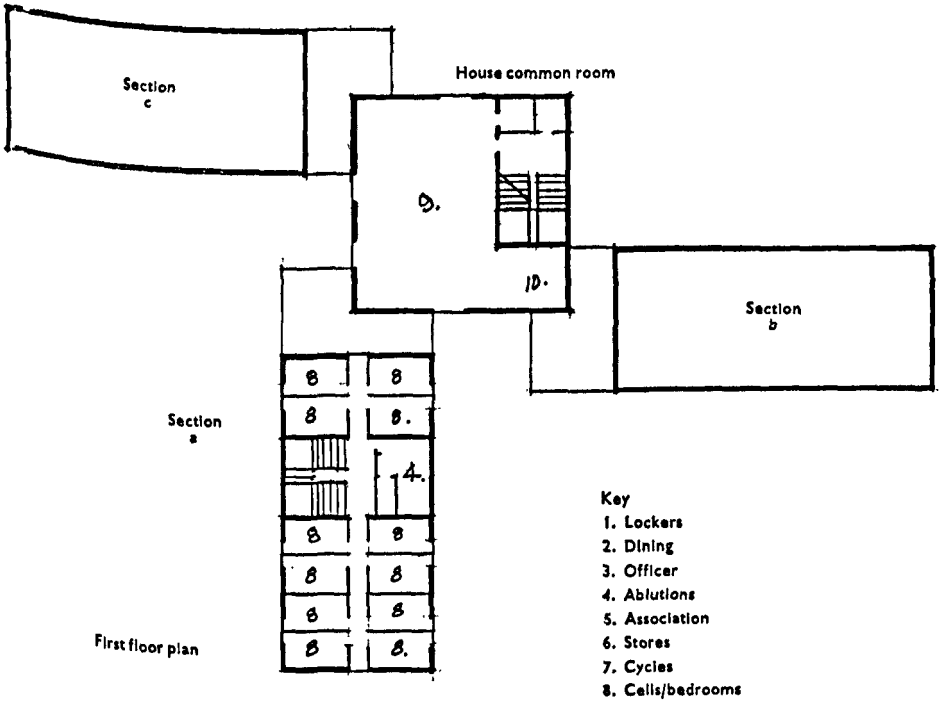
Community Groupings

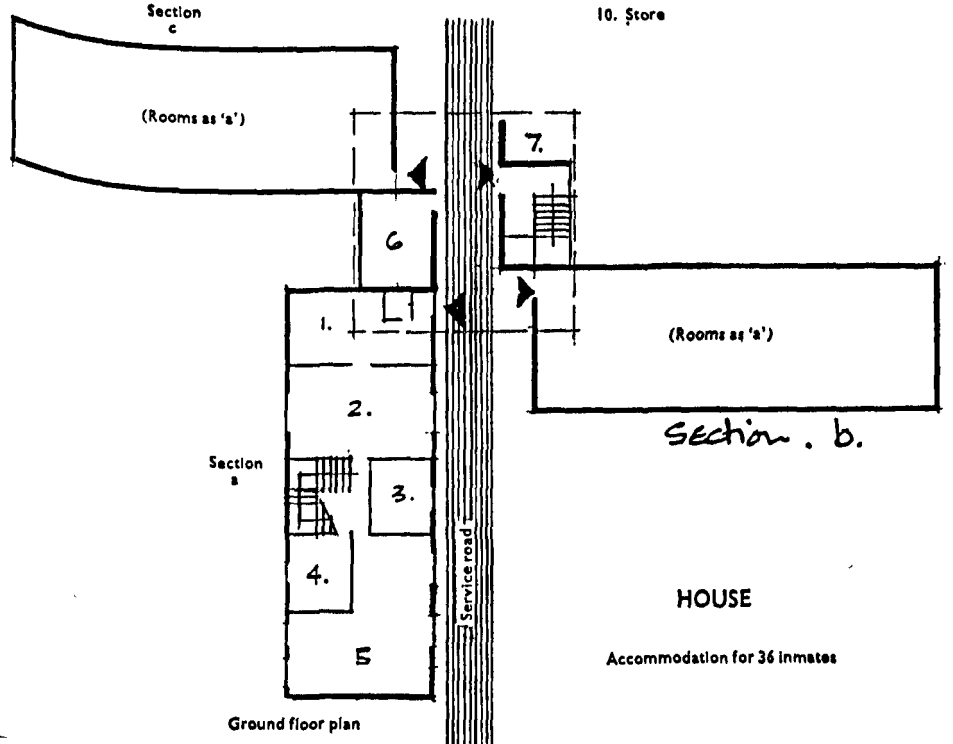
Although a community is an infinitely complex organization, a minimum of four basic groupings seem relevant in this context. They are the family, or intimate group; the immediate neighbourhood; the wider but still familiar locality; and the total community. Within these patterns the individual personality develops in relation to the strengths and weaknesses of those with whom he comes into contact, and within the prison group there should be similar facilities to permit comparable development.

In this scheme the family group has its counterpart in the Section which houses the smallest of the prison groups, and I have made twelve inmates the number on which to base the design, but the building is planned to permit experiment in group sizes. The Section is a suitable place for group therapy or counselling to be carried out on the "home ground" of the inmates. A small group is known to make it more difficult for inmates to contract out of prison life. In terms of general discipline the prison population, always notoriously difficult to handle, will be controlled more easily in such small numbers, and the staff will be able to exercise more personal supervision. From this more opportunities should arise for positive staff/inmate relationships to develop. The Association area, which is similar to the living-room of the family, provides accommodation for leisure-time activities of a sedentary nature and there is also a dining-room area, positioned for easy access to the Service road running through the House unit, along which food deliveries are made. (See diagram.)

