

# Future of Preventive Detention

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THE ADVISORY COUNCIL on the Treatment of Offenders who, in a recent report recommended the abolition of Preventive Detention, drew heavily on evidence supplied by members of the Prison Service, Home Office Research Unit and Cambridge Institute of Criminology, as well as other sources. Reports by H.O.R.U. and Dr. D. West (Cambridge) were published shortly after the A.C.T.O. findings had been made public.

In place of Preventive Detention the Council suggests that (1) the Courts should be able to pass a sentence of up to ten years imprisonment on persistent offenders; (2) the Prison Department should provide a new type of institute, catering particularly for offenders of inadequate personality and (3) that homes or hostels should be set up where persistent offenders might live on discharge.

The Home Office Research Unit report is based on an analysis of all offenders who were eligible for P.D. in 1956, only a small proportion of whom (one in eight) actually received it. Far from including a high proportion of difficult and dangerous prisoners, for whom maximum security and close con-

trol are essential, (as stated in Prisons and Borstals 1957), it is notable that these men rarely commit the most serious crimes; robberies, large scale frauds or serious violence being almost entirely absent. Yet when Preventive Detention was first introduced, the Home Office had explained that it was not the intention for people who were a nuisance to society rather than a danger to society, to receive the sentence.

This study recognises three distinct groups of offenders who have been given Preventive Detention; the largest group being the persistent petty thief; secondly those responsible for breaking and entering and lastly a mixed group of violent offenders together with the big-time property offenders.

There is a school of thought which considered that P.D. served as a deterrent but the rate of reconviction shows no decrease at the point where a further sentence could make the offender liable to P.D. Furthermore, there is no evidence that P.D. differs in effectiveness from either short sentences or long sentences often given to persistent offenders; the overall reconviction rate for all persistent

offenders regardless of length or type of sentence being about 70 per cent.

After making a comparison between those men who received P.D. and those who were eligible but received other sentences, the report examines the effectiveness of the Advisory Board, sitting to determine whether the offender should enter third stage and be released after serving two-thirds of his sentence, the last few months being spent in prison hostel, or remain in prison until he has completed five-sixths of his sentence. The purpose of the Board was to select those who are less likely to commit crimes again but in practice it was found that the men who were released after serving two-thirds of their sentence were at liberty for slightly longer periods than those who did not get an early discharge, but that in the long run the failure rate of both groups was similar, being approximately 70 per cent. The Advisory Board would have done no worse had they drawn the names from a hat. It is a sobering thought that for those of us who believe that successes and failures can be predicted, such predictions are likely to be no better than chance. It was noted that behaviour in prison was found to bear no relation to a man's progress on release.

The Cambridge study is complementary to that of the Home Office Research Unit. Dr. West's work is based on a careful enquiry into 50 P.D.'s and 50 recidivists

who were not serving P.D. but who had comparable records. The non-P.D.'s had in common that at some stage of their criminal career they had been at liberty for four years. An extensive interview was carried out with each inmate and a social worker visited the closest living relative of all but ten men who refused to give their consent. Most were glad to see the social worker and were eager for advice on how they should behave towards the prisoner. Dr. West found that amongst the non-P.D.'s group 20 out of 50 men had successfully evaded detection, whilst the remainder had genuine gaps. The predominant feature of these men was that they were very dependent, inadequate men who did reasonably well in a protective, sheltered environment where there was someone who could act as a friend and guide and in some cases as a lover. There were a few men who were so solitary as to be quite unable to form any relationship.

In the P.D. group the majority are of the passive-inadequate type, feckless and ineffective in every sphere, who see crime as a means of avoiding the difficulties of life rather than as a deliberately anti-social way of life. Very few men were seriously violent or had aggressive personalities. An undue proportion were seen to be prematurely ageing and there was a high incidence of mental illness. It was Dr. West's opinion that one-third of the group would have been taken on as patients had they

presented themselves at a psychiatric clinic; and the incidence of real insanity was also high. Similarly the incidence of physical illness and disability was much higher than would be expected amongst a population of working men of similar age.

Whilst 40 per cent had been to Approved School and/or Borstal, a similar proportion had been free of juvenile offences and had only started their criminal life at a comparatively late stage. Very few came from criminal backgrounds. The proportion of unmarried men was very high, reflecting the low capacity of these men to form any kind of satisfactory relationship.