The dimensions of the dining area are such that it can be readily converted to a sleeping area if extra accommodation is required as a result of experiment in group sizes. The Association area will then be called upon to serve as a dining-room as well. The sleeping cell modules are designed with non-load-bearing partitions to facilitate conversion into dormitories, so that on the first floor, too, experiments can be carried out with both forms of sleeping unit. A security partition has been designed which can be added or removed without the necessity for structural alterations.

Already precedents exist for this family-type group in the Swedish small group pavilions, in some of our mental hospitals (e.g. Belmont Hospital family groups), and in





Section . b.

HOUSE

Accommodation for 36 inmates

certain children's homes. At Roxtuna, a Swedish institution for youthful offenders with psychiatric complications, the inmates are housed in six separate single-storey buildings each housing seven. Two of these pavilions are surrounded by a steel mesh fence providing maximum security. There is one separate pre-release open building for nine inmates. Each group dines within its own pavilion, food being delivered from a central kitchen.

At least three Sections (families) are combined by lay-out into a House unit (neighbourhood), and flexibility of House size is possible because space is provided for the addition of an extra Section.

The provision of toilet facilities in security sleeping cells is a subject debated in this country with much passion. The present British practice is to provide the inmate with a pot to be emptied each morning. This is totally unsuitable, and if lavatories are not to be provided inmates should be able to contact night staff for escort to communal ablutions. Certainly it is extravagant to provide a lavatory for each inmate, or so it seems at the moment, but experience may prove it to be essential. The solution which flexibility dictates is to design the cell to allow for the installation of a lavatory at a later date with minimum structural disturbance. In my Section design I have done this, while allowing for communal lavatories a short distance from the sleeping area, which corresponds to the facilities available to the normal family.

In this new prison community the part played by the neighbourhood in normal life is taken over by the House. Its main expression is to provide a focal point for the family groups in a common meeting room where the atmosphere will be akin to that found in a community centre or club. Within the House the individual will find a wider range of inmates with whom he can relate, and there will be scope for inmates to take on responsibilities in the organization of and participation in activities. Here too, as in the Section, there can be consultation and discussion between inmates and prison authorities on matters concerned with the running of the House. Already we have a precedent for this type of neighbourhood in the houses of our approved schools and borstals, and in the cell block of Blundeston Prison. Club activities, such as table-tennis, darts, billiards and snooker, take place in the common room of the House.

The House headquarters straddles the Service road at the point where the Sections adjoin, the common room of the House being at first floor level and the administrative office on the floor above this. All the House officials are provided with office accommodation on this top floor. Personal control is still possible at House level, emanating from the housemaster (of Assistant Governor status), deputy housemaster, and

matron-case-worker, together with the principal officer of the House and the Section officers. The common room of the House is designed for flexibility of function —to allow inmates and staff to be seated for discussions, to accommodate the sports equipment sufficiently well to make participation easy, and for use as a dining-room if it is found that eating here is preferable to Section meals.

The total prison community represents the locality of the outside world. In miniature the facilities of the normal local community are there—basic education, sports and hobbies, shop and canteen, religion, medical care, vocational training and work. Opportunities for the expression of personality come from inmate participation in those activities, sporting and cultural, for which the larger social group is needed. The administration is now present in the form of the Governor and his staff of medical, religious, technical and clerical workers.

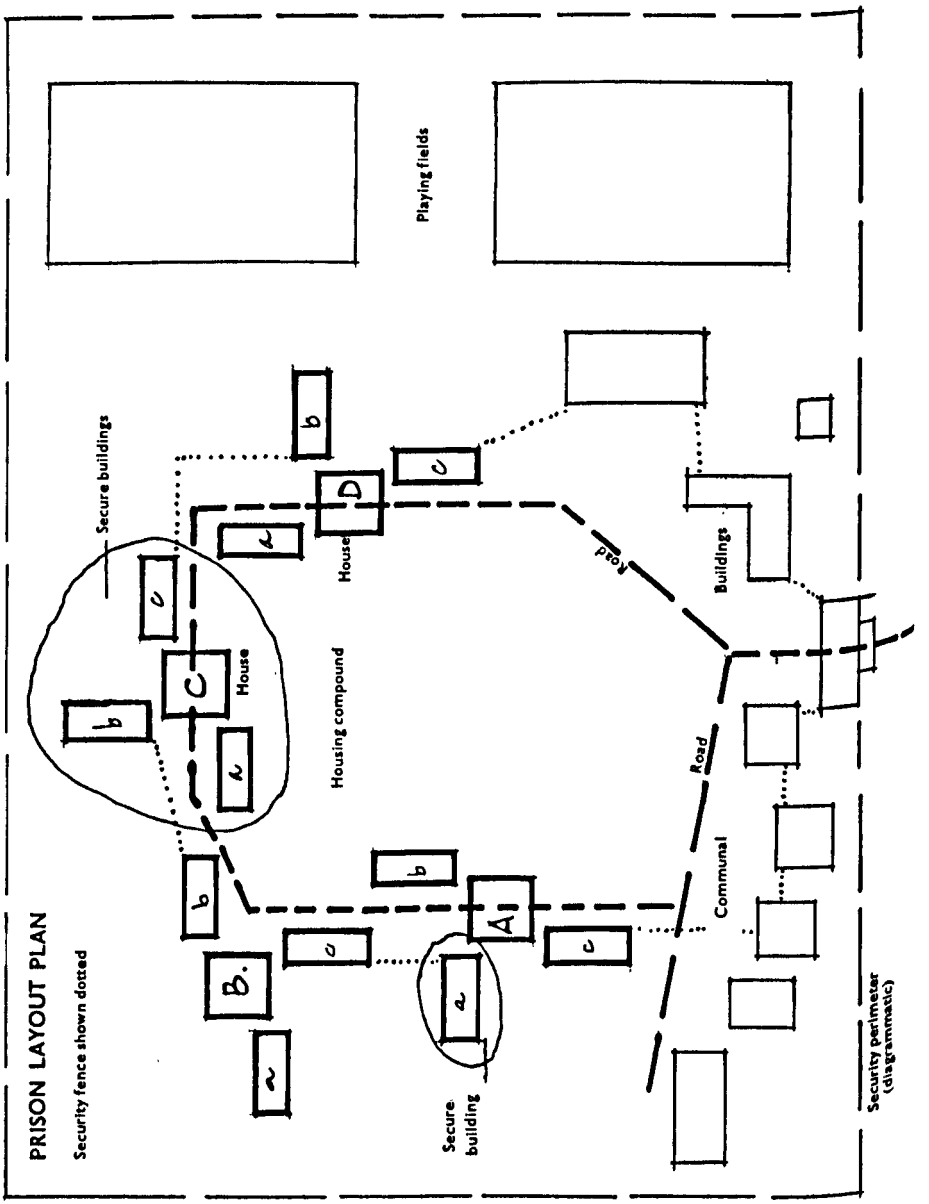
The size of the prison locality must be subjected to experiment just as that of the Section and House will be. The Governor should be able to make some personal contact with each inmate, which entails in this scheme an acquaintance with a minimum prison population of 144 and a maximum of 256 if Houses of four Sections and 16 inmates each are built. This could be doubled should it be found necessary, for the locality planned will allow for the number of Houses to be increased to eight.

The principles of community living are relevant to all types of prison, and the buildings are designed so that special facilities such as vocational training or increased security are capable of assimilation without altering the basic design. Inmate housing is the generic factor in adapting community patterns to prison life.

Security

Because the prison population varies both in numbers and in security-classification from month to month, there must be prisoners at present serving their sentences in closed prisons who are not considered security risks. Where the number of places for security and non-security prisoners is fixed, constructive placement is not possible for all prisoners. Place filling then becomes a yardstick. . . . What is needed in our new prisons is considerable flexibility of security measures so that incoming prisoners can be more suitably placed according to their classification.

Sweden successfully uses institutions which incorporate sections of maximum, medium and minimum security, through which inmates progress towards release. The prison design which I am advocating can obviously be used without any adaptation as an open institution, however it can also be used for medium and maximum security training with a little adaptation,


PRISON LAYOUT PLAN
Security fence shown dotted
Secure buildings
Playing fields
Housing compound
House
Road
Buildings
Road
Communal
Secure building
Security perimeter (diagrammatic)
A
B.
C
D
a
b
c

and as such can incorporate widely varying and readily adaptable degrees of security. Within such a prison scope is allowed for experiment with training techniques, and the cohesion of training groups can be maintained by suiting the degree of security to the state of responsibility of each group, with the minimum of transfers.

Such flexibility is possible because each Section can be isolated by securing its single entrance. All windows within the inmate housing area are fitted with security grills which—when minimum security is the order—can be removed and stored, or slid into a special cavity beside the window. Thus each section can be rendered basically secure if necessary. Alternatively the sleeping floor only can be rendered secure, and/or the single cells can be isolated.

Security within the confines of each House can be assured by controlling the exits and entrances of the Service road, so that some or all Sections can enjoy freedom of movement within the secure House. The layout of the inmate housing, together with the social buildings, forms a compound which can be made secure by the addition of security-fence infill between the buildings. This allows for freedom of movement, if necessary under staff control, within the compound for inmates in some or all of the Houses and Sections. Thus some of the Houses within the compound can be totally secure (e.g. House C in diagram) with no access to the compound. House B in the diagram is open with all Sections having access to the compound and House A has one Section rendered secure and two others open with access to the compound.

Finally a relatively inflexible perimeter security can be added for institutions where maximum security is necessary. However because the basic housing remains the same, within such an institution the same opportunities can exist for flexibility in freedom of movement within the prison.

Summary

This research has been instituted because of the evidence that Blundeston Hall Prison is to be made the blueprint for future British prisons. Blundeston fails because it has been designed primarily for security, with rehabilitation a secondary consideration. Although it is a distinct advance on the Victorian prisons it still retains some of their worst features, e.g. the monumental institutional form of building. That five more prisons like it are planned is depressing news—for time is needed to see how Blundeston functions, how it can be improved upon.

The prison I have attempted to design can serve in many ways—as something akin to the present Victorian prison, as a Blundeston, as a Roxtuna, or in ways quite different from any of these. There is nothing to be lost by building

the flexible-security prison, and a great deal to be gained from the result of experiment.

A building programme of institutions incapable of flexibility is extremely short-sighted in view of the anticipated advances to be made in sociology, criminology and, we hope penology. For the next 20 years all new prisons should be experimental to a considerable degree, otherwise in a hundred years' time the prison population will be housed in institutions as unfitted for their task as the Victorian structures are today.