About one in eight might be classified as a reasonably socialised normal person. These men who were well-adjusted to a criminal way of life might be called professional criminals, in that they plan and execute their crimes carefully although they get caught soon after. Of the remainder the largest group (52 per cent) were the passive inadequates who are so immature that they have never started to learn to live with other people effectively. They tend to be habitually non-participants in life—contracting out, as it were. Not surprisingly a large proportion of the sex offenders were found amongst this group. The active inadequates (30 per cent) do in fact attempt to take part but in an inept and inappropriate fashion. For short periods such a person is good company and he can be a

model prisoner but it is as if he has to play-act the part of an adult rather than living up to adult standards.

The following comment of Dr. West is especially pertinent: "As things are there are many inadequates who find their way to high security prisons where they languish for years at a high cost to the State and become increasingly institutionalised and increasingly dependent. Although a great nuisance they hardly constitute all dangerous menaces. If a hostel regime suffices to keep inadequates under control it perhaps encourages them to try and make a way in honest work. This would seem a better solution for all concerned."

All three reports stress the importance of hostels for the inadequate persistent offenders, recognising that whilst this offers a much better prospect of success it is only to be expected that the failure rate will be high.

These three reports are to be welcomed because of their objectivity. Many myths about P.D.'s which have grown up over the years, have been effectively dealt with. Chief amongst them is the belief that there is a stereotype habitual criminal. In fact many different types of individuals are included. Some are skilful criminals, others are petty thieves. Some come from good homes and some are the products of broken homes. Some have never worked at all, whilst others have been in steady employment for many years before

committing their first offence. Perhaps the one factor which they share is that over the years they have become lonely social derelicts. It is now recognised that detention in custody for a long period is not an effective way of dealing with such people. We shall look forward with interest to the development of the new prison at Blundeston, catering for recidivists of inadequate personality.

Of these three reports Dr. West's \*book is especially recommended to the general reader who wants to learn about the kind of people who have become recidivists and he provides some stimulating suggestions as to how these people might be dealt with.

*The Habitual Criminal* \*  
Cambridge Study in Criminology  
Macmillan. 25s. 0d.

## Institute for Social Research

THE INSTITUTE FOR SOCIAL RESEARCH has as its primary function to sponsor and engage in both theoretical and practical research of sociological interest. This involves carrying out surveys, either qualitative or quantitative, and also setting up experimental projects. The Institute also undertakes some work of a commercial nature.

The Institute has been engaged, for the past year, on a community study project designed to isolate and analyse special problems which confront people living in newly developed areas. The location of the project is a housing estate in South East London.

An intensive Medico-social Survey involved fairly lengthy interviews, mainly with housewives, who were also asked to keep weekly diaries recording their day-to-day activities. The questionnaires used were designed to reveal any problem of estate life and their effect on the mental and physical health of the housewife. Similar interviews were employed with smaller samples of old people and teenagers.

In the Community Activation Program housewives were encouraged to come to the project H.Q. and a number of groups were formed. These were mainly for social and recreational activities, but they also had therapeutic side effects. Members were encouraged to take over the organisation of the groups, and at the same time were brought to see the processes and value of community development, so that they might take a more active part in the life of the community. They would also be responsible for a number of social services: for example, Old People's Luncheon Club, Day Nursery, and friendly visiting of the home-bound. It is hoped that the creation of reference groups in this way will have the effect of reducing the frequency of psychological and social disorders and "Estate Malaise".

In addition, the project grew and became involved in a certain amount of case work which led to the incorporation of action-survey techniques in the overall project. For this aspect of the work a qualified social worker was employed.

Such "commercial" work as is undertaken by the Institute is that which is commissioned by industry (both management and labour), publishing houses, radio and television, local authorities, statutory and voluntary organisations.

Conferences and Seminars for discussion and comparison of current work are organised from time to time by the Institute. In June there was a conference in London, the theme of which was "Special Problems in the Treatment of Family Disorders." Among the speakers were: Dr. J. G. Howells, Director of the Department of Family Psychiatry, Ipswich, and Dr. Derek Miller, of the Tavistock Clinic.