OUR CONTRIBUTORS

W. J. BOOTH is the Deputy-Principal of the Prison Service Staff College.

DR. MELITTA SCHMIDEBERG, has been psychiatrist to the Institute for Scientific Treatment of Delinquency (I.S.T.D.) London; physician to the London Clinic of Psychoanalysis; training analyst of the British Psychiatric Society until 1949 when she left to become professor of psychiatry, Adelphi College, New York. She worked for 12 years in New York. She founded the Association for Psychiatric Treatment of Offenders (A.P.T.O.) and worked as director of its New York Clinical Services: medical adviser to the Board of Correction of New York City. She is president of A.P.T.O. and European editor of the *Journal of Offenders' Therapy*. In 1959 she served as official delegate for the American Psychiatric Association to the U.N. conference on juvenile delinquency in London. Dr. Schmideberg is the author of about 120 psychiatric papers in nine countries. In 1961 she left the U.S.A., spent a year studying delinquency and its treatment on the continent, now lives and works in London. She has been described as "an example of the brain drain in reverse".

CARL AUDE graduated in law in Copenhagen 1939 and entered the Ministry of Justice in Denmark 1940. After being a deputy governor and governor, in 1949 he was appointed director of Danish prison industries and since 1956 he has been principal of the central training school for prison officers. He has written a book on Danish penology.

BRIAN PROCTOR qualified at Nottingham School of Architecture in 1961, his finals thesis being a design for a borstal. Granted an A.R.C.U.K. scholarship to continue research on the possible extension of his ideas to prison, he is now working for Somerset County Council.

H. F. FERGUSON, Administration Officer at Hollesley Bay Colony, joined the Prison Service at Northallerton in 1946, aged 17, and has since served at Gringley, Ashwell, Wetherby and Head Office.

S LEAKE is the Chief Officer of Wetherby Borstal. An ex-sergeant in the Grenadier Guards, he has worked in almost all types of penal establishment.

Come Inside

Fr. GERARD BEAUMONT

of the Community of the Resurrection

SEEN FROM the railway, Wormwood Scrubs looks what it is—a prison—an indeterminate mass of grey wall within grey wall. Approached on foot, the great entrance fascinates the more adventurous with its "Come-hither-if-you-dare" look. It resembles something between a permanent set for a large scale German production of Macbeth and the main gate of a metropolitan Spanish bull ring. This theatrical view is denied the convicted prisoner, for he is driven up to the doors in a van designed rather for interior contemplation than for the study of the London scene. His first sight of the prison is from within, where, if any poetry remains in him, he may imagine himself in a monastery garden, well stocked with roses and enclosed by the great romanesque church (centre back-cloth) and tall rococo cloisters which lead to the offices and connect with the first of two large halls on either side. These four halls are identical and look for all the world like full scale models for King's College Chapel at Cambridge before the invention of glass walls. There are windows, of course, designed rather for breathing through than for looking at (or through) and if you can count them all up on one side of a hall and multiply by eight you will know how many cells there are altogether. Double that number and you will know roughly the number of inhabitants for, though the cells are identical and most are occupied by one person, a large minority have three occupants.

The first time I found myself within the cloistered *plaza*, nervously fingering my sermon notes (some five years ago), there was a clear Spanish sky above and I said to myself, "This is the place for me: could I not find some way of doing time here without publicly disgracing my church, my family and friends, and at the same time attempt some reparation for an ill-spent but officially undetected past?" A second visit confirmed to my conscience the need for discipline, and was largely instrumental in precipitating my application for a life sentence in Mirfield. It was therefore with mingled pleasure and apprehension that I looked forward to the mission on which I was to accompany the Superior, Brother Jeremy and Father Medwyn

Griffiths. What the Governor and his chiefs of staff were expecting from us, who can tell? But they had sufficient confidence in the Chaplain, Fr. Derek Tyrie, for it to be extended to us in a very kind welcome and the promise of every co-operation.

We were each allotted a hall as our major pastoral responsibility. The Superior and Brother Jeremy were given the overcrowded halls of the adults—mostly long-term and life sentences. The junior halls housed a more mobile population of boys awaiting suitable accommodation at borstals. Fr. Medwyn and I therefore were able to have a cell each in which to sleep and keep our things. The boys were intrigued by the difficulty we had on explaining that our life in Mirfield was in fact more agreeable than theirs in the Scrubs: *Do you have a cell?* they would ask, *How big?* Rough measurements taken, *About a foot wider and a foot shorter than yours,* we would have to admit.

What have you got in it?

Much the same as you—chair, table, bed (sheets and all), some drawers and a mirror, but no wash stand.

Church parades? Every Sunday?

Every day, chum—seven times a day.

Good God! What were you sent in for?

What indeed! That was what was so difficult to explain. It sounded smug to say that it was the life we had chosen, yet therein lay all the difference. No—not quite all; there was the matter of keys by which nothing in our life, but everything in theirs is regulated. They saw this—there in the halls, their cells were locked behind them whenever they went in, ours whenever we went out.

In each of the halls our main work was visiting in the cells—sometimes at the request of the occupant, otherwise from cell to cell as far as we were able to get round. The response varied in every case but I think none of us found himself made to feel unwelcome. How far these visitations had any more value than that of a change of face and conversation it is impossible to say, though we each had experiences that seemed to involve more than sheer superficiality.

In any military or kindred institution the matter of *voluntary church* is always a problem. With whatever good faith a man may come to church, he lays himself open to accusations of hypocrisy or of escaping some dirty chore. And however insistent the C.O. or Governor may be on encouragement being given, this so often reaches the rank and file in the form of *volunteers for church—you, you and you—NOT you!* However the co-operation of the

prison officers was generously given, even though as will happen in a military or bureaucratic system, things sometimes went wrong. Permission was given, for instance, that such boys as wished might come to the week-day Masses. This entailed some rather complex system of over-night notifications being handed over to the morning watch. Coming to this service meant getting up as soon as roused, "doing" the cell, being marched out into the cold before breakfast and risking getting back to find the porridge either cold or finished. One morning the officer, on this duty for the first time, was astonished to find so much activity so early—*church? Something MUST be wrong. Very well—first twenty, fall in—the rest, back to your cells.* Apart from this set-back, the numbers at Mass grew daily: unadulterated 1662, but without sermon or music: no commentary except for the indication of the page in the B.C.P.: an electric atmosphere and the perfect answer to the question: *Was the mission a success? Did it do any good?* Yes. These early mornings did *me* a power of good.

Excessive zeal in co-operation could sometimes be an embarrassment. Boys will be boys, and policemen are policemen, church is church and clergymen are—well they must be protected. The watchful eyes of the warders at the first of the boys' mission services didn't encourage the relaxed atmosphere that we wanted. The first sign of lively reaction which Fr. Medwyn was working for created some apprehension among the staff, but the burning eyes of the Welsh Father silently won the day and the rest of the week went with a swing.

There was nothing particularly voluntary about the Sunday mission services. We took over the normal parade services—500 boys at one, 500 men at the other—or rather the exact number to fill every seat in the church. The last of these was very memorable. After an opening hymn (and here I must mention that the church is blessed with a fine organ, a first class grand piano in tune with it and an organist ready for anything!) the Superior talked with his usual restrained, unemotional and lucid humour about prayer. He then sandwiched a poem between the next two hymns and handed us over to Brother Jeremy for some active praying. We had written to every religious community of the Church of England to ask for their intercessions for this week, and it was now, during 20 minutes of silence broken only by Brother Jeremy's courageously infrequent direction of intention, that one knew that these nuns were responding and felt that there was a wimple behind every man in the church that evening.

Gracias a Dios (Spanish). It did *us* a lot of good.

"Eleven-plus" Failure and Delinquency

S. LEAKE

I BLAME the "eleven-plus". Like some of my generation and length of service I have been baffled as to why so many young people get into trouble (and have increasingly done so since 1950) in this affluent society of ours when one would think the reverse would be the case. Pre-war, when social conditions were just shocking, one expected a high proportion of young people to get into trouble and of course we regarded the numbers coming into our borstals as a high proportion. With a solid bank of three million unemployed, when "love on the dole" was the norm, the chances of obtaining employment on leaving school were slim and even those who did obtain employment knew that as soon as they reached the age of 18 years, the chances were that they would be put out in favour of a 14 year-old who could be employed for the next four years at a low rate of wage. In the event, however, and in contrast with today's figures, that "high" rate was low indeed.

We had our borstal boys of course, but so many of them were, to quote the report on the work of the Prison Department quoting one open borstal Governor: "vivid, really able youngsters". The numbers who came to borstal were considerably less and the success rate on release considerably greater. Not so many coming in, more succeeding on release in an age when jobs and money were hard to come by. We used to congratulate ourselves on the success of our methods. Now I am not so sure that we had the right to do so. With those figures at the back of our minds we have been guilty of blaming today's methods for the dwindling success rate but so far have been unable to find out why so many young people get into trouble now that the age of the common man is a golden one. The "Johnny come latelys" of the Borstal Service suggest that the better use of probation and the remand and detention centres have creamed off those "vivid" youngsters but even that point, which I accept as valid, does not explain why so many more are getting into trouble in the first place. I repeat, I blame the eleven-plus.

Pre-war, the secondary school was the grammar school and little else. An examination was held yearly at elementary schools for a few places at these grammar schools. If you did not pass you did not go to a secondary school at

all but left the elementary school at the age of 14 years and to have reached "standard seven" was the highest goal one could achieve in a school career. If you won a scholarship you went to the grammar school providing your parents could afford the extra cost of school uniform and books, and to keep you at school for an extra year or so. As I remember, rather less than half of those who won the scholarship were able to take advantage of the accomplishment; their parents just could not afford it. So that in after years when asked the question: "What school did you go to?" and the answer was this or that elementary school, leaving at the age of 14 years, there was no sense of shame at not going to a grammar school, no sense of being less clever or less well educated than the majority. It was just that you had been unfortunate in your choice of parents. There was no high mountain of cleverness raised by the eleven-plus where the "kids" of today graze the slopes according to their mental nimble-footedness, there was only the flat plain with the occasional bump in the landscape that grew a more nourishing educational pasture and if in the distance there were hills, they were the hills of the public school and although you knew that there was "gold in them there hills" you knew also it needed gold to get you there.

Nowadays things have changed. Most parents are well able to afford the cost of their children going to secondary schools and all children do in fact go to secondary schools whether they be grammar or modern (or clever and less-clever) and they all wear uniforms paid for by the family allowance and a reduction in income tax and maintained at those schools by the same "perks". So the youngster of today has no one to blame except himself for not going to a grammar school . . . and there comes the rub. Finding himself less clever and being indelibly stamped as such by the segregation of the eleven-plus without at the same time coming from less affluent parents than those who have made it, he becomes bitter and is determined to show them i.e. society, that he is just as good as they are. He cannot beat them with his brains so he tries to beat them with his fists.

The case for having comprehensive schools is a good one if only to reduce the crime rate. When children are able to switch from one educational stream to another under the same roof and wearing the same dress without loss of self-esteem, when children are no longer stigmatized for life by an eleven-plus failing, when late developers always have the chance to make up loss of ground, then I believe will come the much needed drop in juvenile delinquency. The quality of those who then get into trouble will of course be even lower than it is at present but by then the methods of dealing with them will have improved. The quantity will be much less.

They Sold . . .

Rear (left to right)
Senior Foreman of Works Mr. P. A. Balmer (Blundeston); Dr. M. A. K. Booth, Tutor Organiser (Hollesley Bay); Assistant Governor Mr. J. Lee (Staff College); Officer (T. A.) A. W. Douglas (Blundeston); and Officer (PEI) D. Miller (Hollesley Bay)

Front (left to right)
Principal Officer P. Moyes (Staff College); Officer Miss M. Minns (Holloway); Officer J. D. Hemlin (Hollesley Bay); and Officer Gilbert (Norwich)

. . . Cells

by THE SEA SHORE

H. F. FERGUSON

Disgusting to Allow Recruiting on Sea Front

"'THE USE OF the Sailors' Home on Marine Parade as a recruiting exhibition for H.M. Prison Service was not psychologically sound,' claimed Mr. L. B. Westgate, at last night's meeting of the Yarmouth Council.

"'People on holiday don't want to see advertisements for Prison Warders along the front in a place that should be a place of gaiety and happiness', he said.

"Mr. E. Cannon thought it was disgusting that such a thing should be allowed.

"But after Mr. J. Fryer, Chairman of the Properties Committee which agreed to the application of the Home Office, had explained that there was no macabre intent the resolution to refer the matter back for further consideration was defeated."

So reported an East Anglian newspaper earlier this year.

Later . . . The golden mile at Great Yarmouth, the tang of frying onions, the heady scent of candy floss, the nasal bleat of bingo callers, the interminable ebb and flow of traffic and people. People by the thousand promenading, laughing, jostling, eating, intelligent, moronic; wearing foolish hats, long hair, short hair, no hair, short skirts, long jeans, Sunday suits; marrieds, singles, respectables, disreputables; beats, mods, rockers. You name them they were there. And there right in the centre like a matron in a room full of models, rather woebegone and drab, stands the Shipwrecked Sailors' Home and there, with the co-operation of the Great Yarmouth Town Council a Prison Service exhibition and recruiting campaign.

Later still, from the local press:

Prison Service Exhibition Big Hit with Holidaymakers

"Within a day of being opened at the former Shipwrecked Sailors' Home, an exhibition staged to stimulate interest in the Prison Service as a career became a big hit with holidaymakers in Yarmouth.

"On Monday after the official opening in the morning at least 3,000 people visited the exhibition and within minutes of the doors opening at 10 a.m. the next morning there was a continuous queue of people filing round the exhibits in the crowded building.

Public interest has been maintained since.

"Protests against holding such an exhibition on the sea-front were made at last week's meeting of the Town Council when Mr. L. B. Westgate asked if it was psychologically sound to hold the exhibition there. Visitors however have made it one of the most popular attractions on the Golden Mile.

Out-of-Rut Career

"The exhibition sets out to publicize the various openings the Prison Service offers to men and women in search of a worthwhile, out-of-the-rut career.

"It emphasizes the fact that the modern Prison Officer is far more than a mere gaoler and that his role has undergone a considerable change in recent years because he is concerned with the training and rehabilitation of prisoners as well as with their supervision and control.

"What did the slowly-moving file of visitors see as they went round?

"The exhibition, the first of its kind organized by the Prison Service, occupies most of the three floors of the buildings and the exhibits include film shows, physical education displays by boys of Hollesley Bay Borstal Institution, exhibits of vocational training and photographs of aspects of life in prisons and borstals. A museum exhibit contrasts life in prisons in former times with conditions in present-day establishments.

"The exhibition lays strong emphasis on the training aspect of prison life.

Prisoners' Work

"The displays of work done by inmates of prisons and borstals cover an amazingly wide range of products, including domestic goods, engineering products, traffic signs, shoes, prison clothing, overalls, underwear for the Armed Forces, wireless aerials (made for a commercial firm), decorative and reproduction iron-work (including two halberd heads), joinery work, cabinet making (including such objects as church chairs and a lectern), file indexes, teapots, kettles and a whole range of domestic products. Specialized aluminium and non-ferrous products.

"Products from Blundeston Prison workshops, include prison clothing, overalls, shoes and buckets.

"Physical education for inmates of borstals includes practical instruction in such demanding pursuits as mountain work and in the physical section are tents and other gear made and used for this work in Snowdonia. Also included are canoes built in borstals for physical education and a great deal of other sports gear.

"Models of Blundeston Prison, Albany Prison (now being built on the Isle of Wight), and of Eastwood Park Detention Centre which is still in the design stage are on view, and these are supplemented by scores of photographs taken at many other prisons illustrating the

life and work of Prison Officers.

"Stress is laid on the fact that there are many openings for trained tradesmen and one section exhibits the range of tools and equipment provided free for the use of them in Prison Service. Information about pay, promotion and pensions is given.

"The main exhibition hall on the ground floor has been decorated by boys at Hollesley Bay Borstal and all the main notices about the exhibition have been painted and prepared by them. Many paintings and drawings by the inmates of Hollesley Bay, Norwich and Blundeston are on the walls.

"The exhibition has been organised by the Governor of Hollesley Bay Borstal, Mr. John Gilder, and was officially opened on Monday when members of Yarmouth Town Council and representatives of the Police and Magistrates were received by the Governors of Hollesley Bay Borstal and Norwich and Blundeston prisons; and the Assistant Director in charge of staff training at the Home Office, Lt. Col. J. S. Haywood.

"Staff from Hollesley, Norwich and Blundeston, and from Wakefield Staff College, where Prison Officers are trained, and a woman officer are on hand to give information about careers in the Prison Service."

A gymnastic display was given on part of the central beach on each Wednesday and Sunday afternoon during the period of the campaign. This was previously announced by the erection of placards on the front directing the public's attention to the exhibition at the Shipwrecked Sailors' Home and giving details of the gymnastic display. The object of this particular exercise was to capture public interest on the beach and indeed it proved very effective in that after each display there was a rush on the exhibition building. The display drew an average audience of 2,000 on each occasion.

It is likely to be a long time before the success of this campaign can be measured in terms of recruitment. It may well be that the information given and the seed sown at Yarmouth will not bear fruit for some considerable time in the case of men who are satisfied in their present employment, but in the future if perhaps they become dissatisfied with their employment, their thoughts will turn to the Prison Service because of the visual impact of the exhibition. In addition there were a great many serious enquiries from young men of 18, 19 and 20, often accompanied by their fiancées, and also from parents on behalf of their adult children who were not with them on holiday.

It could well be that from a recruitment viewpoint *proportionately* more could be achieved from a smaller exhibition so long as a sufficiently dramatic publicity medium could be devised to capture the interest of the general public. The real recruitment value at Yarmouth lay with those men

and women who, once inside the building, wanted to talk with the staff rather than rubberneck at the exhibits.

Comments from visitors, as might be expected, ranged from the "Cor, it doesn't seem much like punishment to me", and "No wonder there is a crime wave" to, in terms of uplifted surprise, "I didn't know a Prison Officer's job was like that" (probably carrying a preconceived notion of two horns neatly concealed under the headgear and a tightly rolled tail!) and from a Police Sergeant on duty on Marine Parade: "In the whole of my experience in Yarmouth I have never seen an exhibition that has attracted so many people and which has been so genuinely enjoyed as this one".

Primarily this building was hired for the purpose of recruitment and the exhibits set up were intended to induce the public to come in so that staff could deal out literature and propaganda. And of course it worked. But also the vast majority of visitors had not either the equipment for a Service career or the remotest intention of joining, and consequently, certainly in terms of numbers, the primary effect moved from persuading men and women to join the Service to presenting a true picture of the Prison Service to the public at large. In public relations jargon "improving the image". Here we were tremendously successful and perhaps this sort of exhibition is a means of helping society to accept their responsibilities for the criminal. Certainly it generates a fresh wind to blow away the usually nebulous misconceptions of prison, borstal and detention centres held by the vast majority.

SOME PEOPLE are violent or otherwise anti-social because they suffer from mental disorder. But by no means all mentally disordered people commit crimes. Understanding and tolerance of those who behave badly because they are sick in mind must not mislead us into believing that mental disorder is necessarily inseparable from anti-social behaviour. The vast majority of the mentally ill and of the mentally handicapped are no more dangerous to the community than are the vast majority of the population as a whole.

The complex relationship between crime and mental disorder is discussed in a recent issue of *Mental Health*. Contributors included Dr. T. C. N. Gibbens on "Age and Crime"; Dr. H. R. Rollin on "The Law and the Mentally Abnormal Offender"; James Tinn, M.P. for Cleveland, North Riding of Yorkshire, on "Detention Centres—the First Phase"; Oliver Stott on the work of the Langley Homes for ex-prisoners; Valerie McLean on "Delinquents and their Families"; and Dr. Northage J. de V. Mather on "Criminal Responsibility".

Mental Health is published six times a year by the National Association for Mental Health.

Bedside Books for the Royal Commission

selected by

N. J. TYNDALL

WHAT ARE PRISONS really for? A simple question to ask but an exceedingly complex one to answer. Obviously prisons exist to express in concrete form society's disapproval of the criminal, and to this end custody is essential. Yet the frequent use, in addition, of such words as treatment and training imply that prisons exist for quite a different purpose besides.

Two recent books demonstrate clearly that we are playing half-heartedly at implementing these positive goals at present. Both examine different aspects of the Service and produce convincing arguments backed by extensive research to challenge our present schizophrenic attitude to prisoners and their reform, rehabilitation or what-have-you.

Sociological Studies in the British Penal Services, edited by Paul Halmos, is No. 9 in the Sociological Review Monograph series published by the University of Kelle (42*s*.). Please do not be put off by this formidable title. This is in fact a collection of short but original articles on a wide variety of aspects of penology by prominent authors. Sprott and Hall Williams on Sentencing Policy; Howard Jones on Approved Schools; Mays on the Juvenile Liaison Scheme; Whitaker on the Police.

It is the articles concerned with penal administration, however, that demand the attention of all involved in the management of prisons. There is the first detailed study that I have seen of work in a training prison, a study undertaken by Cooper and King at Maidstone. In the light of the recommendations of the Advisory Council on the Employment of Prisoners they examine the various reasons expounded for making prisoners work. These seem to fall into two broad categories—economic and penological or social. These arguments are often confused, claim the authors: an industrial programme which seeks to implement them all will end by achieving none.

Maidstone's industries fail to achieve the economic aims. But more significantly they also fail to succeed with the penological aims. For instance, one of their objectives was to inculcate in prisoners the virtue of steady employment, yet the average time a prisoner had between work changes during sentence was about four months.

The demand for policy decisions about priorities in prison industries is echoed by Gordon Rose in an article on staff structure in prisons. Rose looks at the role of the Governor and stresses particularly the need for administrative decentralisation as an essential to clarifying penal objectives. Spencer also contributes an article of vital management importance examining the transition from security prison to therapeutic community, with somewhat pessimistic conclusions; such a change makes demands on all staff. "For the professional staff there is the unlearning of orthodox professional roles and the absence of support which comes from professional detachment and the possession of expert knowledge which remains unchallenged within the institution. For the custodial staff there are the strains arising from the removal of the former hierarchical system with its clearly defined regulations and the maintenance of social distance between staff and prisoner."

Each of these articles comes back to the need for a classification system based on a rational approach to penal treatment. An *ad hoc* selection process with no feedback will perpetuate a haphazard penal system. Finally Gibbens and Prince examine the results of borstal training in more depth than mere reconviction rates.

The other book whose publication coincides happily with the Royal Commission is *Prisoners and their Families*, by Pauline Morris (Allen and Unwin, 50*s*.). This is for browsing through rather than reading from cover to cover. Here is a mass of material, and one wonders as much at the work involved in pursuing 824 married prisoners and their relatives with lengthy questionnaires from Lands End to Carlisle as at the fascinating results of the enquiry.

Of course one is not altogether surprised at what emerges. Everyone always says that it is the wives and families at home who suffer, while the prisoners enjoy telly and mixed grills inside. But, somehow, when presented in facts and figures, the reality comes into clearer focus. Only 54 per cent of wives visit their husbands on every possible occasion (i.e. monthly): 30 per cent of married prisoners never send out visiting orders: 58 per cent of wives were living on less than £7 10*s*. per week and approximately half the wives were receiving treatment for some form of physical or mental illness: 30 per cent of the wives of civil prisoners were living in conditions of dirt and squalor.

This research highlights that we are at present just scratching the

top of the iceberg of the rehabilitation of the prisoner and his family. It underlines the inadequacy of our present resources for coping with the problems, and hints that welfare officers at present are geared to deal with material problems such as finance and housing rather than personal problems.

But these personal problems loom large in the findings. A third of the wives were troubled about bringing up their children, a similar number by loneliness and sexual problems and almost as many about what would happen when their husbands returned home.

The husband-wife relationship seems to be the key factor. Three-quarters of the prisoners reported serious marital conflict before their conviction, arising from difficulties with in-laws, sex, drink and, very frequently, going out "with the boys". Viewing their marriage from the safety of prison, the husbands were more optimistic about their future relationships than the wives outside. Certainly any prison official knows that prisoners look at life outside through rose-coloured spectacles. But have we begun to deal positively with the clear implication behind these figures, that many prisoners are sheltering in prison from intolerable marital disharmony? It looks as if the husbands know it, and the wives know it, but that both collude with the officials in pretending it is not so. Let's face it: prison is the surest protection from nagging wives, and from being reminded that one is a failure as a husband and father.

Crime and its Correction: An International Survey of Attitudes and Practices by John Conrad (California University Press, $7.50), is another challenging book. Mr. Conrad has travelled the world with a tape recorder, from a corrective labour colony in Russia to an open borstal in the Oxfordshire countryside and he has produced a global view of correctional services.

He records faithfully what he finds, interspersing his pages with personalities as well as theories, often, one senses, with his tongue in his cheek. His final two sections face the issues in correctional services in realistic fashion, fully in keeping with his wish in an earlier number of this Journal that the doers and the thinkers develop greater understanding of what the other is doing. Thanks indeed to this American thinker for producing a book free of jargon, in a mere 300 pages, that is readily comprehensible to the doers.

Finally there are two other current books just worth a mention. *The Grey People*, by D. W. Menzies (Cassell, Australia, 18*s*.) is a very simple book, outlining the work of a Scottish priest who became a probation officer in Australia. He hates institutions (having himself suffered in a boarding school as a youngster), considers father rejection and social pressures are basic factors in creating criminals and

believes that prison and probation officers should be understanding father figures. All good, worthy stuff.

Not so *Our Dear Delinquents*, by Sewell Stokes (Heinemann, 25*s*.). As a journalist, Mr. Stokes is free to shoot off arrows at all and sundry, and does so with evident enjoyment. I made the mistake of reading his book without first seeing the sub-title which only appears on the dust cover: "A cautionary tale for penal reformers". Consequently I was expecting a serious assessment of the borstal system. What I got was a facile story about two characters, Audrey and Terence, presented as a lady do-gooder and borstal con-man stereotypes. Having set them up laboriously, Mr Stokes knocked them down, apparently supposing he had demolished borstal with them.

Books about borstal are so few and far between that it is a pity he did not produce a more substantial criticism. Because, of course, he is right in his basic contention that there is much in borstal that passes for system but which is actually highly unsystematic. He only found two institutions that had any system (and, by that, he meant system that appealed to him), Reading and Huntercombe. The rest are condemned, along with "the powers that be who prefer to dawdle, rather than march, towards their objective". I hope the Royal Commission does not waste their leisure time with this book. But I hope also that some one takes the hint and produces soon a more scholarly assessment of mid-1960 borstal training.

AFTER FIVE years as an officer in the New Zealand Prison Service and two years in the clerical department of the Head Office of that same service Mr. Michael Burgess has recently written a series of five articles on "Practical Aspects of Penology" appearing in the *Solicitors' Journal*.

The "Judiciary's Blind Spot" suggests that penologists are not in touch with modern problems and Mr. Burgess has some fairly harsh things to say about prison officers. On "Prisons", despite what he terms "idealistic press releases", many are "far from being the reformative institutions that many people would like to think". Prison officers, in New Zealand at any rate, appear to be subject to a fairly high divorce rate; the resignation rate the first twelve months of service is as high as 60 per cent.

The "prisoner"—Mr. Burgess makes the suggestion that perhaps brain washing might be given a chance, particularly on recidivists. Concerning the attitude of the general public, the author considers that apart from some misplaced sympathy there is very little idea about what is going on and he makes the claim that his own book *Mister* is as far as he knows the only book giving the prison officers' point of view.

Among the more interesting suggestions made is one that there should be produced a "Z Car" type of programme based on prisons and, like many other critics, he is much concerned that industry must be improved.

The five articles may be obtained from Oyez House, Bream Buildings, Fetter Lane, E.C.4, at 1/9*d*. per copy